Outbreaks of gastroenteritis in child care facilities (CCFs) are not uncommon. Viruses cause most outbreaks of gastroenteritis, and almost always are transmitted person-to-person, by contaminated surfaces or, occasionally, by contaminated food. These outbreaks can be detected early by recognizing the typical symptoms of illness and can be controlled by taking specific steps to prevent the virus from being transmitted person-to-person.

**What causes viral gastroenteritis in CCFs?**
Many different viruses can cause gastroenteritis, including rotaviruses and noroviruses; however, noroviruses are the cause of the majority of these outbreaks. Although the symptoms may be similar, viral gastroenteritis is not caused by bacteria (such as *Salmonella* or *E. coli*) or parasites (such as *Giardia*), or by medications or other medical conditions.

**What are the signs and symptoms of viral gastroenteritis?**
The main symptoms of viral gastroenteritis are watery diarrhea and vomiting. The affected person also can have a headache, fever, nausea and abdominal cramps ("stomach ache"). In general, the symptoms begin 1 to 2 days following infection and may last for 1 to 10 days, depending on which virus causes the illness. In general, with norovirus, children experience more vomiting than adults.

**How is viral gastroenteritis spread?**
Noroviruses are spread when material contaminated by feces or vomit from an infected person is ingested. Noroviruses are extremely infectious. The viruses can continue to be present in the feces of infected persons for a week or more, even after they recover or even if they have never been sick. In CCFs the virus is spread primarily through contamination of the hands of persons who are ill. Vomiting also will suspend viral particles in the air, resulting in contamination of the environment. Noroviruses can remain infectious on environmental surfaces for many days and are relatively resistant to disinfection, heat, and cold.

**How is viral gastroenteritis diagnosed?**
Viral gastroenteritis can be diagnosed by a stool culture. Noroviruses can be identified by a special test performed on a stool sample which is available at the Nevada State Public Health Laboratory. This requires fresh (unfrozen) stool. While the test can be completed within about one day of receiving a specimen, **decisions to institute control of a possible outbreak should be taken while waiting for results.**

**How can an outbreak of viral gastroenteritis be identified?**
Facilities should establish and maintain a program of surveillance for viral gastrointestinal disease. **An outbreak of viral gastroenteritis should be suspected when two or more students and/or staff have vomiting and diarrhea with onset within one to two days.**

**How is an outbreak of viral gastroenteritis controlled?**
Interrupting person-to-person transmission controls the outbreak of viral gastroenteritis. There is probably little that can be done to prevent the initial introduction of the virus, since an infected staff member or student may be shedding the virus even before they are ill, or may never be symptomatic. However, routine handwashing at all times may prevent initial introduction. Staff should monitor student handwashing practices. Staff should wear gloves when handling food or snacks for students during an outbreak. **If people practice good personal hygiene after going to the bathroom it may limit the spread of the disease.** The recommendations on following pages may assist facility personnel in controlling an outbreak of viral gastroenteritis.

**References:**
- Centers for Disease Control and Prevention. *Norovirus: Q&A*
- County of Sonoma Department of Health Services. *For Schools: Norovirus Control Measures.*
- Division of Epidemiology and Public Health, University of Nottingham, Queens Medical Centre. *A school outbreak of Norwalk-like virus: evidence of airborne transmission.*
CONTROLLING PERSON-TO-PERSON TRANSMISSION OF VIRUSES IN CHILD CARE FACILITIES

INSTITUTE CONTROL MEASURES WHEN A VIRAL GASTROENTERITIS OUTBREAK IS SUSPECTED
(DO NOT WAIT FOR DIAGNOSTIC CONFIRMATION)

Rapidly implementing control measures at the first sign of a gastroenteritis outbreak can prevent additional cases.

Reporting – when an outbreak is suspected
- Notify the Washoe County District Health Department at 775-328-2447
- If the facility is State licensed/permitted, contact the appropriate agency: Bureau of Health Protection Services at 775-687-4750 or Bureau of Services for Child Care at 775-684-4400
- Record cases on a log. Include name, staff or student, date and time of symptom onset, symptoms and classroom number.

Infection Control
- Thoroughly clean fecal and vomiting accidents promptly – follow recommendations on next page
- Ill students should be placed in a “sick” room away from other students until a parent is able to pick them up. Ill employees should be sent home.
- Increase the frequency of bathroom and toilet cleaning (at least daily), especially faucets, door handles, toilet handles and light switches.

Personnel & Students
- Exclude all ill students and employees with vomiting and/or diarrhea until 72 hours after symptoms stop.
- Maintain the same staff to assigned classrooms, if possible. Limit staff and students from moving between contaminated and uncontaminated areas.
- Exclude parents and non-essential staff from contaminated areas, if possible.
- Request parents do not bring symptomatic family members into the facility.
- Cancel or postpone group activities (i.e. outings, field trips, parties etc.) until restrictions are lifted by the Washoe County District Health Department.
- If possible, limit new students until outbreak is over and restrictions have been lifted by the Washoe County District Health Department.

Hand washing is the single most important procedure for preventing the spread of infection!
Frequent hand washing with soap and water for at least 20 seconds of vigorous rubbing, thorough rinsing under a stream of clean water, and drying with disposable towels is recommended.

CLEANING UP VOMIT, FECES AND OTHER UNPLEASANT TASKS

Have a trained “hit squad” with the right chemicals and equipment at all times. Only trained staff should clean and disinfect affected areas.

Always clean with detergent and hot water prior to disinfecting:
Disinfect with 1000 ppm chlorine solution
or
Use an effective virucide².

CHLORINE SOLUTION DIRECTIONS
Prepare 1000 ppm chlorine solution by mixing ½ cup liquid chlorine (bleach) with 1 gallon of water. Make solutions fresh daily, label with date & contents, and store out of reach of children. For questions regarding appropriate use of chlorine solutions or other effective disinfectants, please call Environmental Health Services at 328-2434.
General Principles of Cleaning & Disinfecting

Clean soiled areas
- Isolate the areas where a vomiting or diarrhea incident occurred (25 feet surrounding the location of the incident).
- Wear disposable gloves, and masks.¹
- When heavily contaminated, absorb and remove as much of the vomit/feces as possible with paper towels or disposable cloths.
- Clean soiled areas with detergent and hot water prior to disinfecting.
- Dispose of paper towels/cloths in plastic waste bags.

Disinfect soiled areas
- Use freshly made 1000 ppm chlorine solution or an effective virucide². See manufacturer’s instructions for appropriate use.
- Dispose of gloves, mask and cloths in plastic waste bags. Put plastic bags in the regular trash.
- Wash hands thoroughly using soap and water and dry them just as thoroughly with disposable paper towels.

RECOMMENDED ITEMS TO CLEAN AND DISINFECT

Sleeping mats/cots and linens: Soiled linens should be handled as little as possible and with minimal agitation; launder with detergent at the maximum available cycle length and then machine dry. Wash twice if gross feces or vomit are present. Recommended dryer temperature is 170° F minimum. If unable to launder, double bag soiled linens and send home with parent with instructions on proper laundering procedures. Clean and disinfect all sleeping mats and/or cots on a daily basis.

Carpets: Use paper towels to soak up excess liquid and dispose of towels in a plastic waste bag; clean using a disposable cloth, then disinfect. Carpet should be steam-cleaned with a temperature of 170° F minimum after disinfection. Dry with fan (unit sits over spot—does not blow across). Do not use dry or wet vacuum.

Hard surfaces, horizontal surfaces, furniture, and soft furnishings: Clean and disinfect within 25 feet surrounding the location of the incident. Clean and disinfect doors, door handles, light switches, toilet handles, sinks, faucets, phones, chairs, tables, and high chairs. If unable to use liquid disinfectants, steam clean with a temperature of 170° F minimum.

Walls: Clean and disinfect from floor up to 5 feet.

Non-disposable mop heads: Launder in hot water with bleach.

Toys and playground equipment: Clean and disinfect all toys, activity tables, books, cubbies, playground equipment and outdoor toys, plastic tubs and storage bins.

Check-in area and front office area: Clean and disinfect parent sign-in area, security keypads and front door handles multiple times throughout the day.

Food preparation and food storage areas: Destroy any exposed food, food that may have been contaminated, and food that was handled by an infected person. Clean and disinfect all food contact surfaces, refrigerator doors and handles, microwave oven (inside and out), counters, and all cooking equipment and utensils.

Vans/Buses: Clean and disinfect inside of all transport vans or buses on a daily basis, if applicable.

¹ With outbreaks of norovirus, it is recommended that persons who clean areas substantially contaminated by feces and/or vomitus wear masks because spattering or aerosolization of infectious material might result in disease transmission.
² Effective virucides are those effective against feline calicivirus (FCV) including: Virkon ® (Biosafety USA), Accel ® (Virox Technologies), EcoTru, and MiKro BAC 3 ® (Ecolab).