## Hand hygiene:

Hand Hygiene is one of the most effective ways to prevent the spread of norovirus. As norovirus remains active for several days on surfaces that have been touched, staff must remember that hands can and will transfer the virus. Alcohol based hand rubs (ABHRs) will not kill or remove noroviruses, therefore:

- Always use liquid soap and warm running water for routine hand hygiene.
- Do not use ABHRs alone, when there is an outbreak of diarrhoea and/or vomiting (possible norovirus outbreak), or when looking after children who have diarrhoea and/or vomiting.
- Hands can and will be contaminated with the virus during routine activities like touching doors and handles therefore frequent hand washing is necessary. Hands should be washed before and after using the toilet, before and after snack or lunch and after any activities where there

## **Personal Protective Equipment (PPE):**

- Use suitable PPE, including, disposable gloves and disposable plastic aprons to prevent personal contamination with body fluids including contact with vomit.
- Staff must remember that anyone wearing PPE (e.g. gloves and an apron) and coming into contact with spillages or contaminated surfaces can spread norovirus by glove contact on clean surfaces.
- Aprons and gloves must be changed and disposed of, then hands washed between contacts with different residents (even when they are being cared for in the same room).
- On removal of PPE hands must be washed with liquid soap and warm running water and dried with paper towels.

## **Environmental precautions:**

Standard environmental cleaning regimens using detergents may not be effective enough against noroviruses.

- If pupils have been vomiting, remove and discard all unwrapped foods e.g. fruit. This is because anyone eating this food may get sick. In areas affected with norovirus it is advisable to remove uncovered food, drinks and fruit from communal areas.
- Keep the environment clean and as clutter free as possible.
- Ensure that the toilets are prioritised for frequent cleaning (at least daily) with a focus on frequently-touched surfaces (e.g. tables, furniture, toilets, door knobs) and equipment. These frequently touched surfaces should also be cleaned throughout the day and immediately if visibly soiled.
- Wherever possible use a household detergent followed by a chlorine releasing agent diluted to 1,000 ppm available chlorine or a combined chlorine/detergent based product. (Always follow manufacturer's instructions).
- The cleaning of areas where there are pupils or staff who have symptoms should be done separately to the cleaning of areas where the pupils or

- staff do not have symptoms. Separate cleaning equipment should be used for both areas.
- Using disposable cloths clean using general purpose neutral detergent followed by chlorine releasing agent diluted to 1,000 parts per million (ppm) available chlorine, or alternatively decontaminate with a combined detergent/disinfectant product diluted to 1,000 ppm.
- Always follow local cleaning and decontamination guidelines and specific equipment manufacturers' instructions.
- Avoid the use of fans during outbreaks as these can help spread infection.

## Decontamination (cleaning) of spillages of faeces or vomit:

Spillages of faeces and vomit are highly infectious and care must be taken to prevent personal exposure to the person(s) cleaning the spillages. Where a pupil or staff member is sick this area must be cordoned off and cleaned with a bleach based product. Disinfectants that kill the virus will also damage soft furnishings including carpet. There should be a local policy in place for cleaning curtains and soft furnishings.