

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
2. Work through the checklist at Appendix 1 (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.
3. 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 |

4. Check that no kitchen staff have any symptoms (including boils, sores or open wounds) and exclude them from work if necessary.
5. Send the letter in Appendix 2 below out to parents.
6. 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.
7. Contact the parent/carers of children who are off from school or nursery without a reason and find out if they have symptoms.
8. Attempt to rule out COVID-19 by asking parents to test using home LFD kits if they have any 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).
9. Keep the table in Point 3 above updated with new cases.
10. 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.
11. 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.

Appendix 1

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| Email completed checklist to healthprotectionhub@telford.gov.uk and westmidlands.arc@ukhsa.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 (specify) or throughout setting? | | |
| 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? | | |

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| Potential cohorts affected: e.g. <ul style="list-style-type: none"> • 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 | |
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| Have any cases submitted a faecal sample | | | |
| Any cases hospitalised or had a confirmed diagnosis | | | |
| Communication with staff and students to date (e.g. template letter sent) | | | |
| Any media interest or concerns from pupils, parents or staff? | | | |

Please tick if action is complete and add any comments

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| Outbreak control: | |
| <p>Health questionnaire implemented for any essential visitors – check whether any D or V in the last 48 hrs and restrict access accordingly (should be implemented even when not in outbreak)</p> <p>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.</p> <p>Affected children should be isolated, if possible from their class mates until collected by their parents/carer.</p> <p>Children and Staff that have Norovirus symptoms must remain off school or nursery for 48 Hours after the last episode of vomiting or diarrhoea</p> | |
| Sections in red are required control measures | |
| Hand hygiene | |
| Are there appropriate facilities for handwashing – hand sanitisers, liquid soap and paper towels/tissues and pedal operated bins. For teaching children use the eBug website | |

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| <p>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. Staff in particular should be encouraged to turn off hand-operated taps with a paper towel to prevent re-contamination of hands. Alcohol hand gel may be used in addition to proper handwashing but not in lieu of it.</p> | |
| <p>Are younger children and children with complex needs supervised and helped with hand hygiene?</p> | |
| <p>Cleaning</p> | |
| <p>The frequency of toilet cleaning should be increased, e.g. clean after each break time and after a child has been sick or had diarrhoea.</p> | |
| <p>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 (e.g. appropriately diluted Milton). Two-stage cleaning should be employed – firstly use detergent (soapy water) to make the surfaces visibly clean, then use the bleach-based solution to disinfect. Read manufacturer’s instructions and do not use on fabrics and carpets (see below). Consider the cleaning between uses of equipment such as telephones and photocopiers that are frequently touched.</p> | |
| <p>Soiled children’s clothing should be sealed in a plastic bag to go home. It should not be washed on site.</p> | |
| <p>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)</p> | |
| <p>Toys used by the children should be washed and if possible disinfected. Soft toys should be machine washable on a hot wash; hard surface toys are more easily washed and disinfected.</p> | |
| <p>Advice on cleaning 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. If fogging machine is used, check that the product used is effective against Norovirus and that the instructions are followed to ensure it’s safe and effective.</p> | |

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| <p>Single use disposable cloths and mop heads to be used. If they are not available, cloths and mop heads to be laundered after use on a hot wash.</p> | |
| <p>Spray cleaning product onto a cloth not onto surfaces, avoid creating splashes and spray when cleaning.</p> | |
| <p>When items cannot be cleaned using detergents or laundered, for example upholstered furniture, steam cleaning should be used. Any laundry, such as bedding, aprons etc. should be washed on a hot wash and dried in an uncontaminated area e.g. not in toilet areas</p> | |
| <p>There should be a designated area on site if there is a need for laundry facilities. This area should:</p> <ul style="list-style-type: none"> • be separate from any food preparation areas • have appropriate hand washing facilities • have a washing machine with a sluice or pre-wash cycle <p>Staff involved with laundry services or dealing with soiled clothing should ensure that:</p> <ul style="list-style-type: none"> • manual sluicing of clothing is not carried out as there is a risk of inhaling fine contaminated aerosol droplets; soiled articles of clothing should be rinsed through in the washing machine pre-wash cycle, prior to washing • gloves and aprons should be worn when handling soiled linen or clothing • hands should be thoroughly washed after removing the gloves and aprons <p>Clothing may become contaminated with blood or bodily fluids. If this occurs, clothing should be removed as soon as possible and placed in a plastic bag. It should be sent home with the child with advice for the parent on how to launder the contaminated clothing -any contaminated clothing should be washed separately in a washing machine, using a pre-wash cycle, on the hottest temperature that the clothes will tolerate.</p> | |
| <p>Classrooms</p> | |
| <p>Staff movements between classrooms and joint class activities in school, e.g. assembly, should be restricted as far as possible.</p> | |
| <p>Are classrooms clutter free? Soft furnishings, soft toys and toys that are hard to clean should not be in use during an outbreak.</p> | |
| <p>Avoid if possible, sharing of resources such as toys/ keyboards with other groups/classes. These should be cleaned between uses.</p> <p>Equipment shared between classes to be cleaned frequently (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).</p> | |

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| Stop sand and water play, use of play dough / plasticine, and cookery lessons. Sand, play dough and plasticine already in use should be thrown away | |
| Classrooms should be well-ventilated, while maintaining thermal comfort – in winter this may be achieved by slightly opening windows, favouring opening windows at higher level or opening windows for 10 minutes every hour. | |
| Consider whether any activities could take place outdoors, including exercise, assemblies, or classes. | |
| Visits to/from the setting | |
| Unless essential, stop any visitors attending the setting. Any visitors that do attend should complete the health questionnaire and follow instructions on handwashing etc. | |
| Group visits in and out of the setting 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. | |
| Are 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 at >70 degrees C (or washed then sanitised using appropriate products such as Milton, following the instructions carefully) 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 the setting 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. | |

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| PPE (gloves and aprons) should be worn by staff caring for the child while they await collection | |
| Handling of waste | |
| Waste from possible/confirmed cases, 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 and remove to the designated storage area | |

Appendix 2

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 111, 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 setting 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

November 2022