# Norovirus Outbreak Checklist

**Complete as soon as a norovirus outbreak is suspected**

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| **DAY 0 ACTIONS** | **Date the outbreak was identified:** | | |
| **PATIENT PLACEMENT, TRANSFERS & ADMISSIONS** | | Tick: | |
| Symptomatic residents asked to remain in their rooms with doors closed and discouraged from using communal areas until symptom-free for ≥48 hours | | |  |
| Discuss suspension of non-essential care home admissions with the Health Protection Team (HPT) | | |  |
| Following HPT advice, all inter-care transfers/medical appointments suspended unless clinically essential and receiving units (ambulances/hospitals) informed of the situation | | |  |
| **INFORMATION/ADVICE** | | | |
| Local Health Protection Team (HPT) contacted and informed of the situation | | |  |
| Symptomatic residents’ GPs contacted, and clinical advice sought if required | | |  |
| All staff members (housekeeping, catering, care) have been informed of the situation | | |  |
| All residents/visitors informed and given ‘Norovirus – Information for residents and visitors’ Sheet and Washing Clothes at Home [Leaflets](https://www.hps.scot.nhs.uk/haiic/ic/resourcedetail.aspx?id=945) | | |  |
| Appropriate posters displayed in highly visible locations on entry to the home and affected areas | | |  |
| The Norovirus Outbreak Daily Actions Checklist is in place and being used by care staff | | |  |
| **CLINICAL** | | | |
| Stool samples collected and sent to laboratory (on advice of HPT) | | |  |
| Stool chart started for all symptomatic patients and daily hydration checks in place | | |  |
| **STAFF** | | | |
| Any staff member reporting symptoms have been sent home immediately and referred to their GP for stool sampling (on advice from HPT)  *(Recovering staff can return to work once symptom-free for ≥48 hours)* | | |  |
| Non-essential staff have been contacted and advised not to attend | | |  |
| Where possible, care staff allocated to symptomatic or non-symptomatic residents, but not both | | |  |
| **VISITORS** | | | |
| Temporary suspension of visiting has been discussed with the HPT | | |  |
| Any visitors reporting symptoms have been sent home immediately and discouraged from visiting until symptom-free for ≥48 hours | | |  |
| **HAND HYGIENE** | | | |
| Staff/visitors/residents have been advised to use liquid soap and warm water | | |  |
| Residents encouraged and assisted to wash hands before meals and after using the toilet | | |  |
| Staff advised to wash hands after every episode of care, after cleaning, and prior to entering or leaving a residents room | | |  |
| **PERSONAL PROTECTIVE EQUIPMENT (PPE)** | | | |
| Disposable aprons and gloves are worn during direct care, when cleaning and changing bed linen | | |  |
| Fluid resistant surgical face masks (FRSM) worn if vomiting is present and when cleaning up spills of vomit/diarrhoea | | |  |
| Hand hygiene is performed before putting on, and after taking off, PPE | | |  |
| PPE used for one procedure/episode of care then discarded as healthcare waste | | |  |
| **CARE EQUIPMENT** | | | |
| Single use care equipment is in use wherever possible; other care equipment (*such as commodes, wash bowls, lifting equipment*) is dedicated to a single patient | | |  |
| All reusable care equipment is decontaminated between each use using a cleaning agent with 1000 parts per million (ppm) available chlorine (av cl.) as per [Appendix 7](http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-7-best-practice-decontamination-of-reusable-non-invasive-care-equipment/) of the NIPCM | | |  |
| **CLEANING** | | | |
| Staff to commence **enhanced cleaning** of symptomatic residents rooms preferably at least twice daily  *(use combined detergent/disinfectant containing 1,000 ppm av cl; include all hard surfaces, equipment, and frequently touched surfaces e.g. door handles, light switches, bed rails)* | | |  |
| Spillages of vomit/diarrhoea cleaned immediately as per [Appendix 9](http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-9-best-practice-management-of-blood-and-body-fluid-spillages/) of the NIPCM  (spillage removed with paper towels; area disinfected using a cleaning agent containing 1,000 ppm av cl. Include a 3 metre circumference; treat all waste arising from cleaning as infectious) | | |  |
| Bed linen treated as infectious and placed in a water-soluble bag for laundering as per [Appendix 8](http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-8-best-practice-management-of-linen-at-care-level/) of the NIPCM | | |  |
| Carpets and soft furnishings decontaminated with hot soapy water (or carpet shampoo) and steam cleaned (if available) according to manufacturer instructions as per [Appendix 9](http://www.nipcm.hps.scot.nhs.uk/media/1412/nipcm-appendix9-20180712.pdf) of the NIPCM | | |  |
| Disposable cloths and washable mops are in use in affected areas | | |  |
| A terminal clean of residents rooms performed once resident is symptom-free for ≥48 hours; curtains, linen, carpets and soft furnishings included | | |  |
| A terminal clean of the wider facility performed once all residents and staff have been symptom-free for ≥48 hours (i.e. once the outbreak is over, with HPT agreement) | | |  |

Further information on Standard Infection Control Precautions (SICPs) and Transmission Based Precautions (TBPs) can be found in the National Infection Prevention and Control Manual (NIPCM) [**http://www.nipcm.scot.nhs.uk/**](http://www.nipcm.scot.nhs.uk/)