

Guidance on Norovirus ('Winter Vomiting Bug') for managers and staff of temporary reception centres for displaced people fleeing war in Ukraine

What is Norovirus?

Norovirus is a virus that causes infectious vomiting and diarrhoea. It is sometimes called the "winter vomiting bug" although it can occur all year round. The vomiting can be very forceful ('projectile vomiting'). A fever often develops. The infection is usually mild, with symptoms lasting 12-72 hours. It is however, extremely infectious. Norovirus is very common, and outbreaks occur anywhere people gather together, such as hospitals, hotels, nursing homes or reception centres. In enclosed or congregate settings, norovirus can, occasionally, spread to most people in a facility or building. When two people in the same area/room/group develop vomiting, within a day or two of one another, there is a good chance that it may be due to norovirus.

How is it spread?

Person-to-person: is the main method of spread. The virus is present in the vomit and stool (bowel motions) of an infected person. When a person with norovirus vomits, the vomit can be sprayed over a large area. If a person has norovirus on their hands, they will easily pass it on to another person. If food, water or the environment becomes contaminated with vomit or stool, it can easily spread to other people. Food handlers and other staff members at a facility who are sick with norovirus can also pass the virus on.

Airborne: when someone vomits forcefully, it creates an aerosol (mist) of vomit that can settle on surfaces such as door handles, tables, sideboards etc. This mist can travel quite some distance. If anyone touches the contaminated area, and then touches their mouth with their fingers, they are likely to become infected.

Foodborne: any food item can become contaminated through handling (especially from infected staff who handle food) or if the food is exposed to environmental contamination.

How is Norovirus prevented?

- **Regular hand-washing** with soap and warm running water for at least 15 seconds (the time it takes to sing 'Happy Birthday' twice), then drying with a disposable paper towel, is the most effective way of reducing spread. **Remember: alcohol hand gels do not work against norovirus.**
- **Strict attention to hygiene** in the kitchen, and in toilets and bathrooms.
- **Rapid cleaning/disinfection** following any episodes of vomiting especially in toilets, communal and food preparation areas (see below). The focus of cleaning should be on the immediate area of contamination and surfaces touched by hand e.g. door handles, lift buttons, toilet flush handles, counter tops and work surfaces. **Never allow food handlers to be involved in cleaning or decontamination following episodes of vomiting.**
- **Environmental cleaning** with warm water and detergent; and disinfection with the recommended concentration of bleach. Noroviruses are very resistant to cleaning and disinfection. Temperatures of over 60°C or a 0.1% bleach solution¹ are needed to destroy the virus.
- **Isolate ill residents** and keep them separate from other residents as far as possible. They can mix as normal, **48 hours after their vomiting and diarrhoea has stopped.**
- **Exclude ill staff** from work for **48 hours after their vomiting and diarrhoea has stopped.** People who have been ill will pass norovirus out of their bodies (shedding) for at least two days after they have recovered from their vomiting and diarrhoea. Allowing staff to return to work within 48 hours is very likely to reintroduce infection into the reception centre.
- **Early recognition of norovirus outbreaks:** If two or more residents or members of staff develop sudden onset vomiting within a 1-2 day period, it is likely to be a norovirus outbreak. If this happens, call your local [Department of Public Health](#) and ask for advice.

What to do if someone vomits in a reception centre?

In general, if a resident in a reception centre vomits once and subsequently feels well, they may not necessarily have norovirus but the **vomit should be treated as potentially infectious**, and properly

¹ In general, to make a 0.1% bleach solution, add 1 part of normal household bleach to 50 parts of tap water. However, the concentration of supermarket domestic bleach solutions can vary and the dilution recommended by the manufacturer for disinfection of surfaces should be used.

disposed of. However, if the resident continues to feel unwell, or vomits repeatedly, norovirus illness should be suspected.

If any resident vomits, the staff member who witnesses, or is called to deal with the episode, should immediately:

1. **Cover** the area of vomit
2. **Clear** other residents away
3. **Cordon** off the immediate area, and
4. **Clean** and decontaminate the area. When cleaning, pay special attention to the area where the person vomited, and all hand-touch surfaces (counter tops, toilet flush handles, light switches, etc) that the person may have touched. You will find comprehensive advice and guidance [here](#) on how to clean up and decontaminate after someone has vomited.

If a sick resident continues to vomit, and other residents become ill too, then call your local [Department of Public Health](#) – they will advise you on the immediate steps you need to take.

If an outbreak of norovirus is identified, public health doctors will review the situation, and provide direction as to what should be done. They may also undertake a risk assessment to determine if is safe to accept admissions to the reception centre, or to allow residents to move on to other locations.

NB: if any person who develops vomiting, becomes very unwell, call the local GP or Accident and Emergency Department on the telephone for advice.