Frequently Asked Questions during the Public Health Emergency Related to Executive Order 264 - Masking Requirement

The Department of Children and Families is charged with ensuring that child care centers comply with the law. The rationale for the Executive Order (EO) is spelled out extensively in the text itself. For questions on the underlying science, please refer to the Centers for Disease Control and Prevention [https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/child-care-guidance.html](https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/child-care-guidance.html) which promulgated the standards adopted by New Jersey and other states. Below are responses to many of the questions received regarding masking since the announcement of EO 264. More information specific to the vaccine requirement/testing will be made available as we get closer to the implementation date.

1. **How can centers implement the mask mandate with very young children?**
   Some young children will resist wearing a mask. It is not expected that center staff forcibly replace it, impose harsh discipline, or in any way exceed the limits of age-appropriate behavioral management. Enforcement here should mimic the approach you would hypothetically take with a child who refused to wear pants or a toddler who refused to wear a diaper.

2. **Will there be a grace period before citing violations, as children have not been wearing masks? Will centers be cited if they do not force children to wear a mask? Will complaints about masks be substantiated even if the center is making an effort?**
   As per the Executive Order, the mask mandate goes into effect Friday 9/24/2021. Licensing is not requiring centers to force children to wear masks. However, centers are expected to provide a positive encouraging environment to facilitate mask wearing for all children over the age of two years old. Many factors will be taken into consideration including:

   - All or most of the children in care being unmasked, rather than an isolated few;
   - A broad lack of masks on children old enough to understand and follow verbal instructions;
   - Not having masks for every child, or not having a mask in close proximity to each child;
   - Communications to parents which convey tolerance for mask refusal;
   - Chronic or repeated issues with a lack of masks, particularly over the course of multiple inspections;
   - Continued enrollment of children if parents refuse to permit or actively discourage masking during care; and
   - Explicit refusal to enforce the mandate.

Centers will not be penalized as long as the program is working in a good faith effort towards compliance, as per the conditions listed above.
3. Do students need to keep masks on all day and how do we enforce this since children constantly remove them?
The Executive Order does not require children to be masked while sleeping/resting, eating, exercising and while outdoors. Masks are required during other indoor activities. If children repeatedly try to remove them throughout the day, staff will need to find creative ways to continue to encourage their mask wearing.

4. Are masks required outdoors?
No, at this time, masks are not required when outdoors for children or staff. As previously indicated, staff should have masks readily available.

5. Are mask lanyards permitted for children?
Lanyards are not prohibited. As with anything else, children should be adequately supervised to ensure they are used properly, indoors and outdoors.

6. Will the state provide masks for children like they do for the public schools?
The state will not be providing masks for centers. It is the responsibility of each center to ensure that enough masks are available at the center.

7. Can a parent opt out? If parents drop off their child with no mask and tells center staff that they do not want their child to wear a mask, what do centers do? Do children have to be excluded if they come in without a mask or refuse to wear it? What are we obligated to do?
The Executive Order indicates that a doctor’s note would be the only acceptable exemption. Parents cannot opt out. If the parent is not permitting you to put a mask on their child, or actively discouraging masking during care, then you may need to discontinue that child’s enrollment. Reasonable efforts should be made to avoid this. Centers should have disposable masks on hand for children who do not bring one.

8. How do centers handle parents who are upset about the children that are exempt from wearing mask?
Masks are part of a multifaceted strategy to provide the best possible degree of safety in childcare centers. The combination of most individuals in a center being masked, along with other precautions, allows for this, even if not all children or staff can be safely masked.

9. How do centers handle parents making threats? Do centers follow their expulsion policy/call the police?
As in any circumstance for any reason, aggressive behavior or threats from parents are not tolerated. If circumstances escalate and become unmanageable you should call the local authorities. The center’s expulsion policy should be clear on these situations.

10. How can staff appropriately observe food allergies when an epi pen plan indicates to first observe a rash on the child’s face or mouth?
Children should not be wearing masks while eating and during mealtimes.
11. Can children get a medical exemption, for breathing/sensory/other medical reasons? Is a note from a parent about a medical exemption acceptable?
The Executive Order indicates that a doctor’s note would be the only acceptable exemption. A note from a parent is not acceptable for medical exemptions. The documentation of the medical condition or disability must be from a doctor or treatment provider and kept on file at the center.

12. What information needs to be on a doctor's note for a medical exemption? Are all notes acceptable?
Exemptions are granted for bona fide medical conditions or disabilities that preclude mask usage by the child or staff member. A note from a medical provider or treatment provider is required. Conditions must be presently occurring and not hypothetical. Office of Licensing (OOL) reserves the right to require additional documentation if, upon consultation with public health authorities, the specified medical condition or disability is not reasonably related to the inability to wear a mask.

13. Since students will be masked can cohorts be combined?
According to the DCF Letter to Providers Regarding EO 264 issued on September 23, 2021:
DCF is rescinding the “Grouping of Children” restrictions contained in the “Updated Covid-19 Standards for Child Care Centers” issued on May 26, 2021.

This is the excerpt on grouping of children from the above referenced document:
2. Grouping of Children
   a. Children shall be grouped into groups of no more than 30, pursuant to the maximum group sizes specified in N.J.A.C. 3A:52-4.4. Classes shall include the same group of children each day, to the greatest extent possible.
   b. Designated groupings shall not congregate less than six feet in all directions from other designated groups or, in the alternative shall be separated by walls or other physical partitions.
   c. Combining or mixing groups shall not be permitted except that centers may permit the limited comingling of groups during periods when total attendance is substantially decreased (e.g. the last hour of operation) if (1) such comingling is limited to sibling groups, or (2) social distancing of at least six feet is strictly observed, and mask use for children over age 2 is required, subject to medical limitations.

As such, groups are no longer limited to the same group each day, groups no longer must be social distant or separated from other groups, and children may comingle. This also allows for school wide events.

14. Are religious exemptions acceptable?
There are no religious exemptions for masking.