

## **Admitting Protocol During Respiratory Virus Outbreaks on Inpatient Units and Long - Term Care Households**

### **General**

Historically, admitting to outbreak units has been discouraged; however, with ever increasing patient flow pressures, Health PEI must balance the risk of leaving admitted patients in the Emergency Department, often for extended periods of time, versus admitting to an outbreak unit/household.

**For admission to Influenza or RSV outbreak units, contact the local Infection Control Professional to discuss potential options.**

### **Admission Protocol for COVID-19**

- Collaborate with local Infection Control Professional (ICP) to determine options for care delivery during an outbreak.
- The local ICP will regularly update a list of inpatients and inpatients awaiting beds who, based on their risk of developing serious COVID-19 infections, could safely be admitted to a COVID-19 outbreak unit/household.
- Patients deemed at lower risk include patients:
  - 1) Who are COVID-19 positive **OR**
  - 2) Who have recently recovered from COVID-19 (within the last 60 days) **OR**
  - 3) Who have received a booster vaccine >2 weeks but <6 months **AND** < 70 years old **AND** who are not seriously immune compromised.
- Every effort must be made to move active COVID-19 cases or recently recovered COVID-19 cases prior to anyone else being admitted to a unit/household experiencing an outbreak.
- There is little benefit in testing asymptomatic patients for COVID-19. Testing should be reserved for those who are symptomatic. For further respiratory illness testing information, please refer to [Respiratory Screen \(COVID 19/Flu A/B+RSV\) Testing; Respiratory Panel Criteria May 2024.](#)

### **Patient Flow on an Outbreak Unit**

- Patients who are COVID-19 positive should be cohorted together as much as possible- this can be in the same room or on a designated team.
- New admissions to the outbreak unit/household who are COVID-19 negative should also be cohorted with each other. New admissions should ideally be physically separated from the COVID-19 positive patients. Please ensure the local ICP is aware when these admissions occur.
- Patients who are COVID-19 positive should not be placed in the same room as COVID-19 negative patients.
- Ideally, nursing care teams should not look after COVID-19 positive patients and COVID-19 negative patients at the same time. This means nursing care teams may need to be modified to ensure appropriate staffing levels for each team.
- **For COVID-19 negative patients admitted to an outbreak unit shall be placed on Droplet/Contact precautions until the outbreak is declared over. These patients are isolated as additional layer to protect them from acquiring COVID-19.**

In the event support is needed for this protocol, **please contact your facility leadership**. If facility leadership require support, they can contact the Provincial Infection Prevention and Control Manager Cathy Guitare at [caguitare@ihis.org](mailto:caguitare@ihis.org).