Reopening: Guidance for Worship Services and Religious Gatherings

Overview
A house or place of worship is any building or other place where people gather and perform activities associated with a religion. Places of worship can include churches, temples, monasteries, synagogues, mosques, and similar places of worship. The reopening of houses or places of worship during the continuing threat of the novel coronavirus should not be interpreted as lessening of the threat of the virus. Failure to adhere to appropriate safeguards, including local, state and federal guidance during such services, could result in the continued spread of the virus. Some urban religious facilities are residence to viral and antibody testing of undocumented and indigent people for the novel coronavirus, SARS CoV-2 virus.

This document focuses on those houses of worship where people gather for religious services, rather than religious services found in the home. Other activities associated with religious organizations can include schooling, temporary sheltering and/or feeding for the needy, business meetings, conferences, retreats, and other social gatherings for cultural and sporting activities. Many of these same recommendations provided in this document can apply to these extended venues.

Even though most states have religious exemptions regarding social gathering guidelines issued on the COVID-19 pandemic, most houses of worship in the U.S. have been shuttered since mid-March to combat the spread of COVID-19, the disease caused by SARS CoV-2.

There are opportunities for houses of worship to follow established CDC and OSHA guidelines to protect staff, volunteers, guests and visitors. Administrative and, where possible, engineering controls should be applied with suggested periodicity for weekly or daily services, as well as for special events like weddings, funerals, holiday events, and other social gatherings for parents and children. This guide helps address some of the pressing questions houses of worship may have, including:

- How can we protect the congregation, staff, volunteers, guests and their children from exposure to the virus?
- Can live streaming or outdoor services be used for services weddings, funerals, gatherings and religious study?
- How can we minimize the risk of disease transmission without contact tracing of positive COVID-19 individuals?
- What do we do if someone is visibly sick or not following CDC guidelines?
- How do we deal with cleaning and sanitizing contact surfaces used in religious ceremonies?
- Can the choir be physically separated from the congregation, or should we use pre-recorded music?
- How do we manage comingling and shared facilities of indoor spaces with different religious orders?

At this time, it is unknown if houses of worship will be sparsely populated after stay-at-home restrictions are lifted, or if they will be flooded with the congregation returning to worship and participate in other religious social gatherings. This document offers practical guidance for religious organizations to implement interim measures to reduce the risk of transmitting the SARS CoV-2 virus or acquiring the COVID-19 disease. It addresses key questions, and provides tips for the religious leaders, congregation members, guests and volunteers to support the institution.
What should employers, religious organizations, and leaders of places of worship do to protect themselves and their congregation, guests, and visitors?

Measures can be taken to reduce the risk of transmitting the SARS CoV-2 virus from touching surfaces or transmitting it from person-to-person by respiratory droplets from coughing or sneezing, or by small aerosols (microfine viral particles in air) from close contact during normal conversation, singing or prayer. Clear communication and utilization of social, print and digital media can be used help educate the congregation on the appropriate control measures to protect their health.

Employers, religious organizations, and leaders of places of worship should continually monitor international (World Health Organization - WHO), federal (CDC), state, and local guidelines for updates and changes in recommendations, cleaning and disinfecting strategies, and other best management practices. They also should seek guidance from regional, national, and international leaders, relative to health policy and best practices, as well as consider forming a team of professionals to monitor, assess, and implement new strategies, as they become available. In addition, employers, religious organizations, and leaders of places of worship should consider the following strategies for reducing the risk of COVID-19 transmission in regards to physical distancing, increased ventilation and air filtration, enhanced cleaning practices, restrooms, religious study in classrooms, food preparation, communal contact surfaces, spiritual offerings, personal hygiene, employee wellness, respirator and facial mask usage, personal protective equipment, training, waste and laundering, and risk communication. Due to the wide variety of religions and houses of worship, functions, and sizes, it may not be possible for organizations to implement all of the following; however, trying to tackle the problem from multiple angles and with multiple layers can help reduce health risks. Employers, religious organizations, and leaders of houses of worship should support COVID-19 prevention activities, procedures, and education.

**Physical Distancing**

- Encourage the use of live streaming of religious services or conduct the religious services outdoors.
- Use social media, text, emails, announcements during services, and other forms of communication (signage/email/text lists) to discuss steps being taken for the protection of the congregation members, staff, volunteers and guests.
- Mark distances, using tape/markers/paint/signage, of six (6) feet for pews, benches, rugs, mats, floors, altars, and other places that interface with the congregation. Seating or locations for prayer in houses of worship should be arranged in such a way as to maintain appropriate physical distancing (e.g., leave every other row of pews empty).
- A “party” should be understood to include only members of a household who live together and therefore can be seated together, but they should maintain a distance of 6 feet from other parties. For example, odd and even spaces could be left in each row so that nobody sits/stands directly behind the other person.
- Train religious leaders, staff, volunteers, and guests on physical distancing while entering or leaving a house of worship.
  - Make this a key point while addressing the congregation in news print and verbally “Hello, thank you for coming in, we will be keeping a physical distance of 6 feet for your health”.
  - Shaking hands or exchanging public displays of affection with each other should be strongly discouraged.
• Gatherings in groups outside or inside places of worship should be discouraged, except for groups that already live together.
• If you need to cough, sneeze, or clear your throat, use a handkerchief, scarf, elbow or inside shirt beforehand.
• Encourage anyone who doesn’t feel well, or who lives with someone who is not feeling well, to exit the premises.
• Limit the number of attendees for any large worship service or gathering. Consider using call/text-ahead program to announce limits on the family unit/group size.
• Funeral services held in funeral homes may be acceptable, so long as services comply with physical distance guidelines. Receiving lines should not be permitted. Attendance at receptions, meal functions, or other gathering should be limited so as to comply with physical distancing guidelines.
• Wedding services held in venues other than in houses of worship may be acceptable so long as such services comply with physical distancing guidelines. Receiving lines are not recommended. Receptions, meal functions, or gatherings before or after the service should limit attendance.
• Where appropriate, the use of overflow rooms and drive-in services can be effective for proper physical distancing.
• Passing of a common collection basket, or any other items, between multiple parties should be discouraged.
• Sacred books, hymnals, missals, etc. can remain in the house of worship for the general use, however, they will need to be disinfected after use. To reduce cleaning time between services, the congregation can bring their own personal sacred books to service, which would then be taken home after each service. Alternatively, provide individual, disposable printed copies of specific weekly passages.
• Holy water fonts (or stoups) at the entrance or exit to a church should be removed from service, since these are commonly touched surfaces.
• If worshipers wish to receive a spiritual offering or prayer, follow an established traffic pattern in one direction to/from their seat while maintaining physical distancing. Touching of any surfaces should be discouraged.
• Religious services that distribute communion are highly encouraged to adhere to additional precautions, including:
  – Faith traditions that allow for the use of individual pre-packaged communion elements are encouraged to do so.
  – Use of a common communion cup shared between parties should not be permitted.
  – Eucharistic ministers and other lay people providing communion must first thoroughly wash and sanitize his/her hands.
  – Practice physical distancing for persons receiving communion.
  – Releasing one row at a time for communion will prevent long lines from forming, thereby compromising physical distancing.
• Children present at worship services should remain with their parents or guardians and refrain from congregating or interacting with children of other parties while on the premises. For example, nursery services should not be permitted.
• Recommend use of pre-recorded music/singing only, and discourage congregation members from singing out loud to avoid infection of choir members and congregants seated nearby. **NOTE: Some microscopic aerosols can be transmitted up to 25 feet from the source, depending on the amount of ventilation inside the built environment.**
• Close off all confessionals, and instead, consider providing virtual or telephonic sessions and/or open room confessions.
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DISCLAIMER: These are meant to be general guidelines to help you re-open your establishment. Always follow local, state and federal laws and guidelines.

- Limit the number of persons attending business meetings, retreats, conferences, or visiting the house of worship while maintaining physical distance. Consider virtual meetings.
- Wash religious garments and linens after each service or other scheduled event, using the highest water temperature setting possible for the garments.
- Use staff or volunteers to hold open doors to the house of worship, so that those attending are not touching common door handles.
- Take steps to dismiss the congregation in an orderly fashion and pace the departure at the end of the service so as to prevent the interaction between parties as distances less than 6 feet.
- Use of perfumes and colognes should be discouraged to prevent sneezing and coughing by those sensitive during a religious service.

Ventilation
- Provide natural ventilation, by opening windows and doors whenever possible, to increase air flow. If windows and doors cannot remain open due to adverse weather conditions, provide good indoor air quality by:
  - Turning on the heating, ventilating, and air-conditioning (HVAC) system to maintain thermal comfort, and increasing fresh air to the system. Adjust the system to introduce as much outside air as possible (ideally 100%), and minimize recirculation of “old” air.
  - Maintaining indoor relative humidity humidity levels at between 40 and 60%.
  - Ensuring that restrooms are properly exhausted outdoors and under negative pressure.
  - If you need assistance on HVAC issues, seek out an HVAC professional and see ASHRAE updates for more information. AIHA Industrial hygienists are also well versed in general dilution and exhaust ventilation issues.
- Consider using portable high-efficiency particulate air (HEPA) filtration units to help reduce localized aerosol concentrations.
- If fans, such as pedestal fans or ceiling mounted fans, are used inside the building, take steps to minimize the air velocity and avoid having the airflow blowing from one person directly toward any other individuals. If fans are disabled or removed, those responsible for facility staff should remain aware of, and take steps to prevent, heat-related hazards.

(NOTE: Contact an occupational health and safety professional or ventilation specialist for advice on how to best utilize ventilation systems).

Enhanced Cleaning Practices
- Select appropriate disinfectants – consider cleaning effectiveness and chemical safety.
  - The U.S. Environmental Protection Agency (EPA) has developed a list (List N) of registered disinfectant products for use the SARS-CoV-2 virus.
  - Do not mix different EPA registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing sodium hypochlorite (bleach) or hydrogen peroxide.
  - Review product labels and Safety Data Sheets (SDSs) and follow manufacturer specifications for application and contact (dwell) times.
  - Consider consulting an Industrial Hygiene expert if additional advice is needed. AIHA has a list of qualified Industrial Hygiene consultants.
- Establish a disinfection routine
  - Seating, doors, restrooms, common areas, etc. should be disinfected between services or other public gatherings.
  - Do not use a wet rag approach or reuse rags. Use disposable products instead.
- Use disposable paper towels or other artifacts to wipe surfaces clean. Allow hard surfaces to air dry, rather than wiping dry.
- Ensure disinfection protocols follow product instructions for application and contact time.
- All contact surfaces used in any religious ceremony, including reuse of sacred books, should be disinfected after each use.
- Consider cleaning any HVAC return air grilles after a religious service function.
- Consider using a checklist or audit system to track how often cleaning is conducted, and by whom.
- Non-porous surfaces, such as floors, benches, altars, and other contact surfaces, should be visibly clean.
- Consider marking seating as “clean” or “disinfected” or place some form of color-coding tape or label.
- Tell the congregation of the best work practices that are being followed to reduce the risk of exposure.
- Prop open the door with a trash can if the door cannot be opened without touching the handle.
- For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
- Place signs above toilet lids (if present) to indicate that they should closed before flushing.
- Place signs asking those using the restroom to wash their hands before and after using the restroom.
- Place signs to discourage large groups from congregating around or in restrooms.
- Provide disposable paper towels in restrooms and disconnect or tape-off hand air dryers.
- Double efforts to keep bathrooms clean and properly disinfected. Maintain a record of sanitary work practices.

Personal Hygiene
- Establish a “before- and after-service” hand washing or sanitizing practice for all religious staff members and volunteers.
- Provide hand sanitizer or hand washing stations at the entrance and exit to the building, each classroom, and any other rooms where persons may gather.

Employee Wellness
- Conduct employee temperature screening and wellness checks before each religious service or classroom study.
  - Temperature screening can include manual (using non-contact infrared thermometers) or thermal camera methods.
  - Employees can self-check temperature, while wearing a glove.
  - There are a number of examples available for wellness questionnaires (see Resources below).
• If and employee is sick, or receives any kind of testing results (virus or antibody), that information should be reported to the employer and timing/decision to go back to work should only be with a doctor’s approval.
• Employees should indicate if they have taken an analgesic prior to taking their body temperature. Such Over-the-Counter (OTC) medications can result in a false negative and mask clinical symptoms of potential exposure.

Other Control Measures
• Although not necessary, if hand-washing protocols are rigorously followed, consider providing disposable gloves to staff, especially when cleaning and sanitizing the building, removing waste materials, and cleaning the restrooms.
  – If gloves are worn, they must be changed regularly and they are not a substitution for hand-washing.
  – Remove or replace any gloves that are torn or damaged. Users should check their gloves frequently for any damage.
• Ensure that all contractors working inside a building use universal precautions, personal protective equipment, and other established procedures. Anyone who is unwilling to follow the established protocol should be asked to leave.
• Depending on local requirements, for those who cannot maintain physical distancing, provide or encourage all employees to wear face coverings and gloves and regularly use hand sanitizer. (NOTE: Surgical masks and homemade face coverings are designed primarily to capture and contain aerosols generated while you breathe and speak, in order to protect others, not yourself).
• Plan for staff absences by developing flexible attendance and sick-leave policies, plan for alternative coverage, and monitor and track COVID-19 related staff absences.
• Stay informed about local COVID-19 information and updates in your geographic area.
• Facility rental programs should be suspended if they cannot adhere to gathering restrictions and physical distancing.

Training
• Staff and volunteers should be given information and training about physical distancing, processes, and hygiene practices.
• Provide instruction and training to all employees and volunteers on:
  – Recognizing and understanding the symptoms of SARS CoV-2 exposure.
  – Properly putting on and removing respirators, surgical masks, and/or gloves.
  – Cleaning and disinfecting surfaces according to product specifications.
  – Reporting any unsafe or unhealthful working conditions to religious leaders.
  – Getting formal training on OSHA’s global hazard communication standard relative to chemicals used for cleaning.
  – Controlling and staggering entry and exit from a house of worship or other scheduled venue.
• Provide SDS’ for cleaning chemicals and ensure employees are aware of the hazards of use.
• If advice is needed, industrial hygienists have expertise in selecting Personal Protective Equipment (PPE) and providing necessary training.
• Store any commercial or industrial chemicals in an appropriate location and by hazard chemical classification.

Waste and Laundering
• Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.
• Any reusable cloth materials can be washed with detergent and dried on the highest temperature setting for the fabric.

• Ensure all commercial laundry services are aware of the potential for SARS CoV-2 viral exposure before laundering.

Communication

• Communicate to the congregation members, volunteers, and guests what is being done to mitigate the spread of COVID-19 (e.g., disinfection routine, health policies for staff, physical distancing, and health and safety measures in-place).

• Consider communicating the visible symptoms of COVID-19 exposure and learning about people in the congregation who may be at high risk of transmitting the virus (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being an essential worker in a high-risk category, etc.).

• Understand that religious organizations have the right to refuse any religious service and ask the person to leave if anyone is exhibiting symptoms of illness or does not following established guidelines (e.g., physical distancing, hand sanitizing).

• Platforms for verbal/written communication can include an oral reminder before services begin and the use of social media, websites, and posting of information on indoor/outdoor signs.

• Communicate with the congregation if scheduled events and religious services are changed, postponed, or cancelled.

• Congregants should be frequently reminded to clean their hands upon entry and exit.

What should Staff do to protect themselves and guests

• Contantly evaluate your own health. If you are sick, stay home. If you have a temperature, stay home.

If someone at home is sick, or if you came into contact with someone who is sick or recently became sick, stay home. If you have allergies or an underlying medical condition (e.g., diabetes) that puts you at additional risk, stay home. NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.

• Report your symptoms by telephone, text, or email to those persons in-charge or part of the religious organization. Do not go to any house of worship or classroom to verbally discuss this matter in-person.

• Wear a face covering when out in public and maintain physical distancing inside and outside the building.

• Wash your hands when you arrive, after each religious service or completed work task, after touching your face covering, and when you leave the building at the end of the ceremony or workday. Avoid touching you eyes, nose, or mouth with your unwashed hands.

• Understand how to properly use any PPE that is issued to you. There are procedures for donning and doffing a respirator or face mask.

• Let your employer know if you have any concerns about wearing any PPE provided to you.

• Report any adverse effects from wearing a respirator or face mask. Don’t remove the respirator or face mask while inside the building or classroom, even if you are in physical distress. Notify the religious leaders if you have a medical condition (e.g., cardiovascular, pulmonary, etc.) that would preclude you from wearing a respirator or a face mask.

NOTE: If an employer chooses to provide an N95 respirator, please fully consider all the potential OSHA requirements, including 29 CFR 1910.134.

• Carry a towel. If you get the urge to sneeze or cough, cover your nose and mouth to help mini-
mize or prevent the spread of droplets or aerosol transmission.

- If symptoms persist, leave immediately. Wash your hands and face thoroughly before going back to work or reentering the house of worship or classroom.

- Staff should wear appropriate PPE if they are unable to maintain 6-feet of separation from congregants.

What can a Congregation do to minimize the transmission of COVID-19

- Encourage those who are sick or at risk to stay home. This includes:
  - The elderly.
  - People with certain underlying medical conditions (e.g., diabetes).
  - Family members who live with elderly people or those who are at risk.
  - People who have access to those at risk in nursing institutions, prisons, or other confined work environments.
  - People who have upper respiratory or flu-like symptoms.
  - People who live with someone with upper respiratory or flu-like symptoms.
  - People with COVID-19 or live with someone with COVID-19.
  - People who have been exposed to someone with COVID-19 within the past 14 days.

- Use PPE and other precautions when administering to the indigent population of worshipers.

- Attend live stream or remote religious services, or conduct services outdoors to further reduce the risk of exposure.

- Limit the number of items touched while inside a building or classroom.

- Wear a face covering from the time you enter the house of worship, gathering or classroom, until you leave.

- Wash your hands before and after you leave the facility, if possible. If not, use hand sanitizer before entering and before you leave the building, gathering or classroom.

- Maintain at least 6-feet distance from members of the congregation, religious staff, and volunteers when walking in or out of the building, gathering or classroom.

- If you get the urge to sneeze or cough, cover your nose and mouth. Use a scarf, handkerchief, or inside a shirt. In the event you can delay a sneeze or cough, leave the building. Wash your hands and face thoroughly before returning.

Resources

- CDC Interim Guidance for Administrators and Leaders of Community- and Faith-Based Organizations to Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19)

- CDC Checklist for Community and Faith Leaders

- Numerous wellness questionnaire examples are available online (e.g., https://doh.sd.gov/documents/COVID19/BusinessScreening_Q&A.pdf)

- The EPA has developed a list of disinfectants for use against SARS-CoV-2

- ASHRAE has a list of COVID resources for commercial buildings

- AIHA’s Indoor Environmental Quality Committee developed this guidance documents about reopening after closures due to COVID-19

- AIHA’s Indoor Environmental Quality Committee developed this guidance documents about cleaning buildings before reopening after closures due to COVID-19
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About Occupational Health and Safety Professionals

Occupational health and safety (OHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, and controlling workplace conditions that may cause workers’ injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OHS professionals make sure workplaces are healthy and safe.

Get additional resources at AIHA's Coronavirus Outbreak Resource Center.

Find a qualified industrial hygiene and OEHS professionals near you in our Consultants Listing.

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These guidance documents were primarily developed for those smaller business that don’t have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders. These documents are subject to revision and shall be updated accordingly.

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