

# Management of contacts of invasive group A Streptococcus (iGAS) infection in community settings

SHPN guide to using the external guidance

---

<b>Version</b>	1.1
<b>Published</b>	21 December 2023 (Latest release)
<b>Type</b>	Guidance
<b>Author</b>	Public Health Scotland
<b>Topics</b>	Conditions and diseases Health protection

---

## Contents

### Overview

- Intended audience

- What the guidance covers

### Guide for use in Scotland

- Outbreaks in schools

- Contacts in acute and maternity settings

- Cases with international travel

- Outbreaks with co-circulating chickenpox

[View the external guidance](#)

---

## Overview

This Scottish Health Protection Network (SHPN) guide should be used alongside the external guidance that it relates to.

This guide covers the UKHSA 'UK guidelines for the management of contacts of invasive group A Streptococcus (iGAS) infection in community settings'.

This external guidance has been approved for use in Scotland by the SHPN Guidance Group (SHPN-GG).

This guidance was developed as a UK guideline by a working group that included PHS representation.

## Intended audience

This guidance is for health protection professionals only.

Other people who require advice should contact their local health protection team.

## What the guidance covers

It is for the management of possible, probable and confirmed cases of iGAS infection and their close contacts, in community settings.

## Guide for use in Scotland

### Outbreaks in schools

UKHSA guidance on the public health management of scarlet fever outbreaks in school, nurseries and childcare settings is available.

The SHPN has not yet adopted this guidance so no guidance on adaptation for use in Scotland is available.

Health Protection Teams (HPTs) should interpret the guidance to fit their local context. If you have any queries when applying this guidance, please contact [p hs.flu@p hs.scot](mailto:p hs.flu@p hs.scot).

HPTs are requested to report outbreaks of any linked iGAS or severe GAS cases, or where wider chemoprophylaxis is being considered.

### Contacts in acute and maternity settings

It has been identified that the definition of contact and high risk contact in the 2011 Guidelines for prevention and control of group A streptococcal infection in acute healthcare and maternity settings in the UK is not aligned with the definitions used in this updated community guidance.

It is recommended that:

- Contacts in acute and maternity settings be identified in line with the updated definition of contact (section 2.2)
- Prophylaxis be considered for contacts in acute and maternity settings in line with the updated definition of high-risk contact (section 2.3)

The following recommendations for using this guidance in Scotland were agreed by the SHPN through the agreed review and adoption process.

### Cases with international travel

The guidance explains the requirement for WHO member states to report events of public health concern in accordance with the International Health Regulations (IHR) (2005).

Communication with other countries and with WHO under the IHR (2005) is via the UK IHR National Focal Point (UK IHR NFP).

Contact the PHS Travel and International Health team to inform the team of all probable or confirmed iGAS cases who:

- have travelled on an aircraft (for any length of time, including both domestic and foreign travel)
- were abroad during any point in their infectious period
- are likely to have acquired their infection abroad
- have identified close contacts abroad

PHS will advise on information that is required on these cases and ensure data is passed to NFP in a secure manner.

## Contact

---

**In hours**

**Email:** [p hs.travelteam@p hs.scot](mailto:p hs.travelteam@p hs.scot)

**Phone:** 0141 300 1137

## Outbreaks with co-circulating chickenpox

The guidance recommends consideration of varicella vaccination on a case-by-case basis where chickenpox is co-circulating in a nursery or pre-school setting where an iGAS case has been notified.

Varicella vaccine administered within 3 days of exposure may be effective in preventing chickenpox.

A patient group direction (PGD) template for use in Scotland has been developed.

You can request this by emailing [phs.immunisation@phs.scot](mailto:phs.immunisation@phs.scot)

Note that practitioners **must not** use the PGD template until it has been authorised – this is a legal requirement (Human Medicines regulation (2012)).

View a full list of all of our patient group direction templates.

## View the external guidance

This external guidance should be used together with the guide for use in Scotland provided on these pages.

[View iGAS guidelines](#)

---

Last updated: 21 March 2024

## Version history

### 21 December 2023 - Version 1.1

- Updated agreed to align contact definition and 'at risk contact' follow up between acute, maternity and community settings.
- Link to UKHSA guidance on scarlet fever outbreak in schools and nurseries added.
- Email contact for Travel Team updated.

### 29 September 2023 - Version 1.0

First publication in HTML format.

---

## Follow us

Twitter

Instagram

LinkedIn

© Public Health Scotland

**OGI** All content is available under the Open Government Licence v3.0, except where stated otherwise.