Phase Two Guidance  
Coronavirus 2019 (COVID-19) Guidance for Places of Worship

During Phase Two, the public, businesses, and community organizations will be expected to adopt new behaviors and rigorous safeguards to reduce risk for all. Places of worship serve a vital role in promoting the spiritual and mental health of their congregations. During Phase Two, places of worship can operate indoor services and activities with up to 100 people or up to 50% of their capacity, whichever is fewer, with strong safeguards and physical distancing. For additional information visit [coronavirus.dc.gov](http://coronavirus.dc.gov).

Please note that any individual experiencing symptoms of COVID-19, or recently exposed to someone diagnosed with COVID-19, must not work in or visit a place of worship due to the risk of exposing others. Symptoms of COVID-19 may include: fever (subjective or 100.4 degrees Fahrenheit), chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, or otherwise feeling unwell.

Phase Two General Information for Places of Worship

- Places of worship may operate with expanded capacity limits. **In no event shall attendance at any indoor service exceed fifty percent (50%) of the capacity of the facility or space where the service is occurring as set forth in its Certificate of Occupancy, or one hundred (100) persons, whichever is fewer.** Groups of persons attending together must not exceed ten (10) persons. Each group must be seated at least six (6) feet from each other group.
- They also apply to other indoor gatherings such as funerals, weddings, religious education classes, youth events, support groups and any other programming.
- Enforcement will not be applied to the numeric limits of phase two at outdoor religious services. All other guidance continues to apply.
- Places of worship are encouraged to continue providing virtual services as everyone is safer at home. **Participation limited to virtual worship services is especially recommended for older adults and people of all ages with chronic medical conditions who are at higher risk for severe illness from COVID-19.**

Everyday Prevention Measures

- Across all phases of reopening, clergy, staff, volunteers, and congregants must be educated and encouraged to practice the following:
  - **Stay at home if you feel unwell** or were recently exposed to someone with COVID-19
  - **Practice social distancing.** Stay at least 6 feet from other people when possible.
  - **You must wear a cloth face covering at all times when you leave your home.**
  - If you are unable to wear a cloth face covering, consider virtual services or maintain 6 feet of distance between you and others. Masks are not recommended for children under two.
  - Avoid shaking hands and other physical contact with people outside of your household.
  - Cover coughs and sneezes with a tissue or use the inside of the elbow. Used tissues must be thrown in the trash and hands washed.
  - Gloves must be worn only as indicated per routine facility responsibilities.
- **Perform frequent hand hygiene (with soap and water or alcohol-based hand rub).**
  - Key times to perform hand hygiene include:
    - Before and after using the toilet,
    - Before and after putting on, touching, or removing cloth face coverings,
    - Before and after handling any shared objects (i.e. books);
• After handling other people’s belongings,
• After blowing your nose, coughing, or sneezing, and
• After finishing services and departing.

Prevention Faith Community Leadership Considerations to Encourage Congregation, Clergy, and Staff Safety

• Leadership must post signage at the entrance to the facility stating that no one with a fever or symptoms of COVID-19 is permitted to enter and that individuals must wear a cloth face covering.
• Leadership shall post signs in highly visible locations (e.g., entrances, restrooms, gathering halls/community rooms) that promote everyday protective measures including use of face coverings, social distancing and hand hygiene.
• Hand sanitizer must be easily accessible at every entrance of the building.
• Supplies must be provided to allow for frequent hand hygiene (e.g., soap and water or alcohol-based hand sanitizers with at least 60% alcohol). Hand hygiene products must be accessible in staff and public areas.
• Staff and volunteers must be provided with appropriate personal protective equipment (e.g., masks, gloves) and cloth face coverings.
• All clergy and staff, including volunteers must be trained in COVID-19 safety actions. Consider conducting the training virtually, or, if in-person, ensure that social distancing is maintained.
• Require clergy, staff, volunteers and attendees to remain at least 6 feet apart from anyone not from their household.
• Be cognizant that traditional choir configurations pose an increased risk of COVID-19 transmission. Performances and practices are strongly discouraged in Phase Two.
• Services and gatherings must be held in a large, well-ventilated area or outdoors, as circumstances and faith traditions allow.
• A staff person shall be designated to be responsible for responding to COVID-19 concerns. Staff, clergy, volunteers, and congregants must know who this person is and how to contact them if they become sick or are around others diagnosed with COVID-19.
• If your faith community provides social services in the facility as part of its mission, refer to DC Health’s relevant guidance documents at coronavirus.dc.gov/healthguidance.
• If a nursery or childcare will be provided during services and events, refer to DC Health’s Guidance on Childcare Services at coronavirus.dc.gov/healthguidance.
• If holding summer day camps, refer to DC Health’s Guidance on Summer Camps at coronavirus.dc.gov/healthguidance.
• If possible, have a separate entrance and exit for the facility to allow one-way flow of congregants. Congregating at entrances or exits must be discouraged.
• Congregating in parking lots or outside the place of worship must be discouraged.
• Use visual cues to help prevent congregating.
• Provide physical guides, such as tape on floors and walkways and signs on walls, to encourage appropriate distancing.
• Seating arrangements must be reconfigured or marked to delineate physically distant seating in worship and gathering spaces.
• Develop staff and congregant movement flows to minimize face-to-face passings (e.g. “one-way routes” in hallways).
• Train and deploy social distancing ambassadors in high-traffic areas or at high-traffic times.
• Close off or limit access to areas where physical distancing cannot be practiced.

For more information specific to places of worship, see the Centers for Disease Control and Prevention(CDC)website: cdc.gov/coronavirus/2019-ncov/community/faith-based.html.

Avoid Close Contact and Reduce Touchpoints

• If possible, have a separate entrance and exit for the facility to allow one-way flow of congregants. Congregating at entrances or exits must be discouraged.
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• Train and deploy social distancing ambassadors in high-traffic areas or at high-traffic times.
• Close off or limit access to areas where physical distancing cannot be practiced.
• Places of worship must limit the sharing of frequently touched objects, such as worship aids, prayer rugs, prayer books, hymnals, religious texts, bulletins, and books. Encourage congregants to bring their own such items, or consider photocopying or projecting prayers, songs and texts using electronic means.

• Avoid traditions that may increase the risk of COVID-19 spread and prohibit the use of items that are passed or shared among congregants.

• Modify the methods used to receive financial contributions. Prohibit shared collection trays or baskets. Consider a stationary collection box, the mail, or electronic methods of collection of regular or one-time financial contributions.

• Discourage physical contact (e.g., shaking hands, hugging, or kissing) among members of the faith community who are not from the same household.

• If food is offered at any event, buffet or family-style meals must be avoided as the sharing of serving utensils is risky, and the more people in close contact with the food, the higher the risk. Consider pre-packaged options. Events must not exceed 50 participants, including staff.

Screening and Monitoring for Symptoms
• Places of worship must perform screening (e.g., symptom questionnaires) of staff and volunteers prior to them entering the premises, over the phone or in person.
  o For Screening Tool Guidance, visit coronavirus.dc.gov/healthguidance
• If staff or volunteers develop any symptoms of COVID-19 while in the building, there must be a plan in place for that individual to immediately isolate, notify someone, and leave the building.
• Close off areas used by the sick person and the area must not be used until after cleaning and disinfection.
• Places of worship must maintain a daily record of individuals who have been in the building for at least 30 days. This information will be needed if a case of COVID-19 occurs at your place of worship in order to assist with contact tracing.
  o Faith community leadership is responsible for ensuring there is a process in place to account for the names of every person who has been on the premises.

Clean and Disinfect
• The facility must develop a schedule of increased routine cleaning and disinfection. Consider that volunteer and staffing may need to increase to implement cleaning and safety protocols.
• Cleaning products must not be used near children, and staff must ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
• Items that are not easily cleaned, sanitized, or disinfected must not be used.
• High-traffic areas and frequently touched surfaces (e.g., doors, railings, seats, restrooms, etc.), must be cleaned and disinfected at least daily. Any shared objects must be cleaned in between uses.
• If the faith community offers multiple services, schedule with enough time in between to allow time for cleaning and disinfecting high-touch surfaces between services.
• For more information on cleaning and disinfecting buildings and disinfectants that are effective against the virus that causes COVID-19, see the CDC website cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html.

Building Considerations
• If the building was closed for an extended period of time, remember to check HVAC systems and ensure all water systems are safe to use. For more information, see CDC’s Guidance for Reopening Buildings after Prolonged Shutdown or Reduced Operation: cdc.gov/coronavirus/2019-ncov/php/building-water-system.html.
• Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, etc. Do not open windows and doors if they pose a safety risk to those using the facility.

Establish a Plan for COVID-19 Exposure

• Places of worship must establish a plan in the event that a staff member, volunteer or congregant is diagnosed with COVID-19.

• A point of contact at the facility must be identified who a staff member or volunteer can notify if they test positive for COVID-19 and choose to disclose this information.

• If a staff member or volunteer chooses to report to the facility that they are positive for COVID-19, the facility must have a notification process to share the following with staff, volunteers, and the congregation. Notifications must be done in conjunction with DC Health.
  o Education about COVID-19, including the signs and symptoms of COVID-19,
  o Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at coronavirus.dc.gov,
  o Information on options for COVID-19 testing in the District of Columbus, available at coronavirus.dc.gov/testing

• Places of worship must notify DC Health when:
  o a staff member or volunteer notifies the facility they tested positive for COVID-19 (not before results come back)
  AND
  o the staff member or volunteer interacts frequently with congregants
  OR
  o if a congregant notifies the facility they tested positive for COVID-19

• Notify DC Health by submitting an online form on the DC Health COVID-19 Reporting Requirements website dchealth.dc.gov/page/covid-19-reporting-requirements:
  o Submit a Non-Healthcare Facility COVID-19 Consult Form.

• An investigator from DC Health will follow-up within 24 hours to all appropriately submitted inquiries.

The guidelines above will continue to be updated as the outbreak evolves. Please visit coronavirus.dc.gov regularly for the most current information.