# **Diarrhoea and vomiting (gastroenteritis) in education settings**

Gastroenteritis is a very common condition that causes [diarrhoea and/or vomiting](https://www.nhs.uk/conditions/diarrhoea-and-vomiting/). It can be due to a variety of causes including germs, toxins, or non-infectious diseases. However, as a general principle, all cases of gastroenteritis should be regarded as potentially infectious unless there is good evidence to suggest otherwise.

Viral infections that cause diarrhoea and vomiting, such as Rotavirus and Norovirus, are extremely common in children and young people. Norovirus commonly causes outbreaks in education settings, especially over the winter months.

This document provides information for schools about diarrhoea and vomiting, and about the approach that should be taken if an outbreak is suspected.

**Symptoms**

People affected by [infectious gastroenteritis](https://www.gov.uk/government/collections/gastrointestinal-infections-guidance-data-and-analysis) usually have diarrhoea and/or nausea/vomiting (which can be projectile). Diarrhoea is defined as 3 or more liquid or semi-liquid stools within a 24-hour period. Some people may also experience other symptoms, such as a high temperature, loss of appetite, abdominal pain, or aching limbs. The symptoms typically last less than a week but can sometimes last longer.

**Spread**

The bugs that cause gastroenteritis can spread very easily from person to person. They spread when the germs enter the gut by the mouth. This can happen when:

* contaminated hands or objects are put in the mouth,
* after eating or drinking contaminated food or drinks,
* people have close contact with someone who is infected (small particles of vomit can become airborne and enter the mouth).

A person with gastroenteritis is most infectious from when their symptoms start until 48 hours after all their symptoms have passed, although they may also be infectious for a short time before and after this.

**Exclusion from the education or childcare setting**

Children and adults with diarrhoea and/or vomiting should be excluded from the education or childcare setting until 48 hours after their symptoms have passed, and they are well enough to return.

For some gastrointestinal infections, a longer period of exclusion from the education setting is required and there may be a need for the affected individual to obtain stool samples to check that the infection has cleared. For these groups, your UKHSA Health Protection Team (HPT), or the local authority Environmental Health Officer (EHO) will provide you, and the affected individual, with advice. Further guidance about the exclusion requirements for specific bugs is available from: [Exclusion table - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/exclusion-table)

**How can the spread of infection be prevented?**

Children and adults with diarrhoea or vomiting should stay off school or work until 48 hours after symptoms have stopped and they are well enough to return.

Good hygiene measures are also central to preventing the spread of gastrointestinal infections. These include:

* Frequent handwashing with soap and water, especially after using the toilet (or changing nappies), before eating, preparing, or handling food and after touching pets and animals. Note that alcohol hand gels do not kill norovirus.
* Regular cleaning of surfaces that could be contaminated.
* Regular cleaning of kitchens and toilets.
* Prompt washing and disinfection of areas or items (such as clothes and toys) contaminated by faeces or vomit.
* Using PPE when handling spillages of vomit or diarrhoea.

Further details are available in the national guidance at: Chapter 2: infection prevention and control - GOV.UK (www.gov.uk).

A checklist for initial actions that should be considered in education settings experiencing an outbreak of diarrhoea and vomiting can be found in Appendix 1. These should be discussed with the UKHSA HPT.

**Advice for people with diarrhoea and vomiting**

People with diarrhoea and vomiting can usually treat themselves at home. The most important thing is for them to rest and have lots of fluids to avoid dehydration. Diarrhoea usually stops within 5-7 days and vomiting usually stops in 1-2 days.

General advice about how to treat the symptoms of diarrhoea and vomiting is available from the nhs.uk webpages: <https://www.nhs.uk/conditions/diarrhoea-and-vomiting/>. The webpage also contains advice about when to seek further medical advice or attention.

**When should education and childcare settings seek advice from the UKHSA HPT?**

Education and childcare settings should consider seeking specialist advice from the local UKHSA HPT if they are concerned and have seen:

* a higher than previously experienced and/or rapidly increasing number of staff or student absences due to diarrhoea and vomiting[[1]](#footnote-1)
* evidence of severe disease due to an infection, for example if a pupil, student, child or staff member is admitted to hospital[[2]](#footnote-2)

They are also asked to contact their UKHSA HPT as soon as possible to report any outbreak or serious or unusual illness for example E.coli 0157 or E coli STEC infection or food poisoning. Further guidance about reporting requirements for specific bugs is available from: [Chapter 3: public health management of specific infectious diseases - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-3-public-health-management-of-specific-infectious-diseases#typhoid-and-paratyphoid-fever)

The Cumbria and Lancashire UKHSA Health Protection team can be contacted on 0344 225 0562 or email cl.hpt@phe.gov.uk.

**Further information**

Further information about Norovirus can be found on the NHS website: [Norovirus (vomiting bug) - NHS (www.nhs.uk)](https://www.nhs.uk/conditions/norovirus/).

Further information for affected staff and pupils about how to self-treat diarrhoea and vomiting, and when to seek further medical support, can be found here: [Diarrhoea and vomiting - NHS (www.nhs.uk)](https://www.nhs.uk/conditions/diarrhoea-and-vomiting/).

Further information on managing infectious diseases (including diarrhoea and vomiting) in schools and other childcare settings can be found here: [Health protection in education and childcare settings - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities)

The [e-Bug | England Home](https://www.e-bug.eu/) website provides a range of resources to support children and young people to learn about microbes, infection prevention and control, antibiotics and vaccination.

**Appendix 1: Diarrhoea and vomiting outbreak: initial checklist for education settings[[3]](#footnote-3)**

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| If an outbreak is suspected, consult the national guidance ( Health protection in education and childcare settings - GOV.UK (www.gov.uk), and inform your local UKHSA Health Protection team. Inform your school nurse and OFSTED if applicable. |  |
| Consult [Health protection in education and childcare settings - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities) for information about specific causes of diarrhoea and vomiting, reporting/exclusion guidance and further infection prevention and control advice. |  |
| Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. |  |
| Ensure that liquid soap and paper hand towels are available at all handwash basins |  |
| Good hand hygiene should be recommended for all pupils and staff. Staff should check, encourage, and supervise hand washing in children. Frequent hand washing should be encouraged, especially at the start of the school day, after using the toilet (or changing nappies), before and after eating, and after touching pets and animals. Hands should be washed with soap and warm water (note that alcohol hand gels don’t kill norovirus) and dried with disposable paper towels. |  |
| Commence enhanced cleaning using appropriate products. Carry out twice daily cleaning as a minimum, (especially toilets, frequently touched surfaces, for example, handles and taps, and including any special equipment and play areas). See [Chapter 2: infection prevention and control - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-2-infection-prevention-and-control) for more details. Ensure that all staff and contractors involved are aware of and are following the guidance. |  |
| Disposable aprons and gloves should be available (i.e., non-powdered latex/synthetic vinyl gloves & aprons). These should be worn when staff are in contact with people who are unwell, when changing nappies or toileting a child and during cleaning. Staff should wash their hands after the removal of gloves or aprons. |  |
| An appropriate waste disposal system should be in place for dealing with infectious waste. |  |
| All spillages of faeces and vomit should be cleaned up immediately, wearing appropriate PPE. See [Chapter 2: infection prevention and control - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-2-infection-prevention-and-control) for further details. This includes steam cleaning carpets and furniture or machine hot washing of soft furnishings. |  |
| Contaminated clothing should be placed in a plastic bag and sent home with the child with advice for the parent on how to launder it. The clothing should be washed separately in a washing machine, using a pre-wash cycle, on the hottest temperature that the clothes will tolerate. |  |
| Clean and disinfect hard toys daily (with detergent and water followed by bleach/Milton). Limit and stock rotate toys. |  |
| Suspend use of soft toys plus water/sand play and cookery activities during outbreak |  |
| Segregate infected linen (and use dissolvable laundry bags where possible) |  |
| Visitors to the school should be postponed. If their visit is necessary, then they should be informed of the outbreak and any control measures in place. |  |
| New children should not join the affected class or year group during the outbreak. |  |
| Keep staff working in dedicated areas. Staff movements between classrooms and joint class activities in school, e.g., assembly, should be restricted where possible. |  |
| Inform the HPT of any affected food handlers. |  |
| If agency staff are working within the setting, inform the agency of the outbreak. Staff should be advised against working in other settings during the outbreak. |  |
| Discuss any planned events with your local UKHSA HPT |  |

1. It is acknowledged that all education and childcare settings have a baseline level of absences and that it is not always possible to know what children are ill with but that a setting may be able to identify where there is a noticeable change in absences over a few days or successive weeks, for example, ‘a rapidly increasing number’ may look like a doubling of absences across the setting or in a year group in a short space of time. [↑](#footnote-ref-1)
2. Being admitted to hospital is generally an indication of severe illness where this requires at least an overnight stay (note: where you are informed that assessment and discharge from a hospital ward have occurred on the same day this is not the same as being admitted and does not indicate a more severe illness)  [↑](#footnote-ref-2)
3. These measures should be implemented in addition to any required COVID-19 infection control measures [↑](#footnote-ref-3)