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## **Norovirus and Long-term Care Facilities General Guidance for Directors and Medical Directors**

Although transmission of norovirus occurs year-round, higher incidence usually occurs in winter months. It is not uncommon for cases of acute gastroenteritis attributable to norovirus to be reported from institutional settings, including long term care facilities.

If a facility has a case of acute gastroenteritis, whether it is a resident or staff-member, it is vital that control measures be implemented quickly and sustained in order to prevent ongoing transmission. Tools to assist facilities with routine surveillance for gastroenteritis are available at [www.wcchd.org](http://www.wcchd.org).

Persons with symptoms of acute gastroenteritis should be brought to the attention of their healthcare provider. Clinical specimens should be submitted for laboratory testing as soon as possible to confirm the cause of the illness. All outbreaks, whether or not a cause is known, are immediately reportable to the WCCHD.

The most common symptoms reported in cases residing in long term care facilities are nausea, vomiting, and diarrhea. Although most patients fully recover from gastroenteritis attributable to norovirus infection, medically fragile populations are more likely to experience severe complications. Dehydration is the most common complication and may require intravenous replacement fluids. More information on noroviruses can be found on the Centers for Disease Control and Prevention website: <http://www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus.htm>

Norovirus infections are easily spread from person to person through feces and emesis. If a facility has patients experiencing acute gastroenteritis possibly attributable to norovirus, the following are suggested control measures facilities may wish to consider implementing to limit the spread of illness, to employees and their families, to other facilities or to individuals visiting your facility:

- Limit or temporarily suspend new admissions or transfers;
- Limit transfers out to only medically necessary transfers (NOTE: EMS/patient transport, hospitals and other receiving facilities should be notified of the possibility of norovirus when transferring/transporting patients from a facility experiencing cases of acute gastroenteritis);
- Cancel group activities;
- Require ill employees to remain at home until they have been without symptoms for 48 hours. Upon their return to work, limit their contact with persons who are medically fragile or could be put at risk of severe complications if they were to contract a norovirus infection;

- Limit mingling of ill and non-ill residents. If possible, limit ill residents to their rooms for the duration of their illness;
- Perform deep cleaning of the facility, including common areas and resident rooms;
- Enforce strict hand washing and glove policies;
- Ensure universal precautions are followed by staff cleaning up emesis/feces. Gowns and masks should be worn along with gloves;
- Inform family members and healthcare providers in writing of ongoing transmission of gastrointestinal illness possibly attributable to norovirus;
- Limit visitors. Provide all visitors with information sheets on how they can limit their own risks of contracting norovirus;
- Post precautionary notifications on entrances and exits;
- Deploy hand sanitizer dispensers and reminders and instructions to use them throughout your facility.

Visit [www.wcchd.org](http://www.wcchd.org) for Williamson County disease and outbreak updates. Long Term Case Facility Guidelines for responding to a norovirus outbreak may be found at: <http://www.wcchd.org/Services/DiseaseMgmt/Norovirus.htm>. For additional guidance on implementing control measures and to report unusual incidents of acute gastroenteritis occurring in your facility, call the WCCHD communicable disease management team at: 512-943-3660.

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Health Authority

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