



Public Health
England

Protecting and improving the nation's health

Exercise Jigar

Management of a Gastrointestinal
Outbreak in Cheshire & Merseyside
9th December 2019

#ExerciseJigar

Agenda

12.15-1.00 – Registration & Networking

1.00-1.10 – Introduction & Welcome

1.10-1.20 – Exercise Overview

1.20-2.50 – Scenario Work

2.50-3.00 – Refreshment Break

3.00-3.30 – Scenario Work

3.30-4.00 – Feedback and Discussion

4.00-4.30 – Relevant Topic Updates: Listeria, Invasive Group A Streptococcus

4.30 - Close

Exercise Purpose

Exercise Aim:

To raise awareness of the processes and procedures to be undertaken following an outbreak of Gastrointestinal illness (GI) in Cheshire and Merseyside.

Exercise Objectives:

1. To test the preparedness of multiagency partners in order to investigate, control and manage an outbreak of serious foodborne illness, both within and outside working hours.
2. To test the capacity and capability of all partners to provide effective public health response, both within and outside working hours.
3. To clarify and better understand roles and responsibilities of all partners.
4. To support and inform development of effective multi-agency communications, intelligence sharing and support networks.
5. To test the alignment between local and the Cheshire & Merseyside Multiagency Infectious Diseases Outbreak Control Plans.
6. To consider the resources required during an outbreak and mutual aid arrangements across Cheshire & Merseyside and how these can be achieved.

Exercise Format

- This exercise is designed to form the basis for a facilitated discussion on a serious outbreak of gastrointestinal illness.
- You are provided with updates of the scenario, followed by a series of questions.
- Feedback will be completed at the end of the session.
- At the end of the exercise you will be asked to prioritise 3 main issues identified and measures to locally address the issues. These may be within and out of hours.

How to Participate

- Discuss the scenario and the questions within your groups.
- Artificialities and limitations – make allowances, don't challenge the scenario.
- Full participation to get the most from the exercise - enter into the spirit of the exercise.
- Remain focussed on the objectives.
- Be prepared to feedback your answers.

Jigar Scenario

- On the morning of Friday 6th December, a Hospital Microbiologist notifies the C&M Health Protection Team (HPT) of a blood sample positive for Hepatitis A. Sample was sent by the GP for an adult patient. Clinical details on sample: "case has diarrhoea and looks jaundiced".
- The Environmental Health Team, East Cheshire complete the Hepatitis A questionnaire with the case. The case lives with their husband, child aged 9 months, mother and father in-law.
- The case attended a wedding at Lovelylake Hall in Macclesfield on 14th November, with guests from the UK and India. The wedding used an outside catering company based in Manchester.

Please Consider the Following Questions

- What action would you take?
- What will be your organisations role be in the situation?
- What would be your response time?
- What are the capacity and resource issues for your organisation at this time?
- What would you expect other partners to be doing?
- What additional information do you need and where would you get it from?

Answers

C&M HPT

- Risk assessment and exclusion advice to case and symptomatic household contacts: 7-days after onset of jaundice/symptoms if no jaundice.
- Good hygiene and enhanced cleaning advice to case and household contacts.
- Review questionnaire.
- Arrange clinical assessment, hepatitis A testing if symptomatic, vaccination and immunoglobulin for close contacts via GP Practice (telephone call and letter).
 - < 12 months: Vaccination of carers
 - 12 month-59 years: Vaccination
 - 60+ years: Vaccination and Immunoglobulin (lower response to vaccine)
 - Chronic liver disease/HIV positive/immunosuppressed: Vaccination and Immunoglobulin
- Ensure forwarding of case sample to PHE reference laboratory for genotyping.

GP Practice: Within 14 days post-exposure

- Clinically assess close contacts, testing of symptomatic, arrange delivery of immunoglobulin from Virology MRI, administer vaccine and immunoglobulin.
- Administer 2nd vaccine dose 6-12 months later to ensure long-term protection.

Cheshire East EHO

- Inform Manchester EHO's of case and request investigation of catering company.
- Assessment of Lovelylake Hall: historical issues, star-rating.

Jigar Update

- It's Monday 9th December. The C&M HPT are notified of a second adult case, positive for hepatitis A in the morning. The risk assessment identifies they were also a guest at the wedding at Lovelylake Hall. The case lives in Liverpool with their partner and two children (aged 4 and 8 years).
- For both cases, there are no other exposures e.g. foreign travel.
- The 4-year old child has just started to feel lethargic and nauseous.
- The Manchester Environmental Health Team are visiting the catering company this morning.

Jigar Update

- The catering company employ seven staff on a part-time basis to support larger events.
- One of the staff returned from visiting his family in Mumbai for four weeks on 4th November.
- He started to experience nausea and abdominal pain on 11th November after returning home and noticed his eyes were tinged yellow. He didn't attend his GP Practice as he is on a zero-hours contract.
- He served guests at the wedding and handed out unwrapped, Indian sweets.
- All hot food for the wedding was cooked off-site and re-heated at Lovelylake Hall. Salads were prepared at Lovelylake Hall on the day of the wedding. Sweets were made off-site and served cold.

Please Consider the Following Questions

- Is this an outbreak?
- What action would you take now and what will you prioritise?
- What will be your organisations role be in the situation?
- What would be your response time?
- What are the capacity and resource issues for your organisation at this time?
- What would you expect other partners to be doing?
- What additional information do you need and where would you get it from?
- What messages do you want to give to your partners, the public and media at this time and how would you do this?

Answers

Is an Outbreak

- 2 confirmed hepatitis A cases linked in time and place (wedding at Lovelylake Hall)
- Outbreak Control Team (OCT) convened to investigate and control the situation with representatives from:
 - Public Health
 - Environmental Health
 - Clinical Commissioning Groups
 - Microbiologist
 - PHE Communications
 - PHE Business Support Team (BST)

C&M HPT

- Review 2nd questionnaire. Risk assessment and exclusion advice to case and symptomatic household contacts: 7-days after onset of jaundice/symptoms.
- Good hygiene and enhanced cleaning advice to case and household contacts.
- Arrange clinical assessment, hepatitis A testing if symptomatic and vaccination for close contacts via GP Practice (telephone call and letter).
- Ensure forwarding of case sample to PHE reference laboratory for genotyping.
- Convene and chair OCT.
- Notify all affected HPT's to situation.
- Notify Field Epidemiology Service.
- Notify National Situation Awareness Cell (NSAC).

Answers

C&M HPT

- Epidemiological investigation:
 - Obtain list with contact numbers of all wedding guests from Bride/Groom and staff at Lovelylake Hall and catering company.
 - Send inform and advise letter to all wedding guests and staff.
 - Review questionnaires from symptomatic guests/staff.
 - Consider epidemiological study (online survey all to guests/staff) to identify potential source.
- Microbiological investigation:
 - Obtain i-LOG number from MRI.
 - Collation of hepatitis A test results from all symptomatic guests/staff.
 - Ensure all hepatitis A positive samples sent to PHE reference laboratory for genotyping.
- Communications: Develop press holding statement and share with partners.

GP Practices: Within 14 days post-exposure

- Clinically assess symptomatic guests/staff and close contacts, hepatitis A testing, arrange and administer vaccine/immunoglobulin as appropriate.
- Administer 2nd vaccine dose 6-12 months later to ensure long-term protection.

Clinical Commissioning Groups

- Participate in OCT meetings and undertake delegated actions.
- Share holding press statement with CCG Communications and monitor media interest.

Answers

EHO's

- Participate in OCT meetings and undertake delegated actions.
- Environmental investigation of Lovelylake Hall and catering company: Staff lists and illness, temperature control records, staff training records, food sources, inspection of kitchen, toilets.
- Consider environmental samples and send to PHE FWE laboratory with i-LOG number.
- Advice and remediation recommendations to Lovelylake Hall and catering company.
- Complete questionnaires with symptomatic guests/staff.

Public Health

- Participate in OCT meetings and undertake delegated actions.
- Share holding press statement with Local Authority Communications and monitor media interest.
- Notify and update Senior Leadership Team (SLT) and Councillors.

Microbiologist

- Advise on microbiological tests.
- Prompt notification of hepatitis A results to HPT.
- Ensure all hepatitis A positive samples sent to PHE reference laboratory for genotyping.

Jigar Update

- The Outbreak Control Team (OCT) met on Monday afternoon (9th December).
- Established 150 guests attended the wedding at Lovelylake Hall, that are scattered across the country, including most Cheshire and Merseyside areas.
- The C&M HPT follow up the guests and staff from Lovelylake Hall and catering company with a letter. Those experiencing symptoms are asked to take the letter to their GP Practice for clinical assessment and testing.
- All HPU's involved are informed of the incident.

Jigar Update

- It's now Friday 13th December. Whilst attending the GP Practice for vaccination the 4-year old child of the second case was clinically assessed as they were unwell.
- The child was tested for hepatitis A and is positive. They have attended their primary school whilst feeling unwell, with no absences. They have an older sibling in Year 3 in the same school who is asymptomatic.
- The OCT recommends environmental assessment of the school, risk assessment of exposure and vaccination of contacts as appropriate.
- Exposed contacts will need vaccination/Immunoglobulin as appropriate within 14 days of exposure to case (post-exposure prophylaxis).

Please Consider the Following Questions

- What would be your response time?
- What are the roles and responsibilities of partners?
- What resource issues would you need to consider?
- What additional information do you need and who would obtain it?
- What messages do you want to give to your partners, the public and media at this time and how would you do this?

Answers

C&M HPT

- Chair OCT meeting to coordinate risk assessment and control measures with representatives from:
 - Public Health
 - Environmental Health
 - School
 - Community Infection Prevention and Control Team (CIPCT)
 - School Immunisation Team (SIT) or equivalent service
 - Clinical Commissioning Group
 - Microbiologist
 - PHE Communications
 - PHE BST
- Develop a letter for the school to send to all parents/carers to advise them of situation.
- Develop a letter for all GP Practices to advise them of situation and only vaccinate staff/pupils not participating in school session.
- Arrange clinical assessment and vaccination for school staff via GP Practice if they cannot be done by SIT (telephone call and letter).
- Attend meeting for parents/carers at school with CIPCT and/or Public Health.
- Update press holding statement, social media guidance to school and monitor media interest.
- Facilitate provision of immunoglobulin from Virology MRI to school vaccination session if required.

Answers

CIPCT

- Undertake environmental assessment of school and risk assessment of exposure with EHO:
 - Include ALL staff (domestic, catering, teaching), volunteers and after-school clubs.
 - Consider degree of mixing between classes/years at play, meal times and toilets for exposure.

(The OCT decision was to vaccinate **Reception, Year 1 and Year 2 pupils** and associated staff based on CIPCT assessment).
- Give hygiene and enhanced environmental cleaning advice to school.
- Support meeting for parents/carers with HPT and/or Public Health and vaccination session.

School Immunisation Team (or equivalent): Within 14 days post-exposure

- Does 0-19 contract include vaccination of adults as part of outbreak management? (Peer-to-peer vaccination used for seasonal influenza).
- Share staff/parent/carers informed consent letter with school. Include questions to ascertain hepatitis A immunity status and exclusions.
- Logistical Coordination: risk assessment of school room, vaccine supply, cold-chain, infection control and immunisation of staff/pupils.
- Collation of informed consent forms and production of vaccination staff/pupil lists.
- Undertake vaccination sessions.
- Record vaccination completion (including batch number) and final numbers.
- Share staff/pupil vaccination record with GP Practices and Child Health.
- Share vaccination uptake data with OCT.

Answers

School

- Notify all staff, parent governors and education authority (LA/Academy) of situation.
- Distribute HPT letter on school letter-head to all parents/carers.
- Distribute and collate completed informed consent letter to staff and parents/carers of pupils requiring vaccination.
- Facilitate a meeting for parents/carers.
- Organise a time in school schedule and room to hold vaccination session. Give option for parents/carers to attend with child.
- Liaise with PHE Communications for media statements, social media guidance and monitoring.

EHO's

- Undertake joint environmental assessment of school and risk assessment of staff/pupil exposure with CIPCT.

Clinical Commissioning Group

- Patient Group Directive (PGD) for vaccination of children and adults as part of an outbreak management.
- Mobilise NHS resources needed to conduct vaccination session.
- Procurement of vaccine for children and adults.
- Cascade letter to GP Practices to advise them of situation and only vaccinate staff/pupils not participating in school session.
- Share updated holding press statement with Communications and monitor media interest.

Answers

Public Health

- Inclusion of adult vaccination as part of outbreak management in 0-19 contract.
- Share updated press statement with LA Communications, facilitate social media guidance for school and monitor media interest.
- Update education, SLT and Councillors.
- Attend meeting for parents/carers at school with HPT and CIPCT.

GP Practices: Within 14 days post-exposure

- Clinically assess school staff if cannot be vaccinated by SIT and pupils not vaccinated during school session, testing of symptomatic, arrange delivery of immunoglobulin from Virology MRI if required, administer vaccine and immunoglobulin.
- Administer 2nd vaccine dose 6-12 months later to ensure long-term protection.

Feedback

- 3 identified issues per group
- Local measures to address the issues