



## Department of Health

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**DATE:** July 10, 2020  
**TO:** Nursing Home Operators and Administrators  
**FROM:** New York State Department of Health

### **Health Advisory: Pediatric Skilled Nursing Facility Visitation**

**Please distribute immediately to:  
Operators, Administrators, Directors of Nursing, Medical Director, Activities  
Professionals**

On March 13, 2020, the Department of Health (“Department”) issued guidance to nursing homes indicating that visitation should be limited to medically necessary or end-of-life services, and in those facilities where one or more resident tested positive for COVID-19, the facility should cancel congregate meals and activities. Such guidance was updated July 10, 2020. The Department will now begin to permit limited visitation in pediatric nursing homes in addition to limited activities for those facilities which meet specific benchmarks and develop a reopening plan via the [NY Forward Safety Plan](#).

This directive includes specific criteria for reducing such restrictions and mitigating the risk of resurgence of COVID-19. Nothing in this directive absolves a nursing home’s responsibility to ensure that resident and family communication is ongoing and supported by virtual visits whenever possible, nor does it change the guidance previously issued relative to visitation for medically necessary or end-of life services

Pediatric Nursing Homes may resume limited visitation and activities beginning **five (5) days from the date of this advisory** and under the following conditions:

1. The Pediatric NH is in full compliance with all state and federal requirements, state Executive Orders and guidance, state reporting requirements including COVID-19 focus surveys, HERDS and staff testing surveys, and federally required submission of COVID-19 data to the National Healthcare Safety Network (NHSN).
2. The Pediatric NH has protocols to separate residents into cohorts of positive, negative, and unknown as well as separate staffing teams to deal with COVID-positive residents and nonpositive residents. In order to effectuate this policy, nursing home facilities should transfer residents within a facility, to another long-term care facility, or to another noncertified location if they are unable to successfully separate out patients in individual facilities.
3. The Pediatric NH has completed the NY Forward Safety Plan and submitted a copy of the completed plan to [covidnursinghomeinfo@health.ny.gov](mailto:covidnursinghomeinfo@health.ny.gov). The facility must retain a copy of the plan at the facility where it is easily accessible and immediately available upon request of the Department or local health department. Any changes to the plan must immediately be communicated to the Department. The plan must clearly articulate the space(s) to be used for visitation (outdoors and indoors) including the number of visitors and residents which could be safely socially distanced within the space(s). Such

plan shall include attestation of compliance with all State and federal guidelines as described in number 1.

4. The Pediatric NH has no staffing shortages as evidenced by the NH's individual staffing plan and as reported by the NH through required submissions to the NHSN.
5. The absence of any new onset of COVID-19 among staff or residents as reported to the Department on the HERDS and staff testing surveys and as reported to the NHSN for a period of no less than twenty-eight (28) days, consistent with [CMS established thresholds](#).
6. Access to adequate testing. The NH should have a testing plan in place that, at a minimum, ensures that to the extent possible, all pediatric nursing home residents, upon consent by the parent or legal guardian have received a single baseline COVID-19 test. In addition, the NH must have the capability to test or can arrange for testing of all residents upon identification of any individual with symptoms consistent with COVID-19. If a staff member tests positive for the SARS-CoV-2 virus, the NH must have the capacity to continue re-testing all nursing home staff and residents as applicable.
7. An executed and operationalized arrangement with laboratories to process SARS-CoV-2 virus tests. The test used should be able to detect SARS-CoV-2 virus (e.g., polymerase chain reaction (PCR)) with greater than 95 percent sensitivity, greater than 90 percent specificity, with results obtained and rapidly reported to the nursing home.
8. Adherence to written screening protocols for all staff during each shift, each resident daily, and all persons entering the facility or grounds of such nursing home, including parents, guardians and essential service providers. At a minimum resident monitoring must include daily symptom checks, vital signs and pulse oximetry.
9. A copy of the pediatric NH's formal visitation plan is posted to their public website and broadcasted via email or social media to provide visitors with clear guidelines for visiting and to announce if and when visitation is paused due to an increase in the number of residents and/or staff with a confirmed positive COVID-19 diagnosis.

**When a pediatric nursing home meets all of the above criteria, the home may resume visitation following the guidelines outlined below which must also be included in the pediatric nursing home's NY Forward Safety Plan.**

1. Visitation is limited to parents or legal guardian of the pediatric resident and immediate family. Those under 18 years of age must be accompanied by an adult 18 years of age or older. No more than two (2) visitors per resident will be permitted at any one time.
2. **No more than 10 percent (10%)** of the residents shall have visitors at any one time. This may be adjusted by the Department on a facility specific basis.
3. Specialty service providers will be provided access and must adhere to all guidelines related to infection prevention and control as documented in the nursing home's NY Forward Safety Plan. These providers will not be considered visitors for the purpose of maintaining visitors in numbers not to exceed 10 percent of the resident census.
4. Parental/legal guardian and immediate family visitation and specialty service providers will be permitted under the following conditions:
  - a. Adequate staff are present to allow for personnel to help with the transition of residents, monitoring of visitation, and cleaning and disinfecting areas used for visitation after each visit using an EPA-approved disinfectant.
  - b. The nursing home maintains signage regarding facemask utilization and hand hygiene, and applicable floor markings to cue social distancing delineations.

- c. Parents, guardians, immediate family and specialty service providers are screened for signs and symptoms of COVID-19 prior to resident access and visitation will be refused if the individual(s) exhibit any COVID-19 symptoms or do not pass screening questions. Screening must consist of both temperature checks and asking screening questions to assess potential exposure to COVID-19 which shall include questions regarding international travel or travel to other states designated under the Commissioner's travel advisory. The facility must maintain documentation of the screening questions asked onsite and make it available upon the Department's request.
  - d. Documentation of screening for parents, guardians, immediate family and specialty service providers must be maintained onsite in an electronic format and available upon the Department's request for purposes of inspection and potential contact tracing. Documentation must include the following:
    - i. First and last name of the parent, guardian, family member or service provider;
    - ii. Physical (street) address of the parent, guardian, family member, or service provider;
    - iii. Daytime and evening telephone number;
    - iv. Date and time of visit;
    - v. Email address if available; and
    - vi. A notation indicating the individual cleared the screening (both temperature and questions) that does not include any individual temperatures or other individual specific information.
  - e. There is adequate PPE made available by the nursing home to ensure residents wear a face mask or a face covering which covers both the nose and mouth during visitation, if medically tolerated.
  - f. Parents, guardians, immediate family, and specialty service providers must wear a face mask or face covering at all times when on the premises of the nursing home and maintain social distancing to the extent possible, with the exception of a parent, immediate family or guardian having close contact with their child. The nursing home must have adequate supply of masks on hand and make available to the visitor who may lack the appropriate face covering.
  - g. Facilities must provide alcohol-based hand sanitizer to parents, guardians, immediate family and specialty service providers visiting and providing services to pediatric residents. Those individuals must be able to demonstrate appropriate use.
  - h. The nursing home should develop a short, easy-to-read fact sheet outlining expectations during visitation including appropriate hand hygiene and face coverings. The fact sheet must be provided upon initial screening of the parent(s), guardian, family member or specialty service provider.
5. Pediatric residents may also be assisted to go outdoors with staff supervision and the appropriate infection control, safety, and social distancing requirements maintained. Outdoor visitation should be encouraged whenever feasible.
6. An interdisciplinary team must be created by the facility to review visitation program compliance with this Health Advisory. If any visitor fails to adhere to the protocol, he/she will be prohibited from visiting during the duration of the COVID public health emergency.

The facility should establish additional guidelines as needed to ensure resident and staff safety and continuity of facility operations. Hours of visitation must be clearly delineated in

policy and within the visitation fact sheet. Violations of this directive will result in the imposition of fines and additional enforcement remedies.

If the facility falls out of compliance with requirements listed in this advisory, the pediatric nursing home should immediately halt visitation and inform the Department. In addition, the New York State Department of Health can halt visitation at the pediatric nursing home at any time due to community or facility spread of infection, or when the Department identifies that the pediatric NH has failed to comply with requirements of this advisory.

In summary, while these guidelines are intended to restart limited visitation, the Department reserves the right to restrict visitation at any point. Failure to follow these guidelines may result in restriction or revocation of visitation.

Information for healthcare providers on topics related to COVID-19 is readily available on the Department of Health public website at <https://coronavirus.health.ny.gov/information-healthcare-providers>.

Thank you for your ongoing support and cooperation in responding to COVID-19 concerns. Questions may be routed to [covidnursinghomeinfo@health.ny.gov](mailto:covidnursinghomeinfo@health.ny.gov).