routine environmental cleaning. Use freshly prepared 0.1% hypochlorite (1000 ppm) to disinfect hard surfaces. Clean and disinfect vomit and faeces spillages promptly.

- Place contaminated linen in a water soluble bag and process as 'infected linen'.
- Close the care setting to new admissions and avoid transfer to other areas (cancel visits out/special social gatherings).
- Remove exposed food e.g. fruit
- Staff should not work in other areas/settings.
- Exclude affected staff immediately and until 48 hours symptom free (N.B. food handlers).
- Caution visitors and emphasise hand hygiene.
- The care setting must not be re-opened until 72 hours clear of new or symptomatic cases.
- Thoroughly clean the care setting before re-opening. Carpets and soft furnishings may require steam cleaning.

Information Leaflet on 
**Norovirus**
Previously known as NLV Norwalk Like Virus

Further information can be obtained from West Midlands West Public Health England team
Elgar House
Green Street
Kidderminster
Worcestershire DY10 1JF
tel: 0344 225 3560
Option 2, option 3

Updated December 2013
What is it?
Noroviruses are a frequent cause of D&V in the community and the commonest cause of gastro-enteritis in hospitals. The infection is self-limiting and usually mild. However, since large numbers of patients and staff may be involved, outbreaks of Norovirus can be a major disruption to healthcare service provision.

Criteria for suspecting a Norovirus outbreak
- Short incubation (15-48 hours)
- Illness duration 12-60 hours
- Vomiting in >50% symptomatic patients
- Patients and staff both affected

Clinical features of Norovirus
Vomiting is a prominent symptom in Norovirus associated gastro-enteritis. Diarrhoea tends to be short lived and less severe than with other causes of gastro-enteritis. Other symptoms include nausea, abdominal cramps, headache, myalgia, chills and fever. Symptoms last between one and three days and recovery is usually rapid thereafter. It is recognised that the infection results in short-term immunity only.
The illness is often referred to as ‘winter vomiting disease’ although outbreaks are reported in the summer months. Norovirus affects people of all ages.

Spread of infection
Humans are the only known reservoir of Norovirus. Excretion of virus in faeces begins a few hours before the onset of symptoms and can continue for up to 7-10 days (maximum shedding occurs 24 - 72 hours after exposure). The infective dose is extremely low.

N.B. The faeces and vomit from a person infected with Norovirus are highly infectious
The virus may be spread from person to person by vomiting, by faecal-oral spread or by consumption of contaminated food and water.
- Vomiting causes widespread aerosol dissemination of virus particles resulting in air-oral/mucous membrane spread and environmental contamination.
- Faecal-oral spread may be by way of hands, equipment or environmental contamination.
- Any food item can transmit the virus if handled by an infected or contaminated food handler (cold food such as salads and sandwiches are often implicated).

There is probably little that can be done to prevent introduction of Norovirus into communal care settings. However it is important to recognise potential outbreaks promptly to enable control measures to be implemented to prevent further spread.

Control measures
- Isolate or cohort nurse symptomatic individuals.
- Wear disposable procedure gloves and plastic aprons for contact with faecal matter or vomit.
- Wash hands thoroughly with soap and water and dry well with paper towels after contact with an affected patient, their care equipment or environment, after removing gloves.
- Increase the frequency of toilet, bathroom and