

## Frequently Asked Questions

### What is Norovirus?

Norovirus is the most common cause of infectious gastroenteritis (Stomach and gut upset) in England and Wales. Although relatively mild, norovirus illness can occur at any age because immunity to it is not long-lasting. The disease was historically known as 'winter vomiting disease' due to its seasonality and typical symptoms.

The symptoms of norovirus include nausea, sickness and diarrhoea. Some people have a fever, headache or aching limbs.

Norovirus is easily passed from one person to another. It can be spread by contact with an infected person, by contact with surfaces or objects contaminated with the virus, or by eating contaminated food or water. It is more likely to spread in enclosed areas where people have a lot of contact, ie. schools, hospitals and nursing homes.

**If anyone coming into the hospital at any time – as a visitor or patient – has had symptoms of diarrhoea and vomiting in the past 48 hours, or have been in close contact with someone with these symptoms, then they should not come into the hospital before seeking advice by calling the hospital.**

**NHS Direct can offer professional telephone advice for anyone with concerns about these symptoms**

### Why can visitors not come into the RD&E wards?

Because norovirus spreads so easily the RD&E, like all major public places, is vulnerable to this bug. The Trust has stepped up the restriction on visiting because the number of wards affected by norovirus has been rising.

The norovirus ward closures means we do not have those wards available to new patient admissions. This has come at a time when we are experiencing high numbers of emergency admissions.

It is particularly unpleasant for patients already unwell to then experience the diarrhoea and vomiting symptoms of this bug and most people understand why we are taking these measures in the interests of our patient safety and wellbeing.

**Visitors are allowed in exceptional circumstances if agreed in advance with the ward matron. This can include relatives of very poorly patients and parents of children within our care.**

### **Why are visitors not allowed to go on wards without norovirus?**

Visitors can unwittingly be bringing the bug from the community into the hospital which is why the Trust has restricted visiting to all wards. This is in the interests of our patients, the general public and our staff.

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### **Why is hand gel not in the main entrance?**

Hand washing with soap and water – not alcohol hand gel – is recommended to combat norovirus. This advice applies not just to hospitals but good practice at home if you are caring for someone or in close contact with someone with these symptoms.

### **How long will a ward affected by norovirus be re-opened?**

It is only when all patients are symptom free of norovirus on the ward and the ward has been deep cleaned by our in-house housekeepers that we will then re-open a ward.

### **How long will the visiting restriction be applied?**

The restriction on visiting is reviewed daily and we will inform the public when the restriction has been changed or lifted.

We appreciate the co-operation of the general public with the restriction which is in place because the wellbeing of our patients, staff and the wider community is paramount.

### **What other impact has there been on the hospital?**

In view of the high volume of emergency admissions and reduction in bed capacity due to ward closures resulting from norovirus, we are cancelling some non-urgent operations. The hospital will contact those patients and their procedures will be re-booked.

We apologise for the inconvenience and disappointment cancellation of operations can cause but this decision will not have been taken lightly, and patient safety and maintaining a high quality of care is our priority.

### **Doesn't staff wearing uniforms off site compromise infection control?**

The wearing of uniforms off site does not compromise our infection control standards. Uniforms are worn to enable patients to identify different types of healthcare staff and are otherwise exactly the same as ordinary clothes, which many people also wear to work in healthcare settings.

They hold no special properties in terms of protection and they pose no greater risk than ordinary clothes. This is supported by the conclusions of an extensive review of the evidence commissioned by the Department of Health regarding this issue.

When ward staff are caring for patients with diarrhoea and/or vomiting symptoms they have to wear protective clothing such as aprons and gloves which are then removed after delivering care.

The Trust uniform policy says it is inappropriate and doesn't give a professional image to wear uniforms in public areas such as the supermarket or shopping.

However the Trust sees it acceptable for staff to wear their uniform with a coat when travelling to and from work.

### **Why is there no hand-gel in the main entrance?**

The RD&E does not have hand gel dispensers in the hospital entrance because hand hygiene on entry to the hospital does not protect patients from infection of any kind.

This has recently been reiterated by the National Patient Safety Agency (NPSA) who have led the national 'Cleanyourhands' campaign within the NHS for the last three years. Concerned by the

inappropriate placement of dispensers in corridors and hospital entrances and the inappropriate emphasis in many other hospitals on hand hygiene by visitors and staff in hospital reception areas, the NPSA issued an alert that stated that 'it is most beneficial to patient safety to place hand rub dispensers **at the point of care**'. In other words, the key point for hand hygiene, either using soap and water or an antibacterial rub, is at the bedside or in the clinic room by the health care staff who are providing care. Placement in other parts of the hospital i.e. corridors and entrances lulls people into believing that they are protecting themselves, or patients, when in fact that are not.

We would urge the public to clean their hands whenever they use the toilet, using soap and water and, if visiting patients on the wards, they are welcome to clean their hands when they arrive at the bedside using either the alcohol gel at the foot of the bed or by using the hand washing sinks which are present in every multi-bedded bay and side room. This should be the standard practice at all times, not just when there are outbreaks of diarrhoea and vomiting.

Another reason why we do not promote the use of alcohol gel is specific to Norovirus, the bug causing outbreaks of diarrhoea and vomiting at the moment across the whole community. The standard alcohol gel, although effective when used at the point of care against many other types of in germs, is not very effective against this particular virus. Soap and water is recommended as the best method of eliminating the virus from the hands and is particularly important after going to the toilet or when looking after someone who has diarrhoea and vomiting that may be caused by the norovirus. However, a brand new hand hygiene product has just become available which has got antiviral properties and the RD&E Chief Executive has just approved the introduction of this product into the hospital and it will be used at the point of care to reduce risk of transmission of diarrhoea and vomiting virus on hands.

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Handwashing although very important is only one means by which we are trying to control the spread of the virus that is causing the current outbreaks of diarrhoea and vomiting in the community and in the hospital. No amount of hand hygiene will prevent the spread of the virus that occurs when people with the virus vomit suddenly and explosively. As you are no doubt aware visitors are not being allowed into the RD&E at the moment because of the outbreaks of diarrhoea and vomiting. The reason are two fold - for the protection of patients within the hospital and for the protection of the visitors. There have been many instances this year and in previous years, where visitors have come to the hospital either

knowing that they have got the tummy bug but go to the wards anyway and start an outbreak on the ward they visit or they visit unaware that they are about to become unwell but have vomiting or diarrhoea whilst in the hospital and again start an outbreak. We also want to limit the number of people who are deliberately exposed to the virus on the wards because they may well become infected with it because it is so infectious.