Norovirus in Schools
Everyone Plays a P.A.R.T.

INSTRUCTOR’S MANUAL
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The Institute of Child Nutrition was authorized by Congress in 1989 and established in 1990 at The University of Mississippi in Oxford and is operated in collaboration with The University of Southern Mississippi in Hattiesburg. The Institute operates under a grant agreement with the United States Department of Agriculture, Food and Nutrition Service.

PURPOSE

The purpose of the Institute of Child Nutrition is to improve the operation of child nutrition programs through research, education and training, and information dissemination.

MISSION

The mission of the Institute of Child Nutrition is to provide information and services that promote the continuous improvement of child nutrition programs.

VISION

The vision of the Institute of Child Nutrition is to be the leader in providing education, research, and resources to promote excellence in child nutrition programs.

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Employee will be able to effectively utilize all food safety program guidelines and health department regulations to ensure optimal food safety.

2630- Practice Federal, State, and local food safety regulations and guidance.
2640- Promote a culture of food safety behaviors in the school community (includes training on food allergens).
Training Overview and Objectives

Norovirus in Schools, formerly known as Everyone Plays a P.A.R.T. in Norovirus Control, is intended to be a two-hour, face-to-face, hands-on norovirus training curriculum that includes audience interaction to improve retention of the learning objectives.

After completing this seminar participants should be able to:

- Describe why norovirus is a concern in school nutrition programs.
- List the symptoms of norovirus.
- Describe how norovirus is transmitted.
- **Prevent** – List personal hygiene habits that can prevent norovirus.
- **Prevent** – Name illnesses and symptoms of illnesses that must be reported to a manager, and identify the required manager response.
- **Assemble a Body Fluid Cleanup Kit** – Identify the components of a Body Fluid Cleanup Kit and their purpose.
- **Respond to an Incident** – Demonstrate correct use of Personal Protective Equipment, and describe proper body fluid cleanup procedures.
- **Total Cleanup** – Explain steps necessary to reopen a foodservice area after a vomiting event.
Instructor Pre-Class Preparation

Prepare to present the session:

   a. Review each activity, the Participant’s Workbook, and the instructor’s answer keys.
   b. In the back of the Instructor’s Manual is a reference list of valuable website links the instructor can review for background information that will add depth of knowledge to your presentation.
   c. Provide one Participant’s Workbook for each attendee.


4. This workshop discusses using a strong disinfectant and disinfection procedures. This is different from typical foodservice sanitizers and sanitization steps. To familiarize yourself with the difference in the terms “Disinfect” and “Sanitize”, visit http://www.henrythehand.com/programs/patient-safety/mrsa/disinfect-vs-sanitize/

Preparation Checklist

» **Location-Provided Supplies**
  - Flipchart pad & easel
  - Projector, screen, multi-plug cord

» **Norovirus Tool Kit**
  - Markers in 4-5 colors
  - UV-glowing lotion (e.g. GloGerm or GlitterBug)
  - Six-inch black light(s)
  - Personal Protective Equipment
    » One (1) – full-protection gown
    » One (1) – Face mask with face shield
    » One (1) pair – Shoe covers
    » Twelve pairs (minimum) – Disposable medical grade gloves (latex-free), LARGE size or one-size-fits-all
  - Blue painters tape
  - Participant’s Workbook – one per participant
  - Writing utensils (pencil or pen)
  - ICN Evaluation Forms
  - ICN Attendee Roster
  - Certificate of Attendance
  - Name tents for each participant
  - Mini-posters
    » Don’t Work When Sick
    » Assemble a Body Fluid Cleanup Kit
    » Using a Body Fluid Cleanup Kit

» **Instructor-Provided Supplies**
  - Laptop with presentation remote, PowerPoint slides, and videos
  - External speakers (for videos)
  - Extra black lights if desired for the group handwashing activity
  - (Optional) Tape measure – at least 25 feet in length
## Training At-A-Glance

<table>
<thead>
<tr>
<th>Activity</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>• Flip chart pad&lt;br&gt;• Easel&lt;br&gt;• Markers&lt;br&gt;• Name tents&lt;br&gt;• Participant’s Workbook</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Pre-Assessment</td>
<td>• Pre-Assessment</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Everyone Plays a P.A.R.T. in Norovirus Control Video</td>
<td>• Video: *Everyone Plays a P.A.R.T. in Norovirus Control&lt;br&gt;• Laptop Speakers&lt;br&gt;• DVD player&lt;br&gt;• Projector&lt;br&gt;• *Everyone Plays a P.A.R.T. in Norovirus Control Video Viewing Guide</td>
<td>10 minutes</td>
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</tbody>
</table>

**Objective:** Describe why norovirus is a concern in school nutrition programs.  
Instruction and Discussion <5 minutes

**Objective:** List the symptoms of norovirus.  
Instruction and Discussion <5 minutes

**Objective:** Describe how norovirus is transmitted.  
Instruction and Discussion <5 minutes

**Objective:** Prevent – List personal hygiene habits that can prevent norovirus.

### Handwashing Challenge
- UV glowing lotion
- Black light(s)
- Flip chart pads
- Easels
- Markers in a unique color for each team (4-5)
- Handwashing Challenge handout

Instruction and Discussion <5 minutes

### Wash Your Hands Video
- Video: *Wash Your Hands<br>• Laptop Speakers<br>• DVD player<br>• Projector<br>• *Wash Your Hands Viewing Guide

Instruction and Discussion 10 minutes

### What Are Ready-to-Eat Foods?
- What Are Ready-to-Eat Foods? handout
- No Bare Hand Contact with Ready-to-Eat Foods handout

Instruction and Discussion 5 minutes
<table>
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<tr>
<th>Activity</th>
<th>Materials</th>
<th>Duration</th>
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</thead>
<tbody>
<tr>
<td><strong>Objective: Prevent – Name illnesses and symptoms of illnesses that must be reported to a manager, and identify the required manager response.</strong></td>
<td>Exclude or Restrict? handout</td>
<td>10 minutes</td>
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<tr>
<td>Exclude or Restrict?</td>
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<tr>
<td><strong>Objective: Assemble a Body Fluid Cleanup Kit – Identify the components of a Body Fluid Clean-up Kit and their purpose.</strong></td>
<td>Identify the Components of the Body Fluid Cleanup Kit handout</td>
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</tr>
<tr>
<td>Identify the Components of the Body Fluid Cleanup Kit</td>
<td>PowerPoint</td>
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<tr>
<td>Wash Your Hands Video</td>
<td>Disposable gown</td>
<td>5 minutes</td>
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<tr>
<td></td>
<td>Gloves</td>
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<td></td>
<td>Face mask with face shield</td>
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<td></td>
<td>Shoe covers</td>
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<td></td>
<td>Assembling a Body Fluid Cleanup Kit handout</td>
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<td>Assembling a Body Fluid Cleanup Kit (Sample SOP)</td>
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<tr>
<td><strong>Objective: Respond to an Incident – Demonstrate correct use of Personal Protective Equipment, and describe proper body fluid cleanup procedures.</strong></td>
<td>Disposable gown</td>
<td>5 minutes</td>
</tr>
<tr>
<td>Personal Protective Equipment Donning Demonstration</td>
<td>Gloves</td>
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<td></td>
<td>Face mask with face shield</td>
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<td></td>
<td>Cleaning and Disinfecting Body Fluid Spills (Sample SOP)</td>
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<td></td>
<td>Using a Body Fluid Clean Up Kit handout</td>
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<tr>
<td>Re-gloving Demonstration</td>
<td>Disposable gloves</td>
<td>&lt;5 minutes</td>
</tr>
<tr>
<td>Re-gloving Practice</td>
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<td>High Touch Areas</td>
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<td></td>
<td>Easel</td>
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<td>Markers</td>
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<tr>
<td>Personal Protective Equipment Removal Demonstration</td>
<td>Disposable gown</td>
<td>5 minutes</td>
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<td></td>
<td>Gloves</td>
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<td>Face mask with face shield</td>
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<td></td>
<td>Shoe covers</td>
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<tr>
<td><strong>Objective: Total Cleanup – Explain steps necessary to reopen a foodservice area after a vomiting event.</strong></td>
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</tr>
<tr>
<td>Instruction and Discussion</td>
<td></td>
<td>&lt;5 minutes</td>
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<tr>
<td><strong>Wrap Up</strong></td>
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<tr>
<td>Post-Assessment</td>
<td>Post-Assessment</td>
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<td>Evaluations</td>
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<td>Certificates</td>
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<td><strong>Total time:</strong> 2 hours</td>
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Lesson Plan

SHOW SLIDE: Norovirus in Schools

SAY: I am pleased to be here today. Institute of Child Nutrition (ICN) partners with the United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) to provide training opportunities for school nutrition professionals on current issues such as norovirus.

Everyone should have a Participant’s Workbook. In addition to the valuable take-home resources, this includes the activities we will be doing together. There is also a self-check in your Participant’s Workbook. Please fill in the blanks when you discover the answers as we go through the content today.

SAY: Before we begin our program, let’s get to know each other.

➡️ ACTIVITY – Getting to Know You

- **Purpose:** (1) to introduce participants to each other, (2) to pre-assess participants’ knowledge of norovirus, and (3) to establish the lesson content.
- **Preparation:** Review the activity directions below. Be prepared to add additional comments not provided by the participants. Review possible answers.
- **Props:** Flipchart pad, easel, marker, and name tents
- **Time:** 2 minutes of individual work, 3 minutes of group mingling, and 5 minutes debrief

SAY: Norovirus - you may have heard about it related to cruise ships, but it also impacts schools and other institutional and group settings. Schools can share many common characteristics with cruise ships when it comes to transmitting norovirus.

Let’s start out by folding your name tent in half and putting your first name in large letters on one side. On the back side list at least three ways that a school is similar to a cruise ship.

**DO:** Allow participants 2 minutes to do this independently.

SAY: Now, take your name tent and list, and move around the room to find someone you do not know or do not know well. Introduce yourself and share your list with this person, then allow them to introduce themselves and share their list. If time allows, move on to another person to share your name and list.

**DO:** Allow 3 minutes of group mingling.

SAY: Okay – remain where you are. Let’s quickly share your name and one similarity on your list. It is okay to repeat what someone else has said.

**DO:** Write the participants’ comments on the flip chart, putting a check mark beside duplicate comments.

- **Possible responses:**
  - Multi-use rooms: food is served in the class room and activities take place in the cafeteria
  - High-touch surfaces: hand rails, door handles, key boards, etc.
  - Increased proximity to infected people; increased opportunity for person-to-person contact; repeated exposure over hours or days.
  - Food – large volume, high distribution, some external/unregulated.
We can see that our schools have many qualities that make them susceptible to norovirus outbreaks. Norovirus is the leading cause of foodborne illness, and it is estimated that more than half of all food-related outbreaks of illness are caused by norovirus. Today, we will learn how everyone plays a part in preventing norovirus and controlling its spread.

**Goals for Today**

During this presentation, we will cover many topics related to norovirus, including:

- What is norovirus, and why is it a concern in schools?
- How can we recognize the symptoms of this illness, and what is the duration?
- How norovirus is transmitted?
- How can we prevent norovirus in a school nutrition environment?
- What do we need to do if a body fluid incident or norovirus outbreak occurs in our school?

**ACTIVITY – Pre-Assessment**

**Purpose:** (1) to pre-assess participants’ knowledge and (2) to establish the lesson content.

**Preparation:** Find Pre-Assessments.

**Materials:** Pre-Assessment

**Time:** 7-10 minutes of individual work

Before we begin, I will handout a Pre-Assessment. Please do not write your name on the assessment, instead write some kind of identifier in the top right corner. Identifiers can be the last four (4) digits of your phone number, a favorite word, etc. Please remember what your identifier is to use on your Post-Assessment. Answer the questions to the best of your ability. This training will go over this content, and we will review the answers at the end of our training.

**ACTIVITY – Norovirus Scenario Video**

**Purpose:** (1) to pre-assess participants’ knowledge of norovirus.

**Preparation:** Download and review the complete video (Everyone Plays a P.A.R.T. in Norovirus Control). Review answer key.

**Props:** Video, laptop speakers, Participant’s Workbook.

**Time:** 4 minute video, 4-6 minutes of participant feedback.

*Technology Tip:* The WMV version of the video can be embedded into the PowerPoint slide. Select “Insert” on the toolbar. Choose “Video” on the toolbar ribbon and the drop down “Video from File”. Locate the folder containing the video, select the video and select “Insert”. For additional assistance contact ICN’s Information Services through the ICN Help Desk.

To further access your food safety knowledge please turn in your Participant’s Workbook to the video viewing guide. We will see a short video scene where several food safety mistakes are made, especially related to norovirus prevention. As the video plays, write down any mistakes seen.

**Show Slide: Video Viewing Guide - Norovirus**

We have just seen how a few simple mistakes can lead to a big outbreak. What mistakes did you see?
Instructions: As you watch the video Everyone Plays a P.A.R.T. in Norovirus Control, look for mistakes made by Nina, Linda and Mia. Record the mistakes below.

What mistakes did Nina, Linda, and Mia make?
1. Nina went to work when she was ill with reportable symptoms.
2. Nina failed to wash her hands after leaving the restroom at work before starting her shift.
3. Nina did not report her symptoms to her manager, even when asked.
4. The sanitizer bucket is on the prep table.
5. The manager/Linda did not know to exclude Nina from work for a specific period of time.
6. The manager/Linda and Nina are touching ready-to-eat foods with their bare hands. Nina has a cut on her hand that is not properly covered.
7. After wiping & contact with Nina, manager/Linda did not wash her hands before touching food and food contact surfaces.
8. Food in the work area (25 foot radius) was stored instead of being disposed after the vomiting incident.
9. The kitchen should have been shut down for thorough cleaning and disinfecting after a vomiting incident.
10. Mia and Linda did not use personal protective equipment to clean up after the vomiting incident.
11. Linda used the same towel to wipe vomit off of Nina and also to clean food contact surfaces.
12. Mia did not remove the vomit/waste before mopping.
13. Mia did not dispose of the mop water (saved for later use); and did not disinfect the mop bucket or mop head after use.
14. Food contact surfaces within a 25 foot radius were not disinfected.
15. The manager/Linda and Mia did not wash their hands adequately after the cleanup.
OBJECTIVE: Describe why norovirus is a concern in school nutrition programs.

SHOW SLIDE: Why is Norovirus a Concern?

SAY: Norovirus is the leading cause of foodborne illness in the US. Unlike some viruses, this virus is very hardy and resistant. It can survive freezing, temperatures to 140 °F, and on surfaces such as stainless steel for at least a week. Another challenge is that common foodservice sanitizers that we use are not effective in killing norovirus. This means that the typical chemicals used in sanitizing a surface are not effective. This is especially important when sanitizing after a worker or customer has vomited or contaminated a surface. In this case, use of a special disinfectant is required.

Here is an example. We may use chlorine as a sanitizing chemical. Safe chemical ranges for sanitizing with chlorine are between 50-100 parts per million (PPM). This level is too low of a concentration to kill norovirus. To kill norovirus, we will need to use chlorine at a disinfectant level of 5,000 ppm! Quat sanitizers at any concentration are ineffective against norovirus.

OBJECTIVE: List the symptoms of norovirus.

SHOW SLIDE: Norovirus Symptoms

SAY: Please turn in your Participant's Workbook to the Norovirus handout.

Norovirus illness is sometimes referred to as the “stomach flu.” Symptoms of norovirus include nausea, vomiting, and diarrhea accompanied by abdominal cramps. Some people also complain of headache, fever or chills, and muscle aches. Symptoms usually begin 12 to 48 hours after exposure to the virus and usually last for 1 to 3 days.

During that time people can feel very ill and often vomit violently or have explosive diarrhea many times a day. Most people recover completely within 1 to 2 days with no long-term complications of norovirus illness. However, persons who are unable to drink enough liquids to replace those lost with vomiting and/or diarrhea may become dehydrated and require special medical attention. Young children, the elderly, and persons with other illnesses are the most likely to have severe symptoms.

Norovirus handout

What is norovirus?

Norovirus is a virus that causes illness sometimes referred to as the “stomach flu,” although it is not related to the flu (or influenza). Infection with norovirus affects the stomach and intestines, causing an illness called gastroenteritis. Norovirus was named for Norwalk, Ohio, in 1968 after an outbreak in a school. More than half of all foodborne illness outbreaks are caused by norovirus.

What are the symptoms of norovirus?

Norovirus symptoms include nausea, vomiting, diarrhea, and stomach cramps. Some people also complain of headache, fever or chills, and muscle aches. Symptoms usually begin 12-48 hours after contact with the virus and usually last for 1-3 days. During that time, people can feel very ill and often vomit violently or have explosive diarrhea many times a day.
How is norovirus spread?

Norovirus is found in the stool or vomit of infected people. Ill people are contagious for up to three days after their symptoms resolve. The virus is very contagious and easily spread by:

- Eating food or drinking liquids contaminated with norovirus.
- Touching surfaces or objects contaminated with norovirus, and then placing a hand to the mouth. For example, a child picks up tongs on a salad bar previously handled by a child with norovirus, takes some carrots, and then eats the carrots with hands. In another example, a school nutrition worker handles a door knob infected with norovirus and then serves food.
- Having direct contact with stool or vomit from a person who is infected.
- Having contact with tiny droplets of vomit that becomes airborne during a vomiting incident or from splashing. Droplets can travel through the air up to 25 feet to land on food and food contact surfaces.

Why is norovirus important for school nutrition employees?

People working with food who are sick with norovirus can easily make others ill. A sick child nutrition employee can – without meaning to – contaminate the food he or she is handling. Many of those eating the contaminated food may become ill, resulting in an outbreak. People infected with norovirus are contagious from the moment they begin feeling ill to at least 3 days after symptoms are gone. Some people may be contagious for as long as 2 weeks after recovery. It is important for people to use good handwashing and other hygienic practices, especially after they have recently recovered from norovirus illness.

How can norovirus be prevented?

Everyone plays a part in the prevention of norovirus by practicing good personal hygiene, which includes:

- Frequent handwashing with soap and water, especially after each toilet visit, before eating or preparing food, before putting on clean gloves, and after changing diapers in child care settings.
- Preventing bare hand contact with all ready-to-eat and ready-to-serve foods.
- Reporting illness symptoms to your manager and/or director.
  » This includes symptoms of vomiting, diarrhea, jaundice or yellowing of the skin or eyes, a sore throat with fever, and infected cuts on hands, wrists, or exposed arms.
  » You should also tell your manager and/or director if you have been diagnosed with or in contact with others having foodborne illnesses, which in addition to norovirus includes Hepatitis A, Shigella, E. coli, Salmonella Typhi, and non-typhoidal Salmonella.
- Staying home when you are ill. For illnesses like norovirus, your manager will ask that you stay home until your symptoms have been resolved for two days.

Norovirus is the leading cause of foodborne disease in the United States and has been the primary source of outbreaks in schools. Follow prevention steps to reduce the likelihood of an outbreak.
SHOW SLIDE: *Highly Contagious*

**SAY:** It only takes a few particles of norovirus to cause illness – around 18. Looking at the numbers of particles spread by vomiting and in feces, we can all understand why proper control of norovirus is critical to stopping the spread of the virus. In one gram of feces, you have over 1 trillion particles of norovirus. There are about 300,000 virus particles in one projectile vomiting incident.

Norovirus is a very contagious illness. People working with food who are sick with norovirus are a particular risk to others because they handle the food and drink many other people will consume. A sick food handler can easily – without meaning to – contaminate the food he or she is handling. Many of those eating the contaminated food may become ill, causing an outbreak. People infected with norovirus are contagious from the moment they begin feeling ill until several days after recovery.

**ASK:** Have you ever heard of a school being shut down due to a norovirus outbreak?

**DO:** Allow participants time to reply.

**OBJECTIVE:** Describe how norovirus is transmitted.

SHOW SLIDE: *Norovirus Transmission*

**ASK:** How do people become infected with norovirus? *(wait for audience responses)*

**SAY:** People can become infected with norovirus in several ways, including:

- Having direct contact with the stool or vomit of a person who is infected;
- Eating food that has been contaminated by either direct contact with contaminated hands or work surfaces that are contaminated with stool or vomit;
- Touching surfaces or objects contaminated with norovirus and then placing their hand in their mouth; or
- Norovirus can also be transmitted through tiny airborne droplets. Because it is so small, it is aerosolized in the air when someone vomits or flushes the toilet.

SHOW SLIDE: *Transmission by Air: 25 feet*

*Instructor’s Note:* This slide includes animation that depicts the 25 foot spread of aerosolized particles.

**SAY:** Imagine an ill student walks into the cafeteria and sits down to eat.

**DO:** Click next (slide advance): the green dot moves into the cafeteria seating area.

**SAY:** Then the student vomits.

**DO:** Click next (slide advance): a green mass flows over the area to depict the 25 foot spread of aerosolized droplets.

**SAY:** Norovirus can spread through the air and throughout the seating area to people, food, and surfaces. Anyone who comes in contact with these droplets may also become ill.

*Instructor’s Note: Option:* Use a tape measure to demonstrate the 25 foot zone being described.
SHOW SLIDE: *Everyone Plays a P.A.R.T.*

SAY: Every school nutrition employee plays a part in reducing the likelihood of an outbreak due to norovirus.

- Preventing norovirus by following good personal hygiene practices,
- Assembling and having ready a Body-Fluid Cleanup Kit,
- Responding correctly to a vomiting incident, and
- Completing a Total cleanup process after an incident.

**OBJECTIVE: Prevent – List personal hygiene habits that can prevent norovirus.**

SHOW SLIDE: *Prevent*

SAY: Let’s start by learning ways to prevent a norovirus outbreak. Each school nutrition employee can prevent norovirus by practicing good personal hygiene. This includes frequent handwashing with soap and water, especially after each toilet visit, before eating, preparing, and serving food, and any time hands may have become contaminated. Let’s see who is a handwashing star.

➔ **ACTIVITY**

- **Purpose:** to reinforce the importance of thorough handwashing.
- **Preparation:** Review the activity direction. Practice using the props. Draw an oversized picture of the front and back of a set of hands.
- **Props:** UV-glowing lotion, black light(s), flipchart pad, easel, markers in a unique color for each team (4-5), Participant’s Workbook, *Handwashing Challenge* handout.
- **Time:** 3 minutes to apply lotion and wash hands, (simultaneously – 3 minutes of audience brainstorming), 5-6 minutes of group post-handwashing assessment, 3-4 minutes of team feedback and activity summary.

**Handwashing Challenge handout**
DO: Divide the audience into teams (3-5 depending on audience numbers) and have each team select a representative. (Option: if the audience is larger than 25 attendees, request 3 volunteers to participate).

SAY: We are going to have a handwashing competition. The selected individuals will be showing us how well they can wash their hands.

DO: Squirt approximately 1 tablespoon of ultraviolet-glowing lotion (GloGerm or Glitter Bug) into the palm of each volunteer’s hand. Ask participants to rub this into their hands like it is hand lotion. Select one volunteer. Ask this one volunteer to raise their hands to head height (so attendees in the back of the room can see the demonstration). Use the black light to show how well covered the hands/wrist are with the glowing lotion. (Option: Have participants stand in a circle to see the demonstration.)

SAY: Imagine that you have just been to the restroom. This simulates the amount of contamination that could be on your hands. We will be asking all of our volunteers to leave the room and wash their hands.

ASK: How long should we wash our hands?

DO: Wait for an audience response.

SAY: That is correct; we should scrub for at least 10-15 seconds with a total wash time of 20 seconds. Okay volunteers, please go out and wash your hands. (Volunteers leave)

(While volunteers are out of the room) When our volunteers return we will use the black light to see how well they washed their hands. Places that are not washed well will continue to glow. Please turn in your Participant’s Workbook to the Handwashing Challenge handout. Each team will use the black light and this page to record where the volunteers’ hands or wrists glow. We will count the number of glowing areas and see who washed their hands the best.

Instructor’s Note: Because the attendees may be out of the room for a few minutes, be prepared to have ‘filler’ content in addition to the information below.

ASK: What are some reasons that we or others may skip handwashing or may not wash our hands thoroughly?

DO: List audience responses on a flip chart. Post on the wall with tape.

ASK: What are ways we can overcome some of these barriers to good handwashing habits?

DO: List audience responses on a flip chart. Post on the wall with tape.

When the volunteers return, allow each group to use the black light and record on the Handwashing Challenge handout areas on the hands and wrists that still glow.

While the groups are working, draw on flip chart paper an oversized picture of the front and back of a set of hands (like the Handwashing Challenge handout) with a marker. Have a marker in a unique color for each team (3-5 colors).

SAY: (Volunteers return) Okay, let’s see how well our volunteers washed their hands.
DO: Have one person from each team report on the number of glowing areas found, and have them use their marker to draw on the flipchart where these glowing areas were located.

SAY: We have learned two important lessons – First, even though we have been trained before and have been washing our hands all of our lives, we can always do a better job with handwashing. Also, let’s note the areas that were most commonly missed.

DO: Refer to the flip chart where teams have marked areas missed during handwashing.

SAY: As you can see, the areas of the hands that we most frequently miss are the wrists, cuticles and under our nails, between our fingers, and our non-dominant thumb.

SHOW SLIDE: Wash Your Hands

➔ ACTIVITY – Wash Your Hands Video

- *Purpose:* To reinforce when hands should be washed and the steps for thorough handwashing.
- *Preparation:* Review the activity directions below. Download and review the complete video (Wash Your Hands). Review answer key.
- *Props:* Video, laptop speakers
- *Time:* 5 minute video, 4-6 minutes of participant feedback.
- *Technology Tip:* The WMV version of the video can be imbedded into the PowerPoint slide. Select “Insert” on the toolbar. Choose “Video” on the toolbar ribbon and the drop down “Video from File”. Locate the folder containing the video, select the video and select “Insert”. For additional assistance contact ICN’s Information Services through the ICN Help Desk.

SHOW SLIDE: Video Viewing Guide - Wash Your Hands

SAY: Turn to the Wash Your Hands – Video Viewing Guide handout in your Participant’s Workbook. We are going to watch a video. As we are watching the video, please list the steps for correct handwashing and times when hands should be washed.
Instructions: As we watch the video *Wash Your Hands* record how hands are washed and when hands are washed below.

Refer participants to the handout in Participant's Workbook.

<table>
<thead>
<tr>
<th>How to Wash Hands</th>
<th>When to Wash Hands</th>
</tr>
</thead>
<tbody>
<tr>
<td>The following steps are required for effective handwashing:</td>
<td>• Whenever hands are soiled</td>
</tr>
<tr>
<td>1. Use the handwashing sink with running warm water.</td>
<td>• Before beginning, during, and after food preparation</td>
</tr>
<tr>
<td>2. Rinse hands and exposed parts of the arms under running water and apply soap.</td>
<td>• Before putting on disposable gloves and between glove changes</td>
</tr>
<tr>
<td>3. Lather hands together for at least 10-15 seconds, paying close attention to</td>
<td>• Before serving customers</td>
</tr>
<tr>
<td>fingernails, between the fingers/fingertips, and surfaces of the hands and</td>
<td>• Before handling cleaning dishes or utensils</td>
</tr>
<tr>
<td>arms.</td>
<td>• After arriving at work</td>
</tr>
<tr>
<td>4. Rinse thoroughly with clean, warm running water.</td>
<td>• After breaks</td>
</tr>
<tr>
<td>5. Thoroughly dry the hands and exposed portions of arms with single-use paper</td>
<td>• After using the restroom (and again at the kitchen, handwashing sink)</td>
</tr>
<tr>
<td>towels or a heated-air, hand-drying device.</td>
<td>• After eating, drinking, or chewing gum</td>
</tr>
<tr>
<td>6. Avoid recontamination of hands and arms by using a paper towel to turn off</td>
<td>• After using the telephone</td>
</tr>
<tr>
<td>hand sink faucets and/or to open the restroom door.</td>
<td>• After using a handkerchief or tissue</td>
</tr>
<tr>
<td></td>
<td>• After handling inventory</td>
</tr>
<tr>
<td></td>
<td>• After handling raw food</td>
</tr>
<tr>
<td></td>
<td>• After touching or scratching areas of the body, such as ears, mouth, nose, or</td>
</tr>
<tr>
<td></td>
<td>hair</td>
</tr>
<tr>
<td></td>
<td>• After coughing or sneezing</td>
</tr>
<tr>
<td></td>
<td>• After clearing or cleaning tables</td>
</tr>
<tr>
<td></td>
<td>• After clearing, scraping, or washing dirty plates or utensils</td>
</tr>
<tr>
<td></td>
<td>• After handling garbage</td>
</tr>
<tr>
<td></td>
<td>• After handling money on the cafeteria line</td>
</tr>
<tr>
<td></td>
<td>• After touching dirty aprons, clothing, dishes, utensils, or surfaces</td>
</tr>
<tr>
<td></td>
<td>• After using chemicals</td>
</tr>
<tr>
<td></td>
<td>• When moving from one food preparation task to another</td>
</tr>
</tbody>
</table>

The following steps are required for effective handwashing:

1. Use the handwashing sink with running warm water.
2. Rinse hands and exposed parts of the arms under running water and apply soap.
3. Lather hands together for at least 10-15 seconds, paying close attention to fingernails, between the fingers/fingertips, and surfaces of the hands and arms.
4. Rinse thoroughly with clean, warm running water.
5. Thoroughly dry the hands and exposed portions of arms with single-use paper towels or a heated-air, hand-drying device.
6. Avoid recontamination of hands and arms by using a paper towel to turn off hand sink faucets and/or to open the restroom door.

Whenever hands are soiled
Before beginning, during, and after food preparation
Before putting on disposable gloves and between glove changes
Before serving customers
Before handling cleaning dishes or utensils
After arriving at work
After breaks
After using the restroom (and again at the kitchen, handwashing sink)
After eating, drinking, or chewing gum
After using the telephone
After using a handkerchief or tissue
After handling inventory
After handling raw food
After touching or scratching areas of the body, such as ears, mouth, nose, or hair
After coughing or sneezing
After clearing or cleaning tables
After clearing, scraping, or washing dirty plates or utensils
After handling garbage
After handling money on the cafeteria line
After touching dirty aprons, clothing, dishes, utensils, or surfaces
After using chemicals
When moving from one food preparation task to another.
DO: Show the video *Wash Your Hands*.

ASK: What are the steps for proper handwashing?

DO: Wait for audience responses.

SAY: Correct. In addition, *(list any steps on the answer key that were not mentioned)*.

DO: Refer participants to the **Effective Handwashing** handout in the Participant’s Workbook for proper handwashing procedures.

ASK: Based on the video we saw, when should we wash our hands?

DO: Wait for audience responses.

SAY: That is correct. In addition... *(list any responses on the answer key that were not mentioned)*.

Remember, hand sanitizers alone are not effective against norovirus and should never replace handwashing. If used, hand sanitizers are a good addition after thorough handwashing.

<table>
<thead>
<tr>
<th>Effective Handwashing handout</th>
</tr>
</thead>
</table>

**What is effective handwashing?**

Effective handwashing is cleaning hands and exposed arms by applying soap and warm water, rubbing them together vigorously, rinsing them with clean water, and drying them thoroughly. Handwashing is important to get rid of dirt and reduce germs that can cause illness. The following steps are required for effective handwashing:

1. Use the handwashing sink with running warm water.
2. Rinse hands and exposed parts of the arms under running water and apply soap.
3. Lather hands together for at least 10-15 seconds, paying close attention to fingernails, between the fingers/fingertips, and surfaces of the hands and arms.
4. Rinse thoroughly with clean, warm running water.
5. Thoroughly dry the hands and exposed portions of arms with single-use paper towels or a heated-air hand-drying device.
6. Avoid recontamination of hands and arms by using a paper towel to turn off hand sink faucets or to open the restroom door.

**Why is handwashing important?**

Handwashing reduces contamination on hands and prevents it from passing to food. Organisms can get on hands from a number of sources—such as a dirty cutting board, a pencil, or a refrigerator handle—and then move from hands to food or equipment during preparation and service. An infected school nutrition employee, or one with unclean hands or exposed portions of arms or fingernails, can contaminate food, potentially causing illness. Food equipment contaminated by unclean hands can further spread illness through cross contamination.

**When should school nutrition employees wash their hands?**

Hands should be washed immediately:

- When entering a food preparation area;
- Before putting on new, single-use gloves for working with food and between glove changes;
- Before starting food preparation;
- Before handling clean equipment and serving utensils;
- When changing tasks and switching between handling raw foods and working with ready-to-eat foods;
- After handling soiled dishes, equipment, or utensils;
- After touching bare human body parts, for example, hair, face or other exposed skin;
• After using the toilet;
• After coughing, sneezing, blowing the nose, eating, or drinking.

**Can hand sanitizers be used in place of adequate handwashing in food preparation areas?**

No. Hand sanitizers do not take the place of adequate handwashing, and if used should be applied only after proper handwashing.

**SHOW SLIDE:** Prevent (Do not use bare hand contact with ready-to-eat foods)

**giatanity**

- **Purpose:** (1) to identify ready-to-eat foods and (2) to reinforce the importance of no bare hand contact with ready-to-eat foods.
- **Preparation:** Review the activity directions below. Review answer key.
- **Materials:** What are Ready-to-Eat Foods? handout in the Participant’s Workbook.
- **Time:** 3 minutes of team work, 2 minutes of answer review.

**Say:** Practicing good personal hygiene also includes preventing bare hand contact with ready to eat foods. Please turn to the What are Ready-to-Eat Foods? handout in your Participant’s Workbook.

**Do:** Create 4 teams. Assign 1 question per team.

**Say:** Each team can refer to the information on in the No Bare Hand Contact with Ready-to-Eat Foods handout in their Participant’s Workbook, if needed.

**Do:** Allow participants 3 minutes to complete their assigned question.

**Say:** Let’s review your answers.

**Do:** Call on each team spokesperson to share their answers. Clarify and elaborate on the answers provided as needed.

### What Are Ready-To-Eat Foods? Answer Key

**Instructions:** Work with your team to answer these questions about ready-to-eat foods.

1. **What are ready-to-eat (RTE) foods? (definition)**
   - **Possible answers:** foods that are never cooked or will be eaten without further preparation, washing, or cooking.

2. **Why are ready-to-eat foods more likely to spread norovirus?**
   - **Possible answers:** Handling (RTE) foods with unclean hands or utensils will contaminate them. These foods will be served without further preparation, washing, or cooking. Cooking is an important step used to kill pathogens. Employees who do not follow good personal hygiene practices could make many people ill.
3. What are examples of ready-to-eat foods that we serve?
   - Possible answers may include: salads, fresh fruit, fresh vegetables, deli meats, cold sandwiches, cheeses, and all cooked foods that are ready-to-serve.

4. In addition to gloves, what else can we use to prevent bare hand contact?
   - Possible answers: utensils such as tongs, spoons, forks, scoops, and deli sheets.

---

No Bare Hand Contact with Ready-To-Eat Foods handout

Is it necessary to use single-use gloves when preparing food?

When hands are heavily contaminated, effective handwashing may not thoroughly remove microorganisms to ensure safety. The FDA requires the use of suitable utensils such as spatulas, tongs, single-use gloves, or dispensing equipment when handling ready-to-eat foods (i.e., food that is eaten without further washing or cooking). Single-use gloves used after handwashing can be an effective barrier to the transfer of microorganisms from hands to food. However, gloves are effective in preventing contamination only if used properly.

What are the instructions for properly wearing single-use gloves?

1. Always wash hands before putting on gloves.
2. Change single-use gloves when changing tasks and between handling raw products and ready-to-eat products.
3. Do not wash or reuse single-use gloves.
4. Replace torn or damaged single-use gloves.
5. Cover an infected cut, burn or boil with pus with a waterproof covering and a single-use glove.

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OBJECTIVE: Prevent – Name illnesses and symptoms of illnesses that must be reported to a manager, and identify the required manager response.

SHOW SLIDE: Prevent (Report Symptoms)

SAY: Prevention of all foodborne illnesses like norovirus, includes working only when we are well and knowing which symptoms to report to a manager. Symptoms that must be reported include vomiting, diarrhea, jaundice or yellowing of the skin or eyes, a sore throat accompanied by a fever, and infected cuts on hands, wrists, or exposed arms. We should also tell our manager if we have
been diagnosed with or exposed to others with any foodborne illnesses. Several illnesses are easily transmitted from person to person and through food and must also be reported to the health department. In addition to norovirus, illnesses to report include Hepatitis A, *Shigella spp, E. coli, Salmonella Typhi*—also known as Typhoid fever, and nontyphoidal *Salmonella*.

**SHOW SLIDE: Prevent - (Exclude and Restrict)**

**SAY:** To reduce the chance that food will be contaminated by ill or infected school nutrition employees, managers may either exclude or restrict ill staff. **Exclusion** means a school nutrition employee is not permitted to work in or enter a food preparation site. In school nutrition operations, employees with symptoms of vomiting, diarrhea, jaundice (yellowing of the skin or eyes), or those who have been diagnosed or exposed to others with a foodborne illness must be excluded.

**Restriction** means a school nutrition employee’s activities are limited to prevent the risk of transmitting a disease that is spread through food. A restricted employee cannot handle exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles. Job duties for employees who are restricted may include working as a cashier, stocking canned or other packaged foods, or working in cleaning or maintenance tasks away from food preparation areas. Employees with a sore throat and fever or an uncovered cut on the hand or arms must be restricted. An employee with a properly covered wound (clean bandage and glove) does not have to be restricted.

**SAY:** In most cases, the school nutrition manager/director reserves the right to remove, adjust, or retain the exclusion or restriction. In some cases, an approval from a medical provider or the local health department is required to lift an exclusion or restriction depending on the illness. For illnesses like norovirus, employees will be asked to stay home until symptoms have been resolved for at least 2 days. This information is also covered in the **Restricting or Excluding Ill School Nutrition Employees** handout in your workbook.

Contact your local health department and state agency for information pertaining to your local and state policies.

**Restricting or Excluding Ill School Nutrition Employees handout**

**What symptoms or conditions should school nutrition employees report to their supervisor?**

The following symptoms or conditions should be reported:

- Diarrhea or vomiting
- Sore throat with a fever
- An infected cut or wound on hands or arms
- Jaundice (eyes or skin turns yellow)
- Diagnosis with a foodborne illness
- Exposure to a foodborne illness

**What should managers/directors do once the symptoms are reported?**

Depending on the symptom or diagnosis, the manager/director will decide if the employee needs to immediately be “restricted” or “excluded” from duties to prevent foodborne illness.

**What is exclusion?**

**Exclusion** means a school nutrition employee is not permitted to work in or enter a food preparation site. This requirement applies to areas where food is received, prepared, stored, packaged, served, vended, transported, or purchased.

Most often, this means that the school nutrition employee may not work at all. Though this can result in some loss of income, it is very important that school nutrition employees with certain symptoms not work to prevent others from becoming ill.
What is restriction?

Restriction means a school nutrition employee’s activities are limited to prevent the risk of transmitting a disease that is spread through food. A restricted employee cannot handle exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles. Job duties for employees who are restricted may include working as a cashier, stocking canned or other packaged foods, or working in cleaning or maintenance tasks away from food preparation areas.

Who can exclude or restrict a school nutrition employee?

The school nutrition manager/director has the authority to exclude or restrict a school nutrition employee from the school food preparation site to prevent the spread of illness through food. The local health department also has the authority to exclude or restrict a school nutrition employee who is suspected of being at risk for transmitting foodborne illness.

Who can lift the exclusions and restrictions?

In most cases, the school nutrition manager/director removes, adjusts, or retains the exclusion or restriction. In some cases, an approval from a medical provider or the local health department is required to lift an exclusion or restriction depending on the illness.

SAY: Let’s turn to the Exclude or Restrict handout in your workbook and complete a quick quiz.

➔ ACTIVITY – Exclude or Restrict

- **Purpose:** apply restriction and exclusion criteria for reportable symptoms and illnesses.
- **Preparation:** Review the activity directions below. Review the participant worksheet. Review answer key.
- **Materials:** Exclude or Restrict handout in Participant’s Workbook.
- **Time:** 3 minutes of individual group work. 5-8 minutes of answer review.
EXCLUDE or RESTRICT?

Answer Key

Instructions: For each of the symptoms or illnesses, should the employee be excluded, restricted, or allowed to work?

 Definitions

- **Exclude:** to prevent a person from working as an employee in a food establishment or entering a food establishment as an employee.

- **Restrict:** to limit the activities of a food employee so that there is no risk of transmitting a disease that is transmissible through food, and the food employee does not work with exposed food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles.

<table>
<thead>
<tr>
<th>Symptom Description</th>
<th>May Work</th>
<th>Exclude</th>
<th>Restrict</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jessica has a cold with watery eyes, sneezing, and sniffs</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nina is having bouts of vomiting</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Jorge has a cut on his hand that is infected and uncovered</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Mia’s husband has been diagnosed with a foodborne illness</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Leonard has a persistent cough</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aggie has a sore throat and fever</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Annette has diarrhea</td>
<td></td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Linda has been diagnosed with norovirus</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Ben’s last episode of diarrhea was 48 hours ago</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Contact your local health department and State agency for information pertaining to your local and state policies.

SHOW SLIDE: FDA “Three Legged Stool”

SAY: The Food and Drug Administration (FDA) refers to the “three legged stool” for norovirus protection:

- thorough and effective handwashing;
- no bare hand contact with ready-to-eat foods; and
- an employee health and wellness program.

SAY: ICN has many resources to assist managers and directors in creating your food safety program – such as Standard Operating Procedures (SOPs), training resources, and job aids for personal hygiene issues including handwashing, glove use, and exclusion and restriction of ill employees. Web links to those ICN resources are provided in the back of your Participant's Workbook. ICN’s Employee Health and Personal Hygiene materials will be an essential tool to update your food safety program.
OBJECTIVE: Assemble a Body Fluid Cleanup Kit – Identify the components of a Body Fluid Cleanup Kit and their purpose.

SHOW SLIDE: A Challenge...

SAY: The FDA Food Code made a change related to norovirus prevention: Clean-up of Vomiting and Diarrheal Events. This recommendation states that:

A food establishment shall have procedures for employees to follow when responding to vomiting or diarrheal events. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter.

In this next section, we will learn important procedures to put in place in your school.

SAY: Your Participant’s Workbook contains valuable resource links to fact sheets, posters, and sample SOPs that your facility can implement or adapt to comply with these new recommendations.

➔ ACTIVITY – Identify Components of a Body Fluid Cleanup Kit

- **Purpose**: to pre-assess participants’ knowledge of Personal Protective Equipment (PPE) and cleaning tools.
- **Preparation**: Review the activity directions below. Review the Identify the Components of the Body Fluid Cleanup Kit handout. Review answer key.
- **Materials**: Identify the Components of the Body Fluid Cleanup Kit handout.
- **Time**: 5 minutes of participation and participant feedback.

SAY: Please turn to the Identify the Components of the Body Fluid Cleanup Kit handout in your Participant’s Workbook. Let’s stand and determine which items are for personal protective equipment and which are for cleaning. If the item is personal protective equipment make the letter “P” with your body.

DO: Demonstrate forming a “P” by turning to the left and curling your arms inward to your waist.

SAY: If the item is for cleaning, use your arms to form a “C”.

DO: Demonstrate by turning to the left, curling one arm at head level and one arm at waist level to form a “C”.

SHOW SLIDE: Items/PPE/Cleaning

*Instructor’s Note: This slide is animated. The answers (check marks) enter each time you click next slide advance.*

DO: Ask for participants to respond by using their bodies to form a “P” or “C” as they answer. As they provide the answer, ‘reveal’ the correct answer on the slide by clicking “next” (using the slide advance) and demonstrate the correct letter (P or C).

SAY: Great job! You can be seated. This information is also covered in the Assembling a Body Fluid Cleanup Kit handout and Assemble a Body Fluid Cleanup Kit (Sample SOP) in your Participant’s Workbook. Please take a moment and place a check mark in the column that corresponds to the information we have just covered.
DO: Be sure to cover the concentration ratio of bleach found below the activity.

**Identify the components of the Body Fluid Cleanup Kit**

**Instructions:** Below are items in a Body Fluid Cleanup Kit. Place a check mark in the column that best describes each item.

- Which are for Personal Protective Equipment (PPE)?
- Which are for cleaning?

**Answer Key**

<table>
<thead>
<tr>
<th>Items</th>
<th>PPE</th>
<th>Cleaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bucket and/or spray bottle</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Disposable gown</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Effective disinfectant*</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Face mask with face/eye shield</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Gloves</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Paper towels</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Plastic garbage bag</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Sand, cat litter, or commercial absorbent powder</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Scoop, small shovel or dustpan</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Shoe covers</td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>

* EPA-registered disinfectants effective against norovirus (www.epa.gov/pesticide-registration/list-g-epa-registered-hospital-disinfectants-effective-against-norovirus) or chlorine bleach (8.25% concentration) at 1000 - 5,000 parts per million (ppm) (4 tablespoons and 16 tablespoons (1 cup) of bleach with 1 gallon of water). It is recommended that 1 cup of bleach per 1 gallon of water be used on surfaces that have had direct contact with body fluids.

* Read the label on the bleach bottle:
  Sodium hypochlorite is the active ingredient in chlorine bleach. Different brands of bleach may have different amounts of this ingredient; up to 8.25% sodium hypochlorite. Read the label to find out the concentration of sodium hypochlorite and prepare the disinfecting solution as appropriate.

Contact your local health department and State agency for information pertaining to your local and state policies.
**SHOW SLIDE: Assemble (Personal Protective Equipment)**

**DEMONSTRATION**

- **Purpose:** to display and describe the purpose of PPE.
- **Preparation:** Review the demonstration directions below.
- **Props:** Disposable gown, gloves, face mask with face shield, and shoe covers.
- **Time:** As content is discussed.

**DO:** As each item is mentioned, lift it up so that all participants can see.

**SAY:** All body fluids, including vomit, should be treated as infectious. That’s why every school nutrition program should **Assemble** a Body Fluid Cleanup Kit for their operation. This kit should include Personal Protective Equipment to keep employees safe while cleaning, including a disposable gown, gloves, face mask with face shield or goggles, and shoe covers. We will learn how to wear these in a few minutes.

**SHOW SLIDE: Assemble (Cleaning Supplies)**

**DO:** As each item is mentioned, refer to the photos on the screen.

**SAY:** The Body Fluid Cleanup Kit should contain supplies to remove and dispose of the waste. This includes a bucket and spray bottle for mixing chemicals, disposable paper towels, a designated, disposable mop head for body fluid cleanup, and a plastic garbage bag with twist-ties. Additional items to include a disposable scoop, small shovel, or dustpan to help pick up the waste and sand, cat litter, or commercial absorbent powder to make the waste more solid and less likely to splash or splatter during cleanup. Pre-assembled kits containing the recommended supplies are available through many chemical supply companies.

**SHOW SLIDE: Assemble (Disinfectants)**

**SAY:** The final item required for the Body Fluid Cleanup Kit is a disinfectant effective against norovirus. As mentioned earlier, our common foodservice sanitizers are not effective in killing norovirus. This means that the chemicals we normally use to sanitize food contact surfaces should not be used to cleanup body fluids. A list of EPA-registered disinfectants against norovirus can be found on the **Identify the Components of the Body Fluid Kit** handout. These should be used following the manufacturer’s directions for concentration. In the absence of such a product, chlorine bleach mixed to 1,000 - 5,000 parts per million (PPM) should be used. This is a very high concentration of chlorine and should be mixed wearing personal protective equipment and used in a well-ventilated area. The solution should also be made fresh before each use because the solution loses concentration over time. Once opened, bleach loses its effectiveness after 30 days. Use a new, unopened bottle of bleach every 30 days for preparing solutions. Also remember that bleach should not be mixed with any other chemical. Store the Body Fluid Cleanup Kit with an unopened container of household bleach, or the EPA-approved disinfectant; the bucket designated for chemical use; and the spray bottle in an area designated for chemical storage and/or cleaning supplies.

**SAY:** In the Participant’s Workbook there is a handout and sample SOP for Assembling a Body Fluid Cleanup Kit you can refer back to when needed.
OBJECTIVE: Respond to an Incident – Demonstrate correct use of Personal Protective Equipment, and describe proper body fluid cleanup procedures.

SHOW SLIDE: Respond (Stop All Operations)

SAY: Cleanup of body fluids that may contain norovirus is different from routine cleaning and sanitizing. It involves a more stringent cleaning and disinfecting process. It is important to Respond correctly to a vomiting incident. For body fluid contamination in food preparation, service, or dining areas, stop all operations immediately. All individuals within a 25 foot radius should be removed from the area and should immediately wash their hands. Potentially contaminated clothing should be removed as soon as possible, machine washed in hot water using the longest available cycle, and dried on the hottest setting. All uncovered or exposed food within this 25 foot radius should be thrown away. In addition, discard intact and sealed containers or single-service items within the 25 foot radius if the item’s surface is not practical to disinfect. Please follow along with the Using a Body Fluid Cleanup Kit handout and Cleaning and Disinfecting Body Fluid Spills [Sample SOP] in your workbook.

SHOW SLIDE: Respond (Put on Personal Protective Equipment)

ACTIVITY – Personal Protective Equipment

- Purpose: Demonstrate proper use of Personal Protective Equipment.
- Preparation: Review the activity directions below. Assemble props.
- Props: Shoe covers, gown, two pair of gloves, and face mask with face shield.
- Time: 4-5 minutes to assist volunteer and describe the purpose of each component.

DO: Request an audience volunteer to correctly put on the PPE items as they are described. (Optional – the instructor can put on the PPE instead of using an audience member.)

SAY: Only school nutrition employees trained in the appropriate use of the Body Fluid Cleanup Kit should respond to an incident. Part of an appropriate response includes protecting ourselves from contamination. This means wearing Personal Protective Equipment to protect ourselves, our clothes, and shoes.

DO: Assist the volunteer in putting on the gown and shoe covers. Then assist them in putting on the face mask with eye protection or goggles, and gloves.

SAY: As trained employees, we should:

- Put shoe covers over our shoes.
- Pull the disposable gown over our clothes.
- Put on the face mask with a face shield or goggles.
- Put on at least one pair of disposable, nonabsorbent, medical grade gloves.
  - You may want to consider wearing two gloves on each hand. Since this situation deals with personal protection and not food, double gloving is an option.

The equipment protects the face from splashing and airborne particles, and hands from direct contact with body waste. When wearing Personal Protective Equipment, remember to keep hands away from your face, and replace gloves if they become torn or dirty.
Our trained employee will stay dressed in the PPE as we go through the remaining steps. After the steps, we will go through the process of properly removing and discarding all PPE.

SHOW SLIDE: Respond (Cover and Remove Waste)

**DO:** Have volunteer dressed in PPE (or instructor dressed in PPE) ‘mock’ demonstrate the use of kit items as each step is described.

**SAY:** Use the contents of the Body Fluid Cleanup Kit to remove the waste. First, use disposable paper towels to cover the waste or use sand, cat litter, or commercial absorbent powder to absorb and solidify the waste before putting down the paper towels.

Next, remove the solid waste and absorbent material using additional paper towels and a disposable scoop, small shovel, or dust pan. Be careful not to splash contents onto other surfaces. Put the contaminated material into the garbage bag.

SHOW SLIDE: Wash Hands and Change Gloves

**SAY:** The next step is to remove and dispose the soiled gloves into the garbage, wash hands, and put on new gloves. It is recommended to double glove each time throughout the cleanup process as a best practice.

⇒ DEMONSTRATION

- **Purpose:** Demonstrate the correct technique for removing contaminated gloves and re-gloving.
- **Preparation:** Review the activity directions below. Practice the technique to ensure smooth delivery.
- **Props:** Disposable gloves
- **Time:** 2 minutes: Perform/Demonstrate as discussing content

**DO:** Have volunteer dressed in PPE (or instructor dressed in PPE) demonstrate how to properly remove gloves. Have the remainder of the students stand up and form a circle around the person dressed in PPE to best view the demonstration and take a break from sitting.

**SAY and DO:** The best way to prevent spreading germs while removing soiled gloves is to follow these steps.

- Pull one glove back by the cuff until it comes off inside-out.
- Cup it in the palm of your gloved hand.
- Hook two fingers of your bare hand inside the cuff of the remaining glove.
- Pull back so this glove also comes off inside-out, with the first glove tucked inside it.
- Discard the gloves in the designated garbage bag.

**SAY:** Before re-gloving, it is always important to thoroughly wash your hands with soap and running water for 20 seconds.
ACTIVITY – Removing Gloves Safely

- **Purpose:** Apply knowledge and practice re-gloving techniques.
- **Preparation:** Review the activity directions below.
- **Props:** 1 set of gloves per table or team.
- **Time:** 3 minutes of practice.

**SAY:** Let’s practice this method of correctly removing gloves. Each table/team will have one set of gloves. One person will demonstrate to the others how to correctly remove gloves.

**DO:** Divide participants into teams. Provide gloves to each group/team/table, and have them demonstrate and practice this glove removal technique. Float around to help.

**SAY:** Now, let’s try double gloving.

**DO:** Demonstrate double gloving, then have participants practice the technique.

**SAY:** Great job everyone. Return to your seats so we can continue with our cleanup.

**SHOW SLIDE:** *Respond (Clean Area)*

**SAY:** It is very important to clean the area BEFORE disinfecting. As a reminder, to clean means use soap and water to make sure there are no visibly soiled surfaces. Use disposable paper towels or mop, detergent, and water to clean soiled surfaces. This includes surfaces that came into direct contact with body fluids, and surfaces that may have been contaminated with body fluids. After cleaning, dispose of the paper towels and mop head, if disposable, in the garbage bag. Remove and dispose of your gloves into the garbage bag as well.

**SHOW SLIDE:** *Wash Hands and Change Gloves*

**SAY:** Wash your hands again and put on new gloves. Remember to follow the proper handwashing steps discussed previously.

**SHOW SLIDE:** *Respond (Mix Disinfectant)*

**SAY:** Mix a fresh solution of the provided disinfectant. If you are using a chemical from the EPA’s list, follow the manufacturer’s directions for the recommended concentration. If you are using bleach, wear PPE and use a new, unopened bottle of bleach with a 8.25% sodium hypochlorite concentration. Once opened, household bleaches lose their effectiveness after 30 days. For surfaces that came into direct contact with the bodily fluids, it is recommended to use a 5,000 parts per million (ppm) concentration, which is 1 cup of bleach per 1 gallon of water. For the surrounding surfaces within the 25-foot radius, mix 4 tablespoons of bleach with 1 gallon of water (solution concentration of about 1,000 ppm) in a bucket designated for chemical use. Ensure that area is well ventilated (mix solution outdoors if necessary). Remember to transfer the solution to a labelled spray bottle.

**SHOW SLIDE:** *Respond (Disinfect)*

**SAY:** Next, using the labelled spray bottle, completely saturate the cleaned area and surrounding 25-foot radius area, including surfaces that come into direct contact with the bodily fluids and surfaces that may have been contaminated, with the disinfectant. Allow the disinfectant to stand on the area following the manufacturer’s directions for the recommended contact time. If chlorine bleach is used, apply for contact time of 5 minutes for 5000 ppm bleach solution. Remember this is a very high concentration of chlorine and should be used only in a well-ventilated area.
ACTIVITY – High Touch Areas

- **Purpose:** to assess and reinforce participants’ knowledge of high touch areas.
- **Preparation:** Review the activity directions below. Review possible responses.
- **Props:** Flip chart pad, easel, marker
- **Time:** 2 minutes of participant feedback.

**SHOW SLIDE:** *Respond (Disinfect High Touch Surfaces)*

**SAY:** Additionally, it is important to clean and disinfect high touch areas outside of the 25 foot zone as a preventive measure. Let’s make a list of high touch areas. An example is a door handle. Can you name others?

**DO:** Use a sheet of flipchart paper to list audience responses.

Possible responses could include items like:

- handles on doors, equipment, dispensers, ice machines, and carts
- telephones, key boards, and light switches
- sink faucets, soap, and sanitizer dispensers
- surfaces in common areas including dining areas, break rooms, and restrooms

**SHOW SLIDE:** *Respond (Rinse)*

**SAY:** After we disinfect the surfaces, we should rinse all surfaces with clean water, paper towels, and a disposable mop. It is important to let the surfaces air dry which helps eliminate recontamination. When we are through rinsing all surfaces, we should dispose of the paper towels and the mop head we used into a garbage bag.

**SHOW SLIDE:** *Wash Hands and Change Gloves*

**SAY:** To help eliminate recontamination and protect ourselves, we need to remove our gloves, wash our hands again, and put on new gloves.

**SHOW SLIDE:** *Respond (Disinfect Cloth Surfaces)*

**SAY:** It is unlikely that our operation or dining area will have cloth or carpet. However, if carpet, upholstery, or other cloth surfaces are contaminated, follow the steps to remove as much waste as possible. Clean the material, disinfect with a chemical disinfectant if possible, and finally steam clean the area for a minimum of 5 minutes at a minimum temperature of 170 °F. Remove gloves, wash hands, and put on fresh gloves.

**SHOW SLIDE:** *Respond (Dispose of Exposed Food)*

**SAY:** All uncovered or exposed food within this 25 foot radius should be thrown away. In addition, discard intact and sealed containers or single-service items within the 25 foot radius if the items surface cannot be adequately cleaned and disinfected. Remove gloves, wash hands, and put on fresh gloves.

**SHOW SLIDE:** *Wash Hands and Change Gloves*
SHOW SLIDE: **Respond (Disinfect Non-disposable Tools)**

**SAY:** After cleanup, disinfecting the area, and rinsing the area, we need to discard all disposable tools in the designated garbage bag. Securely tie all garbage bags containing all disposed of materials. Place these garbage bags in a second garbage bag (double bag), and secure. All non-disposable tools such as buckets and mop handles should be cleaned with hot, soapy water and then disinfected using the appropriate disinfectant for norovirus. Allow these items to air dry.

SHOW SLIDE: **Respond (Remove PPE)**

**DEMONSTRATION**

- **Purpose:** Demonstrate the correct technique for removing contaminated PPE.
- **Preparation:** Review the activity directions below. Practice the technique to ensure smooth delivery.
- **Props:** Volunteer dressed in PPE items.
- **Time:** 3 minutes: Demonstrate while discussing content.

**DO:** Bring the volunteer dressed in PPE back up to the front. As each step is described, assist the volunteer in correctly removing the PPE. Assist the volunteer as needed to steady their balance.

**SAY:** Finally, we get to remove our Personal Protective Equipment. To start, remove your gloves as we discussed earlier. Remove the face shield next. Take off the gown by turning the sleeves inside out. Last, remove the shoe covers. Place all PPE in the garbage bag, and seal the garbage bag with twist ties.

SHOW SLIDE: **Respond (Disposal)**

**SAY:** Place this bag in a second garbage bag, and securely tie. Take them to the disposal area specified by your school administration.

**DO:** Thank the volunteer and have the volunteer return to their seat.

SHOW SLIDE: **Respond (Wash Up)**

**SAY:** As an extra precaution for protecting you from germs, remove and bag your uniform. These clothes should be machine washed in hot water using the longest available cycle and dried on the hottest setting. Wash your hands, exposed arms, and face with germicidal soap, then apply hand sanitizer to your hands before putting on a clean uniform.

SHOW SLIDE: **Total Cleanup**

**OBJECTIVE:** **Total Cleanup – Explain steps necessary to reopen a foodservice area after a vomiting event.**

**SAY:** Total cleanup after a vomiting incident and before returning to normal operations is very important. Before the waste cleanup, all surfaces, including food contact surfaces within the 25 foot zone, were sprayed with a strong disinfectant. Next, we should follow our standard cleaning procedures. We should thoroughly wash then rinse these surfaces. Finally, use the chemical you would normally use to sanitize food contact surfaces. Allow these surfaces to air dry. These steps are outlined in your Participant’s Workbook.

Total cleanup also includes restocking the contents of the Body Fluid Cleanup Kit and storing it for the next use.
After a cleanup event, all employees should be alert for the signs and symptoms of norovirus and be reminded to report foodborne illness symptoms to their manager, including vomiting or diarrhea.

**SHOW SLIDE: Everyone Plays a P.A.R.T.**

**SAY:** Today we have learned about norovirus – it is highly contagious, easily spread, and difficult to kill. Everyone plays an important part in norovirus prevention. This includes

- Prevention through good personal hygiene
- Assembling and having ready a Body Fluid Cleanup Kit
- Responding correctly to a vomiting incident and
- Total cleanup after an incident.

Norovirus is the leading cause of foodborne disease in the United States and has been the source of many outbreaks in schools. We all play a part in reducing the likelihood of an outbreak in our school nutrition program.

**Instructor’s Note:** A Jeopardy-type game show of norovirus questions in PowerPoint format has been developed. If time permits, you may want to break the class into teams and perform the game show before the Post-Assessment. You will need to use a flip chart and marker (or pad and pen) for score keeping. While the PowerPoint is in presentation mode, select the question/point level. The built-in hyperlink will take you to the multiple choice questions. In the bottom, right corner of the question slide is a hyperlink to the answer slide. In the bottom, right corner of the answer slide is a hyperlink to the table or game board. Practice using these hyperlinks before presenting the game show. This can be found at www.theicn.org/norovirus.

**SAY:** Let’s also take a minute to review what we have learned. I’m handing you the Post-Assessment. Please remember to place the same identifier you used on your Pre-Assessment in the top right corner.

**ACTIVITY – Post-Assessment**

- **Purpose:** to assess participant’s gained knowledge of norovirus
- **Preparation:** Find Post-Assessments.
- **Materials:** Post-Assessment
- **Time:** 7-10 minutes of individual work

**DO:** Allow participants time to complete the Post-Assessment questions, then review the answers, clarify any missed points, and answer questions to the best of your ability. If there are questions you cannot answer, please refer participants to the ICN and/or resource lists provided in the Participant’s Workbook.
SHOW SLIDE: *Resources from ICN*

**SAY:** The Participant’s Workbook has web-based references. ICN has several resources available for you to take this training and information back to your team, including a video, an online course on norovirus prevention, mini-posters, Standard Operating Procedures, and fact sheets. These can be accessed through the ICN website: [www.theicn.org/norovirus](http://www.theicn.org/norovirus).

**DO:** Pass out example mini-posters.

SHOW SLIDE: *Resources*

**SAY:** Another important resource for norovirus prevention is provided by The National Education Association Health Information Network through funding by USDA Food and Nutrition Service. NEA-HIN developed *The Stomach Bug Book* – a great resource for developing a school-wide approach to norovirus prevention and response. It is available in English and Spanish. The websites listed here are also in your Participant’s Workbook.

SHOW SLIDE: *Training Wrap-Up*

**DO:** Provide participants the training evaluation form. Make sure all participants have signed the Attendee Roster. Provide attendees a Certificate of Attendance.

**SAY:** Please complete the training evaluation forms.

SHOW SLIDE: *Thank You!*

**SAY:** Accessing ICN via the web is an excellent way to have access to important, timely, and expertly designed resources. Numerous food safety, food security, and emergency management resources are available to download for free from the web. Thank You for participating today!
References


- Annex 3 2-201.11 Reporting of Symptoms (2013)
- Annex 3 2-201.12 Exclusions & Restrictions (2013)
- Annex 3 2-3 Hands and Arms (Cleaning) (2013)
- Annex 3 3-301.11 Preventing Contamination from Hands (2013)
- Annex 3 2-501.11 Clean-up of Vomiting and Diarrheal Events (2013)


