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# AAP releases interim guidance on caring for children with special health care needs during pandemic

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**Editor's note:** *This guidance has been updated since the time this article was published. Please visit <https://bit.ly/35cXQpd>. AAP interim guidance is based on current evidence and best data at the time of publication. Updates are provided to reflect changes in knowledge about the impact of the disease on children and adolescents. For the latest news on COVID-19, visit <https://www.aappublications.org/news/2020/01/28/coronavirus>.*

The AAP recommends multilayer risk reduction, creative accommodations and shared decision-making to care for children and youth with special health care needs (CYSHCN) during the COVID-19 pandemic.

CYSHCN are more likely to experience disruptions in health care, education and community life as result of the pandemic, which can affect their development, learning and mental health. These impacts can be even more pronounced due to systemic inequities, according to the [AAP's new interim guidance](#). CYSHCN with [certain chronic conditions](#) also are more likely to have severe illness from SARS-CoV-2.

## Multilayer risk reduction

To minimize the risk of infection, CYSHCN should avoid unnecessary closed spaces, crowded places and close-contact settings. [Surface cleaning](#) and [hand hygiene](#) also are important tools to reduce risk of infection.

Nearly all CYSHCN ages 2 year and older should wear cloth [face coverings](#) in indoor public spaces, in homes when there is a concern about virus spread and when they can't maintain distance from other people outdoors. CYSHCN at risk of severe disease and their caregivers also may require [personal protective equipment](#) (PPE) similar to that worn by health care workers. For children who may rely on lip reading, their contacts should use face coverings with transparent windows and/or other forms of augmentative communication strategies like voice-to-text mobile applications.

CYSHCN should be tested for SARS-CoV-2 in accordance with [AAP interim guidance](#). Close contacts of children at risk of severe illness should be screened regularly and tested if they are exposed or symptomatic. Periodic screening for asymptomatic contacts also should be considered.

Other ways to reduce risk include addressing inequities in housing, income and other supports and optimizing health coverage, according to the AAP.

## Creative, flexible and responsive accommodations

Strategies should be in place to meet the needs of CYSHCN in a variety of settings. Outpatient health care providers should proactively reach out to CYSHCN and partner with families. The guidance calls for using telehealth when possible, collaborating with other health care professionals, using home-based laboratory and imaging services when appropriate and taking precautions when conducting in-person visits.

Interdisciplinary care planning and health maintenance visits can be used to counsel patients about risk reduction, develop emergency and advanced care plans, and address ongoing health care needs and special services.

Physical, occupational, speech and other therapies are critical and must continue, according to the guidance. In-person contacts should use appropriate PPE, and providers may use virtual services as an addition or alternative to in-person therapy.

**Schools are another setting** in which the needs of CYSHCN must be a priority. Regardless of whether classes are virtual or in-person, educators and families should review students' Individualized Education Programs and 504 plans and provide additional mental and behavioral health support.

For virtual instruction, schools should ensure CYSHCN have adequate technology, provide options to have aides, offer some in-person activities, offer flexibility in scheduling and provide options for food delivery.

For in-person instruction, schools should give children at highest risk of severe illness the opportunity to participate in activities in larger, better ventilated and less crowded spaces with heightened attention to risk mitigation strategies. They also should educate staff on proper use of PPE in close contact situations.

The guidance also addresses accommodations in other types of health care settings, child care and community life.

### **Shared decision-making**

To facilitate the strategies above, the AAP recommends using **shared decision-making**. When people who care for CYSHCN in health care, education, child care and community life partner with families in the shared decision-making process, they can set goals, put creative accommodations in place and continually re-evaluate their decisions.

### **Resources**

- [Information for parents from HealthyChildren.org on coronavirus and children and youth with special health care needs](#)
- [Information from the CDC about COVID-19 for health care professionals](#)
- [Information about COVID-19 from the AAP Red Book](#)
- [Information about COVID-19 from the AAP](#)