SW care home planning checklist for norovirus season

Date completed	Completed by	
Actions to prepare for cases of norovirus (winter vomiting bug) season		
Infection Control Preventions		
1. Ensure infection control policies are up to date, read and followed by all staff.		
2. Conduct a hand washing audit and educate staff on the importance of hand washing and the appropriate hand washing technique.		
3. Ensure that liquid soap and disposable paper hand towels are available in all toilets and communal bathrooms, including individuals' room/en-suite. <i>Please note that alcohol hand gel is not effective against norovirus.</i>		
4. Ensure that Personal Protective Equipment (PPE) is available – i.e. disposable gloves, aprons.		
5. Ensure linen management systems are in place as well as clinical waste disposal systems including foot operated bins.		
6. Ensure appropriate and sufficient quantities of cleaning materials are available in the event of an outbreak. A chlorine-releasing product that is active against viruses e.g. sodium hypochlorite 0.1% solution or 1000ppm available chlorine should be used		
7. Ensure appropriate isolation is available for residents/staff with symptoms for a minimum of 2 days after resolution of symptoms. Single cases should be isolated in their bedroom or, if there are two or more cases, consider cohorting them in a separate floor or wing of the home.		
Reporting to the local health protection team		\checkmark
8. Early recognition of a diarrhoea and/or vomiting (D&V) outbreak amongst staff and/or residents in care homes is vital (i.e. two or more cases linked by time and place).		
9. Outbreaks of D&V should be reported promptly to the local health protection team for a full risk assessment and further guidance (even if care home already aware of local diarrhoea and vomiting outbreak management guidelines).		
10. Implement outbreak precautions as advised by the Health Protection Team, e.g. closure of home to new admissions as appropriate, restricting transfers to other organisations (unless essential admission to hospital), standard precautions including the use of soap and water for hand hygiene NOT alcohol hand gel, enhanced cleaning of horizontal/"touch" surfaces, isolation of symptomatic cases, collection of stool samples, advising visitors, restriction of activities/events within the home, plan for deep cleaning including steam cleaning carpets and/or change of curtains when last case has been without symptoms for 48 hours.		