



# Norovirus Outbreak Management for Childcare Settings

Norovirus was recently approved as the official name for the group of viruses provisionally described as “Norwalk-like viruses”. Norovirus is a common cause of viral gastroenteritis. This illness often occurs during the winter months and is often referred to as ‘stomach flu’ or ‘Winter Vomiting Disease’. Norovirus infections have been linked to outbreaks of vomiting and/or diarrhea in institutions such as child-care centres, long-term care facilities, camps and schools.

**Norovirus are very infectious with little of the virus needed to infect someone. Direct transmission of the virus can occur by touching contaminated hands of someone who is ill or by indirectly touching contaminated objects like doorknobs, railings and light switches. The virus is also easily transmitted indirectly via inanimate objects or substances like clothing, furniture and soap that are capable of transmitting infectious organisms from one individual to another.**

Noroviruses are reported to survive relatively high levels of disinfectant and varying temperatures (freezing to 60°C).

The average incubation period is 24-48 hours and illness lasts 24-60 hours. There is usually an acute onset of nausea, vomiting, abdominal cramps and watery diarrhea. Headache, fever, chills, weakness and muscle pain are sometimes reported. Severe dehydration associated with Norovirus is rare, but can be fatal (e.g., older persons with debilitating health conditions).

## ***Prevention and Control***

Reducing the person-to-person transmission is challenging due to the low amount of virus needed to infect others, the surface contamination of commonly touched objects that makes it easily spread, and the tendency of young children to put their hands in their mouths.

### ***The following measures are currently recommended in the control of an outbreak:***

- Frequent handwashing with soap and water for 15 seconds is the most important means of prevention. Staff and children should wash their hands after they go to the bathroom and before they prepare or eat foods. The additional use of hand sanitizers may be appropriate during an outbreak.

- Children/staff who are symptomatic should be excluded from the facility. They may return to the facility after they are 48 hours symptom-free (48 hours with no diarrhea or vomiting).
- Drink only potable water. Surface water supplies such as lakes, streams, and springs cannot be considered potable unless treated.
- Foodborne outbreaks caused by infectious foodhandlers have been recognized. Ready-to-eat foods that require handling but no further cooking pose a greater risk than cooked foods. It is critical that food handlers who demonstrate symptoms of Norwalk-like virus not be involved in the preparation or service of foods until they are symptom free for 48 hours.
- Enteric precautions (routine practices) should be used when cleaning up vomit or feces. Wearing gloves, protective eyewear, a fluid resistant gown and practicing good handwashing will protect staff from acquiring the virus.
- Soiled clothes should be handled as little as possible. Place soiled articles in plastic bag and send home with the ill child.
- Surfaces that are routinely touched should be cleaned frequently and then disinfected using a high level disinfectant.
- Facilities may consider posting signage for parents/visitors advising them not to enter the facility if they are unwell and to encourage all visitors to wash their hands upon entering the building.

For more information call the Communicable Disease Team ext. 8809



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### ***Diagnosis***

Once an outbreak has been declared Norovirus is usually confirmed from stool samples, through the Public Health Laboratory.

### ***Specimen Collection for Childcare Setting Outbreaks***

Stool specimen collection for testing should begin on the first day of the outbreak. For maximum sensitivity, specimens should be taken within 48 hours of onset while stools are still liquid or semisolid.

A total of three sample vials (bacterial, parasite and viral testing) should be collected in one Enteric Outbreak Kit for each child/staff being tested. Enteric Outbreak Kit specimens should be kept refrigerated at 4°C after collection and prior to pick-up, and then transported immediately to the public health laboratory. All Enteric Outbreak Kits should be labeled completely: each separate vial and the specimen submission bag require the label to be completed. Reference should be made to the attached instructions.