

Norovirus & Outbreaks

Healthcare Facilities Quick Guide



Norovirus is a contagious virus that causes diarrhea and vomiting. Norovirus outbreaks can be especially problematic in healthcare facilities as they are difficult to control and the virus lasts a long time in the environment. Bleach solution or <u>EPA-approved products</u> are best for disinfection as these can eliminate most pathogens.

Prevention and control of **norovirus** should focus on limiting direct contact with infected persons and contact with contaminated surfaces. Handwashing is recommended because alcohol-based hand sanitizer is NOT effective against norovirus.





If you suspect an outbreak, contact your <u>local health</u> <u>department</u> or the Tennessee Department of Health (615-741-7247) for assistance and guidance on cleaning and response. The Health Department might ask about the number and location of ill patients and staff as well as details about the facility.

(CTRL-click posters for larger versions)









Prevention resources can be found here: https://www.cdc.gov/norovirus/multimedia.html

Norovirus Checklist

Recognition, Reporting & Testing
Upon suspicion of a norovirus outbreak, notify your <u>local health department</u> or call TDH at (615-741-7247)
Maintain a line listing of ill residents and staff (Example can be found here)
Collect and submit 5 specimens from ill residents and staff as soon as an outbreak is suspected
Outbreak is considered resolved when 96 hours have elapsed from resolution of the last case's symptoms
Control Measures for Facility
Note: Decisions to institute infection control measures should NOT be delayed for specimen results.
Infection Control:
Institute contact precautions for ill residents during outbreak
Use mask, gloves and gowns while caring for ill residents and cleaning up feces or vomitus
Use dedicated or disposable equipment for resident care
Separate ill residents from well residents as much as possible
Minimize resident and staff movement between affected and unaffected units/wards
Enforce strict hand hygiene for all facility staff
Encourage washing hands with soap and water instead of using hand sanitizer. Handwashing is recommended as hand sanitizer is NOT effective against norovirus
Environmental Controls:
Use <u>EPA-approved products</u> for use against norovirus for routine cleaning and disinfection
Clean all high traffic areas and high touch items (faucets, door handles, and toilet or bath rails)
Clean soiled carpets and soft furnishings with hot water and detergent or steam clean as appropriate. DO NOT VACUUM
Handle soiled linens carefully using appropriate infection control precautions. DO NOT SHAKE
Continue thorough cleaning of affected personal and communal areas until outbreak is consider resolved
Administrative Controls:
Exclude ill staff from work for at least 48 hours after symptoms have resolved
Suspend group activities as much as possible until after the outbreak is contained
Consider risks/benefits of limiting dining hall services
Post signage about the outbreak and proper hand hygiene (samples signage can be found here)
Restrict admissions if outbreak escalates or is prolonged
Consider delaying transfer. If not possible, notify transfer facility of outbreak
Recommendations for Residents & Visitors
Encourage ill residents to stay in their room for at least 48 hours after symptoms have resolved
Promote good hand hygiene for residents: after using the toilet, having contact with an ill individual, and before preparing food, eating or drinking. Handwashing is recommended as hand sanitizer is NOT effective against norovirus
 Encourage ill visitors to wait at least 48 hours after symptoms resolve before visiting residents Consider restricting outside visitation until the outbreak has subsided
Internal and External Communications
Identify a single point of contact for internal communications
Identify a single point of contact for external communications
Notify staff of outbreak and control measures and conduct enhanced surveillance for ill staff
Notify residents/guardians of outbreak and control measures and request ill residents report to nursing staff
Consider a final communication to staff residents, and quardians when the outbreak has resolved