

NOROVIRUS KEY MESSAGES

(Applies to both suspected & confirmed cases)

Areas affected by Gastroenteritis/Norovirus (i.e. with closed bays or closed ward)

- Ensure appropriate notices are visible informing staff and visitors.
- Visitors should be discouraged
- Defer non-urgent investigations and therapies whilst not delaying patient discharge
- All visitors including staff should:
 - Report to the nurse in charge
 - Observe the same precautions as the ward based staff
 - Not visit multiple areas (if necessary, visit affected ward last)
- Adhere to strict hand hygiene (SICP). Wash hands with soap and water (rather than gel)

Patient Care

- Collect stool and/or vomit specimens from all affected patients and request Norovirus test
- Patients are at risk of dehydration, staff need to ensure patients maintain fluid levels
- Staff must maintain current details of patient signs & symptoms including fever, nausea & vomiting
- Diarrhoeal symptoms should be recorded using Bristol Stool Chart, including date and time
- Support patients to clean their hands before eating (provide wipes if necessary)

Personal Protective Equipment (PPE)

- Aprons and gloves must be put on before entering affected rooms
- Masks and eye protection must be put on if risk of splashing of body fluids is anticipated
- PPE must be changed between patients and tasks on the same patient
- Dispose of PPE as clinical waste before leaving affected rooms

Cleaning

- Commodes, patient equipment and environment must be cleaned with either:-
 - Actichlor Plus - 1 tablet dissolved in a litre of water
 - Fuse - 1 sachet diluted in 5 litres of water

Staff Exclusion

- Staff must not return to work until 48 hours clear of all gastrointestinal symptoms, including abdominal pain or nausea
- Staff must inform a member of the Occupational Health Service (OHS) that they are unwell with gastrointestinal symptoms
- Symptomatic absence on SSTS is recorded as sickness; the next 48hrs is exclusion providing the staff member has contacted the OHS

Staff Movement and Dress

- Reduce staff movement to and from affected areas. Staff working on closed wards should not work on other wards. If unavoidable, visit affected areas last
- If directly exposed to vomit or diarrhoea, shower and change (as close to the incident as possible) and report to the Occupational Health Service (OHS) immediately
- The Dress Code / Uniform Policy details the requirements for all staff including:
 - All staff entering a clinical area: arms must be bare below the elbow
 - Nails – should be short and well manicured - no false nails or nail varnish
- Bank or Agency Staff;
 - Closed ward: attempt to retain individual bank staff, to avoid movement between wards
 - If possible, bank staff who have worked in closed wards should not work elsewhere for 48hrs
 - Closed bays: avoid allocating closed bay to bank staff, to minimise restriction to other wards

Fans

- Fans should not be used in clinical areas to avoid further airborne dissemination of virus

Laundry

- All linen from closed bays/wards including staff uniforms should be treated as infected
- Staff in affected areas who have sanction to wash uniforms at home are to send uniforms to laundry to be washed first before taking them home
- Personal laundry must be managed according to local guidelines; relatives that wish to take laundry home must be informed of any risk they face. Giving soiled linen to relatives must be avoided, regardless of outbreak status. See '[washing clothes at home](#)' leaflet for more information.

Food

- Food in the ward that may have been exposed to Gastroenteritis/Norovirus must be discarded
- Don't share unwrapped food, e.g. sugar in bowls, nuts, crisps, chocolates etc:
- Keep food trolleys outside affected rooms with trays passed to a colleague inside the room
- Bottled water for patients must be ordered from the catering department
- Use disposable cups and send cup holders to kitchen for washing

Flowers

- Flowers are not permitted in rooms that have been closed for infection control purposes

Ward Clerks

- Closed Ward: Ward clerks must perform their duties in closed ward until ward status has changed
- Wards with closed bays and isolation rooms: Ward clerks can move between wards with closed bays. They must not enter the closed bay and leave affected areas until last.

AHP/ Pharmacy/ Specialist Nurses/ Other Patient Services/ Social Work

- Essential services must continue to avoid delays in discharge or compromising patient care
- Visit outbreak areas last
- Outbreak Control Action Cards for staff groups are on [Infection Control Manual Intranet site](#)

Voluntary services (including RVS and patient library)

- Key staff will be informed of situation by IPCT
 - Closed ward: Alternative arrangements should be made for newspaper delivery etc
 - Wards with closed bays and isolation rooms: Trolleys should remain outside affected bays with individual items passed to a staff member inside the room who then distributes to patients.

Patient discharge to own home

- Any patient may be discharged to their own home at any time if clinically appropriate
- Inform relatives of risk and precautions including hand hygiene and washing of laundry
- Advise patients to contact their GP or NHS24 if symptoms develop after discharge
- Contact IPCT if patient is to be discharged with a care package

Patient discharge to nursing or residential homes

- Patients must be asymptomatic for 48 hours before discharge to an unaffected care home
- Symptomatic patients can return to their care home, if it is affected by a Norovirus outbreak; this requires agreement with the IPCT
- Asymptomatic patients potentially exposed may only be discharged with IPCT agreement

Patient discharge or transfer to other hospitals or community-based institutions

- This should be delayed until the patient has been asymptomatic for at least 48 hours
- Discuss urgent transfers to other hospitals with the IPCT/ receiving unit/ patients' consultant
- Potentially exposed asymptomatic patients may only be discharged with IPCT agreement

Areas NOT affected by Gastroenteritis/Norovirus

- Keep up-to-date with current Gastroenteritis/Norovirus situation
- Take actions in your area to support affected areas e.g. discharge planning
- Ensure full compliance with Standard Infection Control Precautions
- Ensure full compliance with Dress Code/Uniform Policy
- Be vigilant for early signs of staff or patients with symptoms
 - Take rapid action to isolate/quarantine
 - Communicate with the Infection Prevention & Control Team (IPCT)
- Staff who develop symptoms must go home and notify Occupational Health Service (OHS)