Covid-19 facility planning by patient cohort

Many health systems are anticipating, if not already managing, a surge of Covid-19 patients and facility planners are taking on unprecedented challenges in accommodating and directing patients to appropriate sites of care. As a first step in grappling with facility needs, planners must be able to categorize and assess the patient populations they are likely to encounter.

This quick, three page guide includes a patient cohort risk overview as well as a guide to alternative treatment sites for Covid-19 and non Covid-19 patient cohorts. Robust resources for thoroughly assessing and managing each type of alternative facility are linked on page three of this document, and should be used in tandem with this patient cohort overview.

Covid-19 Risk and Facility Impact by Patient Cohort

Patient Cohort	Patient Description	Challenge for Facilities	Ability to Flex Cohort to an Alternate Site of Care
Low risk Covid-19 positive patients	• Self-isolated Covid-19 positive individuals	• Home monitoring • Risk of rapid rise in illness (cytokine storms etc.)	**Not Difficult:** • Alternate site of care unnecessary, remote monitor at home
High exposure to Covid-19	• Health care professionals • EMTs • Law enforcement • Essential services	• Maintaining sterile work environments and providing adequate PPE • Providing alternate living space for frontline workers (to avoid spread at home)	**Moderately Difficult:** • Identify living spaces in close range to hospital/place of work
Non Covid-19 patients with hospital need	• Urgent care • Birth delivery • Substance abuse/addiction • Non Covid-19 related illness	• Keeping non Covid-19 patients separate from Covid-19 positive patients and Covid-19 facing staff • Facility capacity • Reduced hospital operations	**Moderately Difficult:** • Only allow non Covid-19 into urgent care centers • Staff with doctors/nurses not working directly with Covid-19 patients
Increased risk contracting Covid-19	• Detention & correction inmates and staff • People with disabilities • Home insecure	• Risk of disease spread in contained spaces (shelters, jails) • Risk of patients becoming re-infected post discharge	**Highly Difficult:** • Crowded facilities • Difficulty monitoring care post-discharge in homeless population
High risk Covid-19 positive patients	• Underlying health conditions • Aged 60+	• Potential need for hospitalization, ICU support, ventilators, and stronger post discharge isolation safeguards	**Highly Difficult:** • Lack of available resources • CDC compliant facilities

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Covid-19 facility planning by patient cohort (cont.)

Alternative treatment sites for Covid-19 positive patients

Type of Covid-19 positive patient	Alternative sites of care
Low acuity patients require remote monitoring and isolation, such as: • Low risk (no known risk factors) Covid-19 positive patients • Recovered Covid-19 positive patients	• Home health • Hotel/dormitory • Designated Covid-positive SNF
Mid acuity patients require nursing care or rehabilitation, such as: • Stable Covid-19 positive patients requiring respiratory therapy • Covid-19 positive patients who have recently been weaned off of a ventilator	• Covid-positive designated IRF or SNF beds • LTACH, IRF or SNF beds converted into med-surge beds • Home health with intensive therapy regimen • Pop-up hospital
High acuity patients require ICU level care, such as: • Patients on or requiring ventilator care	• Keep patients in the ICU • If necessary, move patients to repurposed surgical or LTACH beds

Alternative treatment sites for non Covid-19 positive patients

Type of non Covid-19 patient	Alternative sites of care
Low acuity patients need remote monitoring, nursing care or rehabilitation, such as: • Healthy new mothers and infants • Patients recovering from surgery without complications	• Home health • SNF with ability to isolate incoming patients
Mid acuity patients are non-ICU med-surge patients who have significant monitoring, nursing, rehabilitation or surgical needs, such as: • Joint replacement patients • Stabilized stroke patients • Labor/delivery patients	• SNF/IRF/LTACH converted to med-surge beds • IRF • Ambulatory surgery centers
High acuity patients require ICU level care, such as: • Heart failure patients • Sepsis patients	• Keep patients in the ICU • If necessary, move patients to repurposed surgical or LTACH beds

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Covid-19 facility planning by patient cohort (cont.)

Non traditional cohorts

Cohort	Alternative sites of care
Clinical and non-clinical healthcare workers	• Hotels • Dormitories • RVs • SNF
Patients unable to return home	

NEXT STEPS

Check out our [2 must-read guides](#) for hospitals looking to **expand capacity by using outside facilities**

Learn how to **prepare clinical and non-clinical sites** to take new patient types with our [emergency preparedness guides](#)

Check out [the 4 steps SNFs can take to prepare for Covid-19 positive patients](#) and the **ways hospitals can support their partner SNFs**

Read our [analysis of the CAREs Act](#) to **learn how you can repurpose post-acute sites of care**

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