



Part 2: Universal Masking and COVID-19 Vaccine Requirement FAQs February 15, 2022



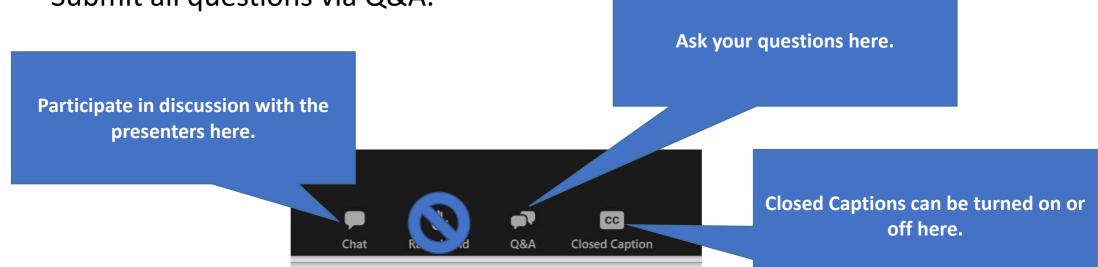






HOUSEKEEPING ITEMS

- All participants are in listen-only mode.
- Certificates of Attendance will be provided via chat and email.
- Closed Captioning is optional.
- Participate in discussion via chat.
- Submit all questions via Q&A.







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Presenters

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Which states in my region are a part of the injunction?

States included in the injunction are:

Alabama, Alaska, Arizona, Arkansas, Florida, Georgia, Indiana, Iowa, Kansas, Kentucky, Louisiana, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wyoming, and West Virginia

By Region:

- III WV
- IV AL, FL, GA, KY, MS, SC, TN
- V IN, OH
- VI AR, LA, OK, TX
- VII IA, KS, MO, NE (entire region)
- VIII MT, ND, SD, UT, WY
- IX AZ
- X AK





If my state is part of the injunction can my program still enforce vaccination and masking?

 Programs should consult their legal counsel if they are in states that ban masks or prohibit vaccine status as a condition of employment to understand the limitations and exceptions that may exist in each state's laws or policies.





How does the Office of Head Start (OHS) plan to make the vaccination and masking requirement a performance standard for some states and not others?

The Head Start Program Performance Standards (HSPPS) apply to all Head Start programs. Future developments in the litigation and the issuance of the final rule will determine if there are any additional changes to the new HSPPS on vaccines and masking that are in effect. In those states not enjoined, the federal government will continue to implement the Interim Final Rule with Comment Period (IFC).







Are children required to mask 100% of the time in classrooms? How should programs handle situations where kids take off their masks?

Children should never be disciplined for not wanting to wear a mask. Treat maskwearing as an emerging skill. Help children learn how to wear a mask consistently to be healthy and safe by showing them how to wear their mask so it fits securely over their mouth, nose, and chin. Help children find a mask that is comfortable and that they can keep on all the time. Give positive feedback to children for their efforts and keep it playful! Additionally, children would not be masked when eating, drinking, or napping. We encourage programs to review Face Masks in Head Start Programs.







Is it OK for children not to wear masks outdoors if close contact can be avoided?

• Yes, during periods of outdoor play and activity that do not involve close contact, children may be unmasked. In accordance with the U.S. Centers for Disease Control and Prevention's (CDC) <u>COVID-19 Guidance for Operating Early Care and Education/Child Care Programs</u>, adults who are not fully vaccinated must wear a mask outdoors in crowded settings or during activities that involve sustained close contact.

Notes to consider:

- The CDC defines *close contact* as being less than 6 feet away from other people for more than 15 minutes
- Children younger than 5 are not yet eligible for COVID-19 vaccination
- Even if there are periods of outdoor play that are unmasked, there would also very likely be periods of sustained close contact to care for and supervise young children, during which time children should be masked







Is OHS doing anything to help grant recipients access testing for staff? Does OHS have a recommendation for providing COVID-19 tests for children?

To improve access to COVID-19 testing for underserved communities and at-risk congregate settings, OHS has been working to inform grant recipients of <u>Operation Expanded Testing</u> (<u>OpET</u>), a COVID-19 testing program funded and administered by the CDC. OpET is a \$650 million program with a primary objective of supporting a safe learning environment for children. The OpET program supports schools, child care programs, and other congregate settings to access no-cost testing for program participants.

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Does the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule impact or prevent Head Start programs from asking about vaccination status?

 Per U.S. Department of Health and Human Services (HHS) guidance, the Privacy Rule does not prohibit any person from asking whether an individual has received a particular vaccine, including COVID-19 vaccines.

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 Find more guidance on the HHS HIPPA policy: https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/hipaa-covid-19-vaccination-workplace/index.html





Under the home-based program option, do parents fall under the vaccine requirement when families gather for group socialization? Should programs limit group socializations to only those parents who are fully vaccinated?

The IFC does not require that parents attending a home-based socialization be vaccinated, although an individual program policy may require it. However, the IFC requires universal masking for all individuals 2 years of age and over when Head Start services are being provided. Using multiple layers of mitigation strategies in addition to masking, such as physical distancing and ensuring well-ventilated space, remains critically important to protect the health and safety of staff, children, and families. Programs should continue to follow CDC guidance, monitor local health conditions, and work with their Health Services Advisory Committee (HSAC) to inform their decisions.

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How will OHS monitor the vaccine and masking requirements?

During the Focus Area Two monitoring review, the onsite team will review the recipient's process for documenting vaccination status and implementing the masking requirement. The grant recipient should have documentation of the total number of staff who are fully vaccinated and any who are exempt. The review team will select a random sample to verify the vaccination status of sampled staff (i.e., proof of vaccinations). The review team will also observe classrooms for consistent mask-wearing for adults and supportive environments encouraging children to wear masks.





Will programs receive a monitoring finding if children are having difficulty keeping face masks in place?

• During the onsite review, OHS will determine if programs have positive approaches to support children in wearing masks. Reviewers will look for teacher interactions that are supportive and encourage the use of masks, while also prohibiting discipline if children have difficulty wearing masks or are not wearing them correctly. OHS understands children may have a hard time keeping their face mask in place and will not issue findings if small numbers of children are not wearing mask.





Will OHS issue deficiencies for masking or vaccine requirements?

Compliance with the masking and vaccine requirements will most often be limited to areas of concern or areas of noncompliance. If a noncompliance is identified during a monitoring review and is not corrected within the required timeframe, an uncorrected area of noncompliance will result in a deficiency. Recipients should make every effort to correct any finding identified during reviews to ensure they are not elevated.







Will OHS issue a monitoring finding if the program has difficulty finding out the vaccine status of partners and others not employed by the Head Start program who provide services to enrolled children?

No. If partners or others not employed by the Head Start program do not provide the recipient with documentation of vaccination status, the program should provide the review team with the policy and procedures used to maintain a safe environment for children. These policies could include signs that require consistent and correct use of masks, as well as testing of partners or others not employed by Head Start who do not provide their vaccine documentation status. OHS encourages programs to review CDC's <u>COVID-19</u> guidance on Operating Early Care and <u>Education/Child Care Programs</u> in developing those policies and procedures.







What documentation of vaccine status or testing will OHS require during monitoring reviews?

The grant recipient should have a process and tracking system that includes the required proof of vaccination (e.g., vaccine cards), testing procedures, and if exempted, proof of testing or intent to test at least weekly. The grant recipient should maintain documentation on the total number of staff, how many are fully or partially vaccinated, and how many have exemptions.







According to the CDC, patients who have recovered from COVID-19 can continue to test positive for up to three months after illness onset. Should programs continue with at least weekly testing of an exempt staff who recently recovered from COVID?

The IFC requires programs to develop their own policy regarding the at least weekly testing requirement of exempt staff. Per the CDC, people who have recovered from COVID-19 can continue to have detectable SARS-CoV-2 RNA in upper respiratory specimens for up to three months after illness onset. OHS encourages programs to consult their Health Services Advisory (HSA) Committees for how to best develop policies that accommodate for scenarios as described above.







THANK YOU







