

Coronavirus Disease 2019 (COVID-19)

How to Cohort During an Outbreak of COVID-19 in a Congregate Living Setting

Cohorting means grouping residents based on their risk of infection or whether they have tested positive for COVID-19 during an outbreak. Cohorting can help prevent the spread of COVID-19 in congregate living settings. Discuss cohorting with your public health unit and refer to [Cohorting in Outbreaks in Congregate Living Settings](#) for additional information.

Overview of cohorting during a COVID-19 outbreak

- During a COVID-19 outbreak, residents may be separated into several cohorts (groups).
- Each cohort should remain as separated from the other cohorts as possible.
- Within most cohorts, residents need to remain as far apart from each other as possible.
- Staff should work with only a single cohort if possible.
- Within the outbreak area, all staff should wear a surgical/procedure mask, eye protection and gown. Gloves should also be worn when providing direct care to a resident (e.g., feeding, bathing, washing, turning, changing clothing, toileting and wound care).
- When there is a shortage of personal protective equipment (PPE), some PPE can be left on when moving from resident to resident within each cohort, while other PPE must be changed. Gloves must always be changed after each resident. All PPE should be changed when moving from resident care to non-resident care activities. All PPE must be changed if it becomes wet or dirty.

Outbreak Facility: Non-Outbreak Area (if there is one)

All residents in the non-outbreak area

Residents in areas with no COVID-19 and no possible exposure to COVID-19:

- **Placement within the cohort:** Residents can share the same room if safe and appropriate, but should remain at least 2 metres apart, as recommended for all residents.
- **Staff PPE:** Wear a surgical/procedure mask (with or without eye protection based on advice of public health unit*), as well as [specific PPE for direct care](#) (depending on the activity). Mask and eye protection can be left on within the cohort. Change gowns and gloves (if used) between residents. Clean hands before and after caring for each resident.



Outbreak Facility: Outbreak Area

Exposed and well cohort

Residents have no COVID-19 symptoms (and if tested for COVID-19, are negative) but have possible exposure to COVID-19:

- **Sub-cohorts:** Could further subdivide this cohort into those who:
 - had close contact (e.g., roommates, dining mates) with someone with COVID-19, and
 - did not have close contact with someone with COVID-19.
- **Placement within each cohort/sub-cohort:** Private rooms or at least 2 metres apart.
- **Staff PPE:** Change gloves and gown when moving between residents within each cohort/sub-cohort to provide direct care. Clean hands after removing gloves.



Exposed, ill, but not known to have COVID-19 cohort

Residents have symptoms, but have not been tested, have results pending or who have tested negative, and have possible exposure to COVID-19:

- **Sub-cohorts:** Could further subdivide this cohort into those:
 - who are COVID-19 negative, and
 - whose COVID-19 status is unknown.
- **Placement within each cohort/sub-cohort:** Private rooms if at all possible or at least 2 metres apart.
- **Staff PPE:** Change gloves and gown when moving between residents within each cohort/sub-cohort to provide direct care. Clean hands after removing gloves.



COVID-19 positive and infectious cohort

Residents with a positive COVID-19 test who are still potentially infectious:

- **Placement within the cohort:** Residents with COVID-19 can share the same room, if safe and appropriate.
- **Staff PPE:** Change gloves and gown when moving between residents within this cohort to provide direct care. Clean hands after removing gloves.

***Note:** Change gown when moving between rooms, if residents in this cohort are in rooms that are far apart.



For more information please contact: _____

The information in this document is current as of June 19, 2020.