***Health Protection Hub***

***Guide for Schools, Colleges and Nurseries Dealing with Diarrhoea & Vomiting***

Introduction

This guide is designed to be a single easy-to-use resource for staff in educational settings dealing with an outbreak of Diarrhoea and Vomiting. Usually these are viral in nature, such as Norovirus, but may be linked to consumption of food or water and require some investigation and control measures to reduce transmission.

Steps to take

1. Advise the HPH by calling 01952 381800 or emailing [HealthProtectionHub@telford.gov.uk](mailto:HealthProtectionHub@telford.gov.uk)
2. Work through the attached checklist (which may require you to liaise with kitchen and/or cleaning contractors), email it in to the two addresses at the top of the document and address any areas of shortfall identified by the process:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Email completed checklist to** [**healthprotectionhub@telford.gov.uk**](mailto:healthprotectionhub@telford.gov.uk) **and** [**westmidlands.arc@phe.gov.uk**](mailto:westmidlands.arc@phe.gov.uk) | | | | |
| Checklist completed by  Name/position: |  | | | |
| Date: |  | | | |
| Setting: Nursery/School - Primary/ Secondary/ SEN or FE College |  | | | |
| Local Authority/Private/Academy |  | | | |
| If special school, nature of special needs. |  | | | |
| Name, address and postcode |  | | | |
| Confined to one class year group or throughout setting? | Yes / No | | | |
| Pupils confirmed or suspected out of total attending setting/ year group affected – | No. of pupils confirmed | |  | |
| Total No. of pupils in setting | |  | |
| Staff confirmed or suspected out of total employed | No. of staff confirmed | |  | |
| Total No. of staff in setting | |  | |
| Onset date of symptoms in the first case  Is the first case a member of staff or pupil? |  | | | |
| Symptoms:  Vomiting Diarrhoea Fever other |  | | | |
| Any common foods consumed within setting in previous 48 hours?  If yes list foods  below |  | | | |
| Common Foods |  | | | |
| Have cases have tested positive for COVID- |  | | | |
| Potential cohorts affected: e.g.   * class/year group * breakfast or after-school clubs (extra-curricular activity) * school transport * Do any of the cases attend more than one setting? * School trips | Year Group/ Class | Total no. of pupils attending | | |
|  |  | | |
|  |  | |  |
| Have any cases submitted a faecal sample |  | | | |
| Any cases hospitalised or had a confirmed diagnosis |  | | | |
| Communication with staff and students to date ( template letter sent ) |  | | | |
| Any media interest or concerns from pupils, parents or staff? |  | | | |

**Please tick if action is complete and add any comments**

|  |  |
| --- | --- |
| **Outbreak control:** |  |
| Parents/carers of children that are ill whilst at school should be contacted and requested that they come to collect their child from school or nursery.    Affected children should be isolated, if possible from their class mates until collected by their parents/carer.    **Children and Staff that have Norovirus symptoms must remain off school or nursery for 48 Hours after the last episode of vomiting or diarrhoea** |  |
| Sections in red are required control measures |  |
| Hand and respiratory hygiene |  |
| Are there appropriate facilities for handwashing – hand sanitisers, liquid soap and paper towels/tissues and pedal operated bins For teaching children use [e-Bug coronavirus (COVID-19) website](https://e-bug.eu/eng_home.aspx?cc=eng&ss=1&t=Information%20about%20the%20Coronavirus) |  |
| A handwashing programme should be put into place that encourages children to wash their hands at the start of the school day, after using the toilet, after play, before and after eating, after touching pets and animals, and encouraging parents to let their children wash their hands at the end of the school day |  |
| Are younger children and children with complex needs supervised, helped with hand hygiene? |  |
| Cleaning |  |
| The frequency of toilet cleaning should be increased, eg clean after each break time and after a child has been sick or had diarrhoea. |  |
| Touch points, e.g. taps, toilet flush handles, door handles, should be cleaned regularly with a hypochlorite (bleach based) solution 1,000 parts per million. Read manufacturer’s instructions and do not use on fabrics and carpets |  |
| Soiled children’s clothing should be sealed in a plastic bag to go home. It should not be washed on site |  |
| Potties should be cleaned and disinfected after use and should only be used by the same child. If this is not possible they should be cleaned and disinfected after use with 1000 parts per million hypochlorite (bleach-based solution) |  |
| Toys used by the children should be washed and if possible disinfected. Soft toys should be machine washable; hard surface toys are more easily washed and disinfected. |  |
| Advice on [cleaning](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings) after a suspected/confirmed case has left setting. Clean surfaces with a household detergent followed by disinfection (1000 ppm available chlorine or a disinfectant that works against enveloped viruses). Follow manufacturer’s instructions for dilution, application and contact times for all detergents and disinfectants |  |
| Single use disposable cloths and mop heads to be used, if not available cloths and mop heads to be laundered after use. |  |
| Spray into a cloth not onto surfaces, avoid creating splashes and spray when cleaning |  |
| When items cannot be cleaned using detergents or laundered, for example, upholstered furniture, steam cleaning should be used |  |
| Classrooms |  |
| Staff movements between classrooms and joint class activities in school, e.g. assembly should be restricted |  |
| Are classrooms clutter free? Soft furnishings, soft toys and toys that are hard to clean should not be in use during an outbreak. |  |
| To avoid if possible, sharing of resources such as toys/ keyboards with other groups/classes. These should be cleaned between use.  Equipment shared between classes to be cleaned frequently and always between classes/groups or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics). |  |
| Stop sand and water play, use of play dough / plasticine, and cookery lessons. Sand, play dough and plasticine should be thrown away |  |
|  |  |
| Consider whether any activities could take place outdoors, including exercise, assemblies, or classes |  |
| Visits to the setting |  |
| Unless essential, stop any visitors attending the setting. |  |
| Group visits in and out of school should be stopped until 48 hours after the last person has stopped having symptoms. |  |
| PPE |  |
| Disposable aprons and gloves should be worn when cleaning touch points, cleaning and disinfecting potties, changing nappies, toileting a child or cleaning up vomit or diarrhoea. Staff should wash their hands after the removal of gloves or aprons. |  |
| Is there adequate supplies of PPE, gloves, aprons, masks and eye protection? |  |
| Food/drink |  |
| Food should be either prepared by canteen staff or brought in by a child and consumed by that child only, i.e. no sharing of food |  |
| Drinking utensils are for individual use only. |  |
| Special precautions and supervision in filling water bottles to ensure taps are not contaminated. |  |
| Discourage use of water fountains for drinking water. |  |
| Crockery and cutlery to be dishwasher washed and stored in cupboards |  |
| Keep all food in cupboards or in a lidded wipeable container, do not use shared fruit bowls etc |  |
| Caring for a symptomatic child |  |
| If a child develops symptoms whilst at school and is awaiting collection isolate the child in a ventilated room with staff supervision or move them to an area which is at least two metres away from other people. |  |
| PPE ( gloves and aprons) should be worn by staff caring for the child while they await collection |  |
| Handling of waste |  |
| Waste from possible/confirmed and cleaning of areas where possible cases have been (including disposable cloths, mop heads. PPE used, and tissues used by case etc.) to be double bagged and tied. Remove to designated storage area |  |

1. Draft a simple analysis for the affected cases and send in to the Health Protection Hub – example template below. Even if the information is incomplete this will aid in an understanding of the situation.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Initials** | **School dinners (Y/N)** | **Class/room** | **Symptoms** | **Symptom onset date** | **Date last in setting** |
| *ST* | *Y* | *4* | *Vomiting* | *8/2* | *8/2* |
| *BY* | *N* | *4* | *Vomiting* | *9/2* | *9/2* |
| *RY* | *N* | *2* | *Diarrhoea* | *10/2* | *9/2* |
| *TR* | *N* | *4* | *Vomiting* | *10/2* | *10/2* |
| *PB* | *Y* | *4* | *Diarrhoea* | *10/2* | *9/2* |

1. Check that no kitchen staff have any symptoms (including boils, sores or open wounds) and exclude them from work if necessary.
2. Send the letter below out to parents:

Dear parent/carer

This letter is to advise you that we have cases of diarrhoea and vomiting in the setting and are liaising with the Health Protection Hub and taking measures to control it. From the information we currently have we believe that it is a viral illness such as Norovirus (otherwise known as the winter vomiting bug).

Below is some information on Norovirus and what you can do to reduce the spread of the infection:

***What are the symptoms?***

Diarrhoea and vomiting usually lasting 1-2 days

***What should you do if your child is unwell?***

Make sure they get lots of rest.

Ensure they drink plenty of fluids, taking sips rather than gulps to avoid vomiting.

Give infant Paracetamol or Ibuprofen, according to product instructions, to help keep their temperature down.

If your child is unusually sleepy, won’t take fluids or has other symptoms, such as blood in their diarrhoea, an unusual rash, headache, neck stiffness or difficulty breathing, ring NHS Direct (0845 4647), contact your GP or take your child to hospital.

If any siblings are unwell please contact their nursery/ school and let them know that your child is ill and what symptoms they have.

Keep them at home until they are well enough to return to school. However, if your child has been suffering from diarrhoea and vomiting keep them at home until they have been free of symptoms for 48 hours.

If you have LFD (test kits) at home test your child for COVID-19 and let the school know the result if possible so they can potentially exclude it as the cause.

***How can you prevent the spread of these infection?***

Hand washing is one of the most important ways to prevent the spread of both of these infections. This applies to the child who is ill and the person looking after them. Hands should always be washed, using liquid soap if possible: Before and after caring for your child, after using the toilet, before eating or handling food, after cleaning up a mess (vomit, faeces or urine).

Other ways of preventing the spread of infection are to:

Keep a separate towel for family members who have symptoms.

Dispose promptly of used tissues and other items that your child may have coughed or sneezed on.

Wash soiled clothing, bed linen and towels in a washing machine. Use the hottest wash for that fabric.

Clean baths and washbasins thoroughly and disinfect after use.

If cleaning up diarrhoea or vomit, wash the surface with hot soapy water and disinfect before allowing to dry. If using bleach remember that it can remove the colour from fabrics and can burn the skin.

Keep your child away from other children and people that are particularly vulnerable, e.g. the elderly and those with chronic illnesses.

 Yours faithfully

1. If you contract-out your cleaning, advise the supervisor so they are aware and can act accordingly. They may be able to arrange additional cleaning such as steam cleaning of soft furnishings if necessary.
2. Contact the parent/carers of children who are off from school or nursery without a reason and find out if they have symptoms.
3. Attempt to rule out COVID-19 by asking parents to test using home LFD kits and report back the results for the purposes of excluding it as the source of the infection (this is covered in the template letter above).
4. Keep the table in Point 3 above updated with new cases.
5. Depending on the situation you may be visited by Environmental Health Officers to check food hygiene measures in the kitchen and/or the wider measures in place to control the outbreak. You may also be asked for contact details of affected people so that stool samples can be obtained for analysis.
6. If the case numbers don’t drop within a couple of days, or you want any further advice at any point, feel free to contact the Health Protection Hub.

*February 2021*