



Frequently Asked Questions during the Public Health Emergency

**The “*” denotes new or amended entry and underlined text denotes new or amended text.*

12.21.2020

Staffing/Group Size/Barriers/Social Distancing

1. ***The new Executive Order (EO) now states that indoor gatherings are limited to 10. Does this apply to child care center group sizes?**

No. The limit in the new EO DOES NOT apply to childcare. 15 is still our maximum group size number, not 10.

2. **Our center has employees who leave at various times throughout the day, at that time a new teacher takes over, is that possible under the new guidelines?**

Centers shall assign the same staff members to remain with one group. It is permissible to have more than one staff member assigned to a group to accommodate breaks and shift changes.

3. **Does the 15 child per group still apply for nap time? Like most schools, our teachers switch off for lunch break as the ratio changes once the children are asleep.**

Yes, grouping applies to nap time as combining or mixing groups shall not be permitted. If more than one group of 15 children occupy one room, the same multiple groups may continue to occupy the same room under the Guideline that “spacing of groups may be reduced to six feet during nap or sleep periods, if necessary.”

4. **In order to provide staff breaks, can staff from other rooms be used for coverage or is that now cross contaminating? For example, I work in toddlers and today I break the 3-year-old room and the 4-year-old rooms?**

No, centers shall assign the same staff member to remain with one group, however more than one staff member may be assigned to a group to accommodate breaks and shift changes. We understand situations occur wherein this may not be feasible. However, it is important to make a good faith effort to minimize contact with multiple staff whenever possible. If a director or other staff person is able to observe a group without interacting and maintaining social distancing, that is the best-case scenario. It would not be permissible to have a floater that visits multiple classrooms throughout the day as this would increase the risk of exposure throughout the entire center.

5. **What about staff that teach both an AM and a separate PM session?**

If the program has two different sessions, such as AM and PM, the same teacher may teach both groups. The children may not co-mingle or attend both sessions. The teacher must also clean and disinfect between the sessions.

6. How do we separate multiple groups of 15 children in a classroom that is licensed for more than 15 children?

Per the guidelines, "Groups shall congregate not less than 10 feet in all directions from other groups or be separated by walls or other physical partitions." As an example, if a room capacity is 24, the children may be split in two groups of 12 with 10 feet in all directions from each other or be separated by physical partitions, above the eye level of the staff who use the area. If separation is not feasible, the center would only be able to accommodate 15 children in that room regardless of room capacity.

7. Does the maximum group size of 15, include just the children or adults and children?

This refers to groups of children, not children and adults.

8. *Is it permissible for groups to be combined if they are more than ten feet away? For example, can 2 children from one group be on one side of the room more than ten feet away from 3 children who are from another group for the first hour of the day before an additional staff member arrives?

This staffing strategy is not permissible unless all comingling requirements are met as described in #10. because these children need to be with their assigned staff member in case of an emergency/injury that requires the staff member to tend to the child without maintaining the required social distancing.

9. Will the new guideline for group size and social distancing affect the licensed capacity?

Centers may not be able to accommodate children to their full licensed capacity while complying with the Guidelines.

10. *What are the requirements for comingling?

Limited comingling of groups may be permitted under the following circumstances:

- Total attendance is substantially decreased (e. g: the last hour of operation)
- Comingling is limited to sibling/household member groups OR occurs outdoors while social distancing is strictly observed, and close contact is prohibited.

Centers are highly encouraged to require the use of masks by all children over age two during these periods.

11. Is the center able to use common areas such as break rooms and shared offices?

Center staff should comply with social distancing, hand washing, and mask guidelines per the CDC.

12. If in a large room you can fit multiple groups of 15 children, do the groups need to remain 10 feet apart for every activity all day long or just during group time?

Grouping is not incumbent upon activities but space. Consistent individual groups of 15 children occupying one room should remain 10 feet apart or be separated by physical partitions, above the eye level of the staff who use the area throughout the day, except at nap and meal times (6 feet apart if necessary).

13. While the group size is 15, do ratios remain the same?

Yes, staff/child ratios remain the same and must be adhered to for all age groups.

14. For room dividers/partitions—how tall must they be to separate groups? Is furniture an acceptable barrier/divider?

If groups are no less than 10 feet apart in all directions, they must be separated by walls or other physical barriers to eliminate or minimize exposure risk. Ensure physical barriers are safe, secure and of sufficient height (above the eye level of the staff) wherein exposure from one group to another, including staff, is minimized. Such barriers may include plastic sheets, bed sheets or cubicle walls. Ensure physical barriers do not impact evacuation routes.

15. Can the same room be used for different groups of 15 and possibly different teachers from morning to afternoon session, or different days of the week- with the understanding that cleaning would need to take place between sessions?

Yes, per the guidelines, “If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering the area.” However, “staff shall be assigned to and remain with one group.”

16. Is it permissible for a child to attend more than one program? If they do attend another program, can they join a group at the center when they arrive?

Yes, it is permissible for a child to attend more than one program, whether licensed or not, and can join an existing group if that group does not already have the maximum of 15.

17. What procedures should centers use to assign staff to groups, is it similar to a primary caregiver list?

It is at the center’s discretion how staff members are assigned to a group.

18. Are button down shirts/smocks for staff required, or can they just change regular t-shirts or shirts when necessary?

Shirts/coverings that do not need to be removed over the head/face are recommended.

19. Is it permissible for the director go from room to room?

The director should limit contact with multiple groups of children and maintain a 6-foot distance from children and staff.

20. Is the gym allowed to be used?

Yes, per the guidelines, “If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering the area.” However, “staff shall be assigned to and remain with one group.”

21. Regarding partitions, are we supposed to get approval from the local code enforcement department and fire code officials?

Approval from the local code enforcement officials depends on the type of partition. Ensure partitions are stable, secure, and arranged to provide access to a three-foot-wide aisle that leads to an unobstructed exit. If you are looking to make permanent changes to a classroom, please reach out to your inspector for further guidance.

22. Do children in their group of 15 or less have to maintain 6 feet of social distancing from each other? Do they have to be broken up at a lunch table?

While close contact is discouraged, such as hugging and wrestling, children do not need to be 6 feet apart from each other in their own group and may sit at the same lunch table.

Temperature Checks/Health Screening Log/Hand Washing/Sanitation

23. Do we need a plexiglass shield for staff to stand behind if doing temperature checks?

Centers should utilize social distancing or ask parents to take their child's temperature and confirm the child does not have a fever, shortness of breath or a cough. Staff should make a visual inspection of the children for signs of illness. However, if staff are taking the temperatures, they will need a physical barrier that protects their face. Refer to: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#ScreenChildren>.

24. Can centers take the children's temperature, or should we take the word of the parents?

Centers can take children's temperatures or have parents take their child's temperature upon arrival to the center. Centers should, however, observe the temperature, at a distance through a car window or by other means that allow for social distancing to be maintained

25. *Are child care programs operating in public schools and receiving children directly from the school required to screen children a second time upon arrival at childcare?

No, additional screening of these children will not be required.

26. *How do we handle suspected or confirmed cases of COVID-19? If a child has a fever, how long do they have to remain home before returning to the center?

****Refer to the New Jersey Department of Health COVID-19 Guidance for Reopening Childcare at https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_guidance_reopening_childcare.pdf***

27. *If a family member travels to an area that is on the travel advisory, is the child that attends child care excluded?

No, the child is not excluded unless they themselves traveled to one of those areas.

28. *If a family member is quarantined for exposure, can the child attend child care?

The child may attend as they are not the one who was exposed and therefore, not the one who would need to quarantine.

29. *What are the privacy rules regarding a family's responsibility to report to child care programs? Are families protected by HIPAA?

Public Health is exempt from HIPAA.

30. If the center chooses to follow Method 1 for taking temperatures, who cleans the thermometer in between uses? Are gloves required for the parents in this method?

If the parent is utilizing their own thermometer, it is up to the parent to bring home the thermometer and properly clean and sanitize the thermometer. If the center is providing the thermometer, the center should clean and sanitize the thermometer in between uses unless it is a non-contact thermometer. Staff should wear disposable gloves if they are providing the thermometers for the parents to use. Gloves should be disposed of after each use.

31. *Does the center's illness policy need to be revised based on the new CDC recommendations for fevers?

OOL is temporarily using these guidelines as it pertains to the current situation. Centers will be updated if permanent changes are made and if centers are required to update their illness policy.

32. The guidance refers to "hand hygiene stations". Would hand sanitizer stations be sufficient or do we need a sink with running water?

Hand sanitizer can be used by older children and staff. Younger children should be brought to their designated classroom to immediately wash their hands.

33. Is bleach and water still an acceptable disinfectant? If not, what are the other options?

Diluted household bleach solutions may also be used if appropriate for the surface.

- Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%. Ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
- Unexpired household bleach will be effective against coronaviruses when properly diluted.

Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.

Leave solution on the surface for **at least 1 minute.**

To make a bleach solution, mix:

- 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water
OR
- 4 teaspoons bleach per quart of room temperature water
- Bleach solutions will be effective for disinfection up to 24 hours.

An EPA-registered disinfectant is also acceptable. A list of products that are EPA approved for use against the virus that causes COVID-19 is available at www.epa.gov .

34. Are hand sanitizing wipes suitable for the hand hygiene stations for infants and toddlers since they can't use actual hand sanitizer?

Hand sanitizing wipes should not be used on infants and toddlers.

35. Are portable sinks permissible?

Yes, they are permissible. Centers utilizing portable sinks must ensure proper cleaning and sanitizing of the system, and that all manufacturer's instructions are followed.

36. *Can we still give breathing treatments, eye drops, antibiotics and apply sunscreen?

Centers should continue to follow their medication policies. Ensure that staff wear disposable gloves to dispense medication. Gloves should be disposed after each use and hands are required to be washed. During this COVID-19 pandemic, asthma treatments using inhalers with spacers (with or without face masks) are preferred over nebulizer treatments whenever possible. Nebulizer treatments should be reserved for students who cannot use or do not have access to an inhaler. PPE for use when administering nebulizer treatments or peak flow meters to students with asthma consists of gloves, medical or surgical facemask and eye protection. Students with symptoms of COVID-19 should not attend school. Symptoms of asthma and COVID-19 may overlap, including cough and shortness of breath. Therefore, students experiencing acute asthma attacks should not be attending school without approval by a healthcare provider.

37. *Is there guidance on quarantining cardboard or paper books as they may not be able to be properly disinfected?

According to the CDC, children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

38. When the same children are in the same room playing with toys (Legos) at the same table, can the children share the toys or do the toys need to be cleaned and disinfected prior to a child at the same table uses the toys?

Within their assigned group of 15 this is permissible. However, per the guidelines, "Sharing of supplies, food, toys and other high touch items (art supplies, school supplies, equipment, etc.) must be strictly limited. Centers shall ensure an adequate supply of school, art and other items to preclude the need for sharing of items." In addition, children's hands should be washed moving between activities. Any toys that come in contact with bodily fluid should be immediately removed and put aside until they can be properly cleaned and sanitized.

39. We do not have running water in the entrance of the building. Can the children wash hands in the classroom?

Children should be brought directly to a sink upon entering the building.

40. To take temperatures, do face shields suffice as barriers? Parents will not enter the building. We purchase infrared scan non-touch thermometers.

Per method 1, nothing other than a cloth face mask is required as social distancing is maintained in this method. A face shield would be a sufficient replacement for the cloth face covering in that case. If staff are taking temperatures, follow guidelines for Method 2. As this method requires a protective barrier, a face shield would suffice. Additionally, if using an infrared thermometer, follow the manufacturer's instructions, as well as the recommended precautions for Method 2.

41. According to the guidelines we need some sort of partition. Do we need to have a plastic one or will a table be enough?

The use of a table is not a sufficient partition or barrier. Per the guidelines, if you are utilizing method 2, “staff must stand behind a physical barrier, such as glass or plastic window or partition that can serve to protect the staff member’s face and mucous membranes from respiratory droplets that may be produced if the child being screened sneezes, coughs or talks.” The center should develop their own policies and procedures to adequately screen using either methods 1 or 2.

42. *When a child arrives at the program, but is not escorted by their parent or guardian as they are arriving after school or walking to the program, how should the child be screened?

The child should be screened as required including checking their temperature and answering the required screening questions. If the child cannot answer the screening questions, a parent/guardian shall be contacted to answer the questions before the child gains entrance to the program. Children that arrive from a public school program where they were already screened, do not need to be screened again.

Masks

43. The parents of our students do not want their children to wear masks to school/camp. They are strongly against it and feel that their children will be touching their face more frequently trying to adjust it, taking it off and on etc. What do I do to ensure compliance with this guideline?

The center must develop a procedure that promotes the use of cloth masks for children when feasible. Individual centers will need to develop their own policies and inform families as such.

44. Are centers required to provide masks to their employees and to children who forgot them?

Centers will need to determine whether they will provide masks or require staff and children to have their own masks. It is strongly encouraged that centers keep a supply of masks in the event that masks are forgotten or there is a need for a replacement.

45. Is a cloth mask required, or can it be a traditional 3 ply (white/blue) type with elastic on side of face, or a bandana or scarf of some kind? Also, what about the clear shield for my teacher who needs to read lips, can her classroom wear those instead?

Traditional 3 ply masks, bandanas, fabric masks, face-shields, and clear masks are acceptable. Face-shields should extend below the chin and there should be no exposed gap between the forehead and the shield’s headpiece.

46. What are the restrictions for staff if they cannot wear a mask due to medical restrictions?

The center may have to develop a plan, wherein those staff are not feeding or diapering children. Staff may also wear the clear face shield. According to the CDC, if face-shields are worn without a mask, they should wrap around the sides of the wearer's face and extends below the chin. Disposable face shields should only be worn for a single use. Reusable face shields should be cleaned and disinfected after each use. Plastic face shields for newborns and infants are NOT recommended.

47. Are staff required to wear a covering when feeding, changing, or holding, infants and toddlers? Do coverings for infant feeding have to be long sleeve? Can they use adult disposable bibs?

No, it is not required, however staff may wear coverings to protect their clothing from bodily secretions. If a staff chooses to not wear long sleeves, etc., they should have a change of clothes and any clothing that comes in contact with bodily secretions must be immediately changed and placed in a plastic bag or washed in a washing machine. If centers use disposable bibs, they will have to be discarded after each use.

48. What does feasible mean for mask use in children?

Children should wear masks as long as it is developmentally appropriate for the individual child. Children under the age of 2 are not required to wear a mask. Children will need to remove masks during mealtimes and periods of rest.

49. What if a staff/parent/child refuses to wear or provide a mask? Is it grounds for termination or expulsion?

Staff are required to wear a mask unless there is a medical reason wherein accommodations will need to be made. Parents are not to be admitted into the center and social distancing should be maintained during times of arrival and departure. Children should be encouraged to wear masks providing it is developmentally appropriate. Individual centers will have to determine their policies on termination or expulsion and updated policies should be provided in writing with a signature attesting to the receipt of the new policy.

50. How should children's masks be removed/stored when not in use (while eating/resting/sleeping)?

Masks should be handled only by the ear loops or ties and should be carefully folded so the inside is stored against itself. Children should place their mask in an individual, clean, and labeled sealable brown bag or breathable container. Hands should be washed immediately after removing and storing the mask.

51. Do the staff have to wear masks outside?

Yes. Per the guidelines, "Staff shall be required to wear cloth masks while working unless doing so would inhibit the individual's health."

Diapering/Toileting

52. Do toilet seats have to be disinfected after each use or only when a group uses the bathroom?

No, per the guidelines "If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering the area." Additionally, "centers shall increase the frequency cleaning of restrooms."

- 53. In a bathroom with 2 stalls and 2 sinks, do we need to have plexiglass in between the sinks? If we normally have 3 classrooms use our 2 hall bathrooms-we assign 1 bathroom to each class. What do we do with the 3rd class?**

No, plexiglass is not needed between the sinks. Centers may consider utilizing spaces in shifts and per the Guidelines, "If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering the area." Additionally, "centers shall increase the frequency cleaning of restrooms" including when a child from another group is using a shared restroom; "Use of shared spaces (entry ways, restrooms) shall be carefully controlled to ensure that children and staff maintain at least six feet of separation from children or staff from other groups."

- 54. How are centers keeping groups separate when multiple classrooms may share a bathroom located in 1 of the rooms?**

Centers may consider utilizing spaces in shifts and per the Guidelines, "If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering the area." Additionally, "centers shall increase the frequency cleaning of restrooms" including when a child from another group is using a shared restroom; "Use of shared spaces (entry ways, restrooms) shall be carefully controlled to ensure that children and staff maintain at least six feet of separation from children or staff from other groups."

Lunch/Snack

- 55. Can centers give school snacks in disposable Dixie cups or should parents bring them for their child?**

Disposable goods are recommended for food service. Per the Guidelines, "Centers shall ensure that staff are conscious of how they deliver food and handle silverware and plates (recommend disposables). When handling, do not touch food contact surfaces and ready to eat food without gloves, or utensils." OOL will not regulate who provides the disposable goods.

- 56. Are pre-packaged snacks such as Birthday snacks or cupcakes allowed?**

Sealed, pre-packaged snacks/cupcakes are permitted and should be served in accordance with Guidelines. "Centers shall ensure that staff are conscious of how they deliver food and handle silverware and plates (recommend disposables). When handling, do not touch food contact surfaces and ready to eat food without gloves, or utensils." However, it is not recommended that goods brought from home (homemade or store bought) are shared with other children.

- 57. Is it okay to store lunch boxes in the refrigerator together or should parents provide an ice pack and keep lunches in their classrooms?**

Per the Guidelines, "Children's belongings shall be kept separate in individual storage bins or cubbies and sent home each day for washing." Centers may provide individual storage bins within a large refrigerator for children's belongings (lunch boxes) or require that parents provide lunches adequate for storage at room temperature (with or without an ice pack) within their child's individual storage bin or cubby.

- 58. Our center has meals delivered; can the delivery people enter through the kitchen if we check their temperature?**

Per the Guidelines, “Unless precluded by emergency circumstances, visitors to the facility shall be subject to the same screening procedures as children and staff, and shall be denied admission on the same basis unless the center is legally precluded from denying access (e.g. a law enforcement agent with an appropriate warrant). “Visitors shall be required to wear cloth masks while visiting the center unless doing so would inhibit the individual’s health. If a visitor refuses to wear a cloth face covering for non-medical reasons and if such covering cannot be provided to the individual by the business at the point of entry, the center must decline to allow them to enter.”

59. Can a mother come into the center to breast-feed or do the staff have to bring the baby out to her, and she must breast feed outside of the center?

Yes, a breastfeeding parent would be an essential visit. Per the Guidelines, “Unless precluded by emergency circumstances, visitors to the facility shall be subject to the same screening procedures as children and staff, and shall be denied admission on the same basis unless the center is legally precluded from denying access (e.g. a law enforcement agent with an appropriate warrant). “Visitors shall be required to wear cloth masks while visiting the center unless doing so would inhibit the individual’s health. If a visitor refuses to wear a cloth face covering for non-medical reasons and if such covering cannot be provided to the individual by the business at the point of entry, the center must decline to allow them to enter.” The center needs to ensure social distancing is maintained while the breastfeeding parent is present. There should be a designated place separate from the group of children and the designated space should be cleaned and disinfected before use by another breastfeeding mother.

Program Activities

60. As far as soft materials go, there are several things in the infant room that we need. How do we handle the padding on the bouncy seat and the exersaucer seats? We do not have multiple pads to change between each child.

If the soft material cannot be removed from the apparatus, i.e. bouncy seats, exersaucers, they may not be used. If they are being used, they must be solely used for the same child until the material is able to be washed and sanitized as required. If the material can be removed and is not required for the use of the equipment according to manufacturer’s instructions, the apparatus can be used within a group and cleaned and disinfected between uses.

61. Are children allowed to share the same toys, books, play and writing equipment?

Per the Guidelines, “Sharing of supplies, food, toys, and other high touch items must be strictly limited.” “If items must be shared, they shall be used by one group at a time and cleaned and disinfected between uses.”

Napping

62. *How far apart should cots be?

Spacing of groups may be reduced to six feet during nap or sleep periods, if necessary. This is the ideal spacing recommended by the CDC for cots, mats, and cribs (that do not have a plexiglass barrier). Cots or bedding shall be positioned alternatively head-to-toe to minimize potential virus transmission between children. Additionally, cots shall be arranged to provide access to a three-foot-wide aisle that leads to an unobstructed exit.

63. Will we need to keep cribs 6 feet apart?

No, DCF is not requiring this spacing. However, the CDC recommends “ensuring that children’s naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart.” Cribs with plexiglass sides do not need to distance unless the child can stand and reach over the side.

Playground

64. Are we allowed to do outdoor water play?

Water tables are prohibited. Sprinklers are permissible within the same group without the need for social distancing. Ensure only one group at a time are using the sprinkler.

65. Are children allowed to share balls on the playground? Or does each group need their own set of balls or other smaller outdoor equipment?

Per the Guidelines, “Activities that are likely to bring children into close contact should be cancelled or modified. For example, games and sports involving direct physical contact or shared equipment (football, baseball) should be replaced with no contact activities or sports (running races, aerobics).”

66. Is it permissible for children to play in large sandboxes with their own sand toys?

Yes. Children must have their own sand toys that are not handled by any other children and must not be within 6 feet of any child who is not in their assigned group.

67. *Is playground equipment allowed to be used, if allowed does it need to be disinfected between groups?

Per the CDC, child care centers should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product for use against SARS-CoV-2.

68. *Can a center use their parking lot for outdoor space during this time, even if it's not part of the current RAO? Must centers only use space included in their Remedial Action Outcome (RAO) letter, No Further Action (NFA) letter or Child Care Facility Approval Letter (CCFAL)?

Centers with smaller outdoor play areas must stagger use by smaller groups as needed. Consult with your inspectors about utilizing additional space that has not been previously approved by OOL.

Trips/Parks

69. Are we allowed to take the children to local parks?

Yes, per the guidelines, “Field trips and other off-site activities are prohibited, with the exception of off-site activities within walking distance of the facility, if social distancing can be maintained throughout. The use of playground equipment is prohibited.

70. Are we allowed to take the children on field trips, like skating?

No, per the Guidelines, "Field trips and other off-site activities are prohibited."

71. Can we take the children for walks in a stroller?

Yes, if children are within the same group and social distancing can be maintained.

Visitors

72. *Are therapists or outside vendors permitted to enter the center during school hours? For BOE contracted centers, are the Master Teachers required by the BOE and service providers required by a child's IEP permitted?

Therapists, master teachers, and other specified outside visitors, including entertainers and photographers, may enter the center during operating hours, if following screening protocol, they maintain six feet of separation from all children and staff and wear a mask. Wherever possible, centers should consider hosting such visitors in an outdoor setting. If such visitor is permitted indoors, the center must limit the visitor's movement and length of time within the facility.

73. Can providers of therapeutic and treatment services meet with children from different groupings at different times, in one designated indoor space on the same day?

When meeting with multiple groups on the same day, no comingling of groups should occur, and cleaning of the space and materials should be performed between groups. Cleaning measures must be completed prior to the new group entering the area. In addition to screening and requiring a mask for the visitor and children when appropriate, maintaining social distancing and performing hand hygiene upon entry and when changing groups would also be recommended.

74. As far as visitors after hours such as cleaning services, does the center need to stay and check temperatures and document that on the form?

It is not required, but the center can establish a system of self-screening and documenting for visitors at the center after operating hours in keeping with the Guidelines.

License/Ages/Licensed Space

75. What should a center do if they want to change their hours of operation or sessions of operation?

Notify Office of Licensing inspection staff via email and make the change for the center in NJCCIS.

76. How does a center request an age change to provide care for school age children (ages 6-13) if they are currently licensed for 0-6 or 2.5-6?

Submit an Age Change Request via NJCCIS and OOL will expeditiously review the request. If you are licensed for 0-6, you would request 0-13 not 6-13. Email OOL inspection staff to alert them that the request was submitted.

77. Can centers use previously approved space (not towards capacity) for full-time use so they can maximize their licensed capacity (since only 15 children in a room or area they lose the ability to care for their total licensed capacity)?

Yes, centers may submit a New Space Request via NJCCIS and OOL will expeditiously review the request. It is always helpful if the center emails the OOL inspection staff to alert them that the request was submitted.

78. Will OOL change licenses to reflect the changes in the licensed capacities or is this being done strictly on the honor system?

No, OOL will not change licenses to reflect the changes in the capacities. Centers need to comply with the Guidelines which may restrict capacity.

79. What will be the procedures to modify the center, such as removing a wall to increase space in the center?

The center should reach out to OOL inspection staff prior to removing a wall to provide technical assistance and/or set up a courtesy inspection.

80. If a school is doing remote learning or not re-opening right away, will the license become inactive or what will the process be?

Centers that are only offering virtual instruction or remain closed due to COVID-19, are listed as temporarily closed in NJCCIS. The center must notify OOL of their anticipated re-opening date and provide updates to OOL if the date changes.

Administrative

81. *What paperwork must be completed in order to re-open my center? Is there any additional paperwork I need to complete?

Inform OOL inspection staff of your re-opening date or any changes to your reopening date. Submit an attestation form if you have not done so already.

82. How do I obtain information on available child care grants and/or subsidy funding?

Please visit the DHS/DFD website at <https://www.childcarenj.gov/> and <https://www.childcarenj.gov/Providers/Grants> for additional information.

83. Will Understanding Licensing workshops go to an online format?

OOL is developing an online format.

84. Are there new Guidelines that we can access to train our staff prior to the opening?

Please refer to the DCF Health and Safety Guidelines available on the NJDCF website at https://www.nj.gov/dcf/coronavirus_licensedchildcare.html . The Guidelines provide a lot of important information on which staff need to be trained.

85. Will the State continue to subsidize care?

The DHS/Division of Family Development oversees the State's subsidy program. Refer to their website at <https://www.childcarenj.gov/> or contact your CCR&R for guidance.

86. In a case of COVID-19 how long does the center needs to be closed?

Per the guidelines, "Centers that become aware of a COVID-19 positive case in their facility must contact their local health facility for guidance."

87. How should we handle universal health forms that have expired since we've been closed, or immunizations that have been missed? Is there a grace period since some doctor's offices weren't seeing patients for well visits, or does every child back on June 15th need to have a current health form and shot record, no exceptions?

Children that were previously enrolled that have an up to date Universal Health record, do not need to provide a new one upon the resumption of care. If the health record is expired, the center may still accept the child, but will need to obtain the updated health record as required. All newly enrolled children will need to provide a new universal health record as per the requirements of the Child Care Manual.

General

88. Do parents still have to sign in and out themselves or can staff track attendance? If they need to sign in/out, how do we accomplish this task?

The Child Care Manual does not require parents to sign the children in and out. The center is required to ensure the arrival and departure time is recorded for all staff and children. It is acceptable to eliminate parent involvement in this process and have the staff record this information.

89. Do book bags qualify as bins/bags for children's belongings?

Bookbags are acceptable as long as they are stored in a sanitary manner and are not in contact with another child's belongings.

90. How do centers decide which families may not return since the group size and social distancing requirements limit their capacity? Is priority being given to essential workers?

Group sizes do not necessarily limit capacity in large rooms where barriers can be used to separate groups. Contact OOL inspection staff about how to use the rooms effectively. There is no information indicating that essential workers should be given priority, but centers may have their own policy.

91. Do centers still need to ask if parents are essential workers?

No. All children and families may be served as of June 15.

92. How long are we anticipating these current guidelines to reopening to be in effect? If the Governor lifts the public health emergency will the guidelines be re-adjusted?

There are no timelines for the DCF Health and Safety Guidelines which are in effect until further notice.

93. *When conducting fire drills and emergency drills are there guidelines that need to be followed in order to maintain social distancing?

Fire drills shall be done within the assigned groups so as not to increase exposure. While DCF is not requiring lockdown drills at this time, centers may develop policies and procedures to ensure social distancing requirements are met if they choose to conduct a lockdown drill.

94. Can children use our indoor pool?

Please refer to the applicable provisions of the NJ Youth Camp Safety Act rules, as specified in N.J.A.C 8:25 and your local health department.

95. Is it permissible for custodians be present during operating hours?

Whenever possible, custodians should work outside of operating hours or when children are not present. However, if custodians need to enter the building or classroom for an imminent issue, they need to be screened appropriately upon entrance, just as staff are screened. If they cannot be screened, they cannot enter the building during operating hours.

96. Who should I contact if I have questions pertaining to licensed child care centers, the FAQ's or the DCF COVID-19 Health and Safety Requirements?

Contact the Office of Licensing at DCF.ChildCareLicensing@dcf.nj.gov with your contact information, including the city and county in which the program is located.

****The “*” denotes new or amended entry and underlined text denotes new or amended text.***