



This document is intended to provide guidance on infection prevention and control (IPAC) best practice recommendations when cohorting inpatients on additional precautions.

These measures should apply during intense bed shortages during COVID-19 pandemic only.

Cohorting Principles:

1. IPAC does not routinely recommend cohorting of patients.
2. Cohorting may be necessary in the event that patient requirements for private rooms exceed capacity.
3. The following are not eligible for cohorting:
 - Patients with more than one transmissible disease or organism
 - Patients on airborne precautions
 - Patients who are Carbapenemase Producing Organism (CPO) positive
4. Overcapacity spaces should not be used for patients with suspect or lab confirmed transmissible diseases.
5. Consult with your local Infection Prevention and Control department if you have any questions or require assistance with placement of patients.

Personal Protective Equipment (PPE):

1. Adhere to IPAC [Point of Care Risk Assessment](#), hand hygiene, appropriate use of PPE, and appropriate environmental cleaning guidelines.
2. Change PPE between each patient interaction and treat each bed space as a private room, refer to [Continuous and Extended PPE Use in Acute Care](#).
3. When caring for patients confirmed to have COVID-19 in designated units/cohorted spaces, refer to the [CV-19 G0038 PPE Guideline](#).

Physical Layout of Shared Patient Space:

1. Separate patient beds by a minimum of 2 metres.
2. Create a barrier to define the patient bed space (e.g., privacy curtains or a portable privacy screen) and keep barrier drawn/in place at all times.
3. Ensure Alcohol-Based Hand Rub (ABHR) is available at point of care.
4. Do not overstock supplies in the patient bed space.
5. In a multi-bed room, post appropriate additional precautions signage on the door as well as an easily visible location in the room (e.g., privacy curtain).
6. Place dedicated isolation/PPE cart outside a multi-bed room or outside of patient bed space in a multi-bed room. Place the linen hamper and garbage receptacle in close proximity.
7. Ensure dedicated toileting facilities (e.g., commodes) to avoid sharing of washrooms.
8. Patient equipment should be dedicated. When patient equipment cannot be dedicated, clean and disinfect items before use on any other patient, and shared items that cannot be cleaned and disinfected should be discarded.
9. Prior to exiting an additional precautions space, soiled PPE including gown and gloves should be discarded, and hand hygiene performed.
10. Once a patient has been discharged or transferred to a single room, the area/bed space should be cleaned according to your facility's protocols.
11. In the Emergency Department setting where there is a rapid turnover of patients throughout the day, the minimum requirements for environmental cleaning are as follows:
 - For symptomatic patients, perform isolation clean according to your facility's protocols.
 - For asymptomatic patients, cleaning and disinfection of high-touch areas within the patient room/bed space.



Appendix A: Cohorting When Private Room is Unavailable (in order of preference)

	Organism	Type of Precautions	Cohorting Guidelines
Lowest Risk	Antibiotic Resistant Organisms (ARO – MRSA, VRE) (colonized or infected)	Contact	May cohort with another patient having lab-confirmation of the same organism (e.g., MRSA and MRSA)
	Influenza or lab-confirmed respiratory illness (excluding COVID-19)	Droplet/Contact	May cohort with another patient having lab-confirmation of the same viral organism
	Norovirus	Contact. Add Droplet, if patient is vomiting	May cohort with another patient with lab-confirmed norovirus Washroom cannot be shared
	<i>Clostridium difficile</i>	Contact	May cohort with another patient with lab-confirmed <i>Clostridium difficile</i> Washroom cannot be shared
	COVID-19	Droplet/Contact Plus	May cohort with another patient having lab-confirmed COVID-19. Do not cohort suspect with confirmed cases
	ARO (colonized or infected)	Contact	May cohort with another patient having lab-confirmation of a different organism (e.g., MRSA and VRE) Washroom cannot be shared
	Asymptomatic (Screen positive for COVID-19)	Droplet/Contact Plus	May cohort asymptomatic patients who meet the same risk exposure criteria (e.g., travelled outside Canada)
	Symptomatic gastrointestinal illness when etiology is unknown	Contact. Add Droplet if patient is vomiting	Washroom cannot be shared
Highest Risk	Symptomatic respiratory illness when etiology is unknown	Droplet/Contact Plus	If lab-confirmation is not available and there are no other options , may cohort with another patient with respiratory illness until a private room becomes available.
	Not eligible for cohorting	1. Patients with more than one transmissible disease or organism 2. Patients on airborne precautions 3. Patients who are Carbapenemase Producing Organism (CPO) positive	

Note: Consult with your local Infection Prevention and Control department if you have any questions or require assistance with placement of patients.

References:

Alberta Health Services. Recommendations for cohorting inpatients on additional precautions in acute care [Internet]. 2020 [cited 2020 November 16]. Available from: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-cohorting-isolation-patients.pdf>