

Industry Guidance for Safely Reopening: Faith-Based Communities, Places of Worship, Weddings, and Funerals

PHASE 3 | UPDATED AUGUST 12, 2020

Faith-based communities, places of worship, funeral homes, and other venues that offer gathering space for weddings, funerals, and planned services such as worship, rituals, prayer meetings, scripture studies, must develop and implement a COVID-19 Preparedness Plan as required by executive orders issued by Governor Tim Walz under the Peacetime Emergency. Unless clearly indicated that an action included in the guidance below is *recommended*, the action should be understood as *required*. In instances where the guidance uses language “to the extent possible,” the action is required but only to the extent it is possible for the faith-based community to implement the requirement.

- ✓ Faith-based organizations must address all the guidance requirements applicable to their operations in their COVID-19 Preparedness Plans and as set out in each of the components below.
- ✓ The Plan must be evaluated, monitored, executed, and updated under the supervision of a designated Plan Administrator within your organization or leadership structure (including a “church” as that term is used in the Internal Revenue Code).
- ✓ The Plan must be posted on site in an easily accessible location (or distributed to staff electronically) to allow for the Plan to be readily reviewed by all staff, as required.

Large gatherings continue to present a risk for increasing the spread of COVID-19. All faith communities are encouraged to provide remote services and have the right to choose not to open for in-person services or host large gatherings.

Staff and worker protection and protocols

For the purposes of this guidance, “staff” includes all faith leaders, staff, employees, and volunteers associated with the faith-based community, including those responsible for using the facility for support groups or other activities. Contractors, subcontractors, vendors, delivery personnel, seasonal, part-time

or temporary staff, however categorized, who are present in the building or organization as a condition to their employment or volunteer work are to be included as staff, and are required to be covered the COVID-19 Preparedness Plan.

ENSURE SICK STAFF STAY HOME

Requirements

1. Establish health screening protocols for workers at the start of each shift (e.g., health screening survey, taking temperature). A health screening must be conducted for each staff upon arrival and check-in at work. See the Minnesota Department of Health (MDH)'s [Visitor and Employee Health Screening Checklist \(www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf). The checklist is also available in Hmong, Somali, and Spanish on the [Businesses and Employers: COVID-19 web page \(www.health.state.mn.us/diseases/coronavirus/businesses.html\)](http://www.health.state.mn.us/diseases/coronavirus/businesses.html).
2. Staff must be stopped from entering the workplace if their health screening indicates they are experiencing symptoms of COVID-19 or have tested positive for COVID-19, and they should be sent home immediately. If staff begin experiencing symptoms of COVID-19 while at work, they must also be sent home immediately. If they cannot be sent home immediately, they must be isolated in a closed room or remote area of the facility until they can be sent home.
 - Symptoms of COVID-19 can include fever, cough, shortness of breath, chills, headache, muscle pain, sore throat, or loss of taste or smell. Other less common symptoms include gastrointestinal symptoms like nausea, vomiting, or diarrhea.
 - See the MDH guidance on [What to do if you have COVID-19 \(www.health.state.mn.us/diseases/coronavirus/case.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/case.pdf).
 - See the MDH guidance on [What to do if an employee has COVID-19 \(www.health.state.mn.us/diseases/coronavirus/sickemployee.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/sickemployee.pdf).
3. Establish a protocol for staff to report, whether at home or at work, when they are experiencing COVID-19 symptoms, have tested positive for COVID-19, or have been in close contact with a person with symptoms or who has tested positive for COVID-19. Also establish a return-to-work protocol for staff who are required to isolate or quarantine, following MDH guidance on [COVID-19 and When to Return to Work \(www.health.state.mn.us/diseases/coronavirus/returntowork.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/returntowork.pdf).
 - Staff who are experiencing symptoms or have tested positive for COVID-19, or have been in close contact with a person with symptoms or who has tested positive for COVID-19, must be instructed not to come to work until their isolation or quarantine period is completed.
4. Establish a protocol for identifying and communicating with staff who may have been exposed to a person with COVID-19 symptoms or who has tested positive for COVID-19 while at work. See Centers for Disease Control and Prevention (CDC) [General Business Frequently Asked Questions \(www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html\)](http://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html), and [CDC Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 \(COVID-19\), May 2020 \(www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html\)](http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html).
 - If a staff person is confirmed to have COVID-19, the protocol must include informing the organization's other staff who have been in close contact with the infected person, as well as

their respective employers (where applicable), of the possible exposure to COVID-19 while at work. A person must be designated to gather information from staff who may be sick with COVID-19 and to engage in needed communications, while ensuring the privacy of infected staff is maintained in accordance with [Equal Employment Opportunity Commission \(EEOC\) Transcript of March 21, 2020 Outreach Webinar \(www.eeoc.gov/transcript-march-27-2020-outreach-webinar\)](https://www.eeoc.gov/transcript-march-27-2020-outreach-webinar).

5. Establish protocols for staff to return to work, and follow MDH guidance at [COVID-19 and When to Return to Work \(www.health.state.mn.us/diseases/coronavirus/returntowork.pdf\)](https://www.health.state.mn.us/diseases/coronavirus/returntowork.pdf).
6. Provide accommodations for staff at higher risk or who are more vulnerable to severe illness if they are exposed to or contract COVID-19. See CDC's [Guidance for People Who are at Higher Risk for Severe Illness \(www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html\)](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html).

Vulnerable staff should be encouraged to self-identify, and employers should avoid making unnecessary medical inquiries. Employers should take particular care to reduce these workers' risk of exposure.

7. Evaluate and adjust sick leave policies to reflect the need for isolation and incentivize staff who are sick to stay home. Clearly communicate sick leave policies to all staff.

SOCIAL DISTANCING – STAFF MUST BE AT LEAST 6 FEET APART

Requirements

1. Maximize remote working. Staff who are able to work from home must work from home.
2. Hold virtual or online meetings, when possible.
3. Ensure physical distancing of 6 feet is maintained in all work areas, including at workstations, shared offices break rooms, meeting rooms, etc.
 - Provide for 6 feet of physical distancing in work areas, storage areas, break areas, meeting areas, copy-rooms, parking areas, etc.
 - Evaluate traffic patterns, congestion areas, “bottle-necks”, and “choke points” to reduce crowding at entrances, reception areas, information counters, in hallways, elevators, waiting areas, staging areas, locker-room and changing areas, doorways, corridors, janitor's closets, sink-rooms, transport areas, time-clock areas, etc.
 - Designate one-way entrances and exits that facilitate 6-foot distancing.
 - If time clocks are in use, consider alternatives such as phone-based apps, web-based apps, or cameras to clock workers in and out.
 - Avoid having workers facing each other at work-stations whenever possible.
 - Limit collective gatherings of workers to numbers that allow for social distancing to be maintained, including during collective gatherings for training, meetings, and breaks.

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- Ensure social queuing is established to provide and promote social distancing between multiple workers, staff, participants, and visitors congregating and waiting to use facilities (e.g. restrooms, handwashing, copy machines, vending).
 - **Roving workers:** Ensure social distancing is maintained while staff are engaged in “roving” activities (e.g., janitorial, security, service, stocking). Where activities must be performed while community members or visitors are present, staff must ensure social distancing is maintained (e.g., working in less congested areas, low-peak periods, using stanchions, placement of carts).
 - **Custodial/janitorial:** Refer to additional guidance specific for “Janitorial and Custodial Services” for workers performing janitorial, custodial, housekeeping, and other cleaning and maintenance services.
4. Limit the number of people in restrooms, break areas, and cafeterias to allow for social distancing. Create and designate additional break areas (including outside, when practical) for breaks and meals. Revise break times to prevent congregating in cafeterias and breakrooms. Spread out or remove tables and chairs in break areas so they are at least 6 feet apart and install barriers where necessary.
 5. Implement static assignment or “cohorting” of work crews to the extent possible. For example, Julie, Abdi, and Bob always work together and are assigned to the same location or work area every day, rather than reporting to different locations or work areas throughout the week or being reassigned with different workers.
 6. Incorporate barriers, partitions, screens, or curtains to maintain barrier protection between staff to the extent possible, where the required distancing cannot be maintained. The use of barriers/partitions must be used in addition to social distancing and not used in replacement of social distancing.

Recommendations

1. Stagger shifts and breaks; Extend work-hours and implement flexible scheduling to reduce number of staff in the same place at the same time.
2. Consider staggered work-schedules or adapt workspace assignments to promote social distancing (e.g., assign cube space diagonally positioned from one another rather than directly adjacent or across from each other).
3. Use arrows and other signage to mark one-way traffic flow at access points, in hallways, stairways, corridors, and areas where staff may usually congregate or wait.
4. Mark access points and possible areas of congestion to provide for social distancing of at least 6 feet with floor markers or lane lines.

STAFF HYGIENE AND SOURCE CONTROLS

Requirements

1. **Ensure staff regularly wash their hands.** Instruct workers to regularly wash and/or sanitize their hands, in particular when entering and exiting the premises, before and after eating or drinking, using tobacco products, using restroom facilities, and using devices, tools, and equipment used by

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other staff or visitors. Instruct workers to avoid touching their face with unwashed or unsanitized hands.

- Post handwashing and “cover your cough” signs. See [MDH’s Cover Your Cough posters \(www.health.state.mn.us/people/cyc/index.html\)](http://www.health.state.mn.us/people/cyc/index.html) and [MDH’s Hand Washing posters \(www.health.state.mn.us/people/handhygiene/materials.html\)](http://www.health.state.mn.us/people/handhygiene/materials.html).
2. Ensure handwashing and/or hand-sanitizer facilities are readily available and allow staff sufficient time to engage in handwashing/sanitizing.
 3. Ensure supplies in restrooms, portable toilets, and handwashing/sanitizing stations are regularly monitored and continually stocked.
 4. Provide tissues or towels for proper cough and sneeze etiquette and provide no-touch trash bins.
 5. Require that all staff wear face coverings when in an indoor setting, and in outdoor settings where 6 feet of distance from others is not easily maintained. As of July 25, 2020, people in Minnesota are required to wear a face covering in all indoor businesses and public indoor spaces, per Executive Order 20-81. Additionally, the Executive Order requires staff to wear a face covering when working outdoors in situations where social distancing cannot be maintained. This Executive Order also requires workers, customers, or visitors to wear a face covering when a business has opted impose stricter face covering requirements than the Executive Order or when the applicable industry guidance requires wearing a face covering.

The Executive Order includes exemptions for people who are unable to wear or tolerate a face covering due to medical or mental health conditions or other reasons. There are also situations in which a face covering may be temporarily removed, such as when eating or drinking, provided that social distancing is maintained between members of different parties. Businesses and venues may choose to have more protective requirements than those in the Executive Order. For more information, see [Masks and face coverings \(www.health.state.mn.us/diseases/coronavirus/prevention.html#masks\)](http://www.health.state.mn.us/diseases/coronavirus/prevention.html#masks). You can also visit these webpages: [Face Covering Requirements and Recommendations under Executive Order 20-81 \(www.health.state.mn.us/diseases/coronavirus/facecover.html\)](http://www.health.state.mn.us/diseases/coronavirus/facecover.html) and [Frequently Asked Questions About the Requirements to Wear Face Coverings \(www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html\)](http://www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html)

- Workers should maintain an adequate number of face coverings during their shift to change face-coverings as they become saturated, dirty, or compromised.
- Launder reusable face coverings before each daily use according to CDC guidelines at [Use of Masks to Help Slow the Spread of COVID-19 \(www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html\)](http://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html).
- In instances where face coverings cannot be worn (such as in hot kitchens), face shields that wrap around the face and extend below the chin may be used in place of cloth face coverings.
- When employees leave the hot kitchen area, they can replace the face shield with a cloth face covering. Face coverings and shields must be maintained and clean.

6. Provide protective supplies when required, including non-medical source-control face coverings, gloves, disinfectant, guards and shields to protect staff against the transmission of COVID-19 while they are working.
7. Do not discriminate or retaliate in any way against any staff for wearing face coverings or personal protective equipment, in accordance with Executive Order 20-54.
8. Doors to multi-stall restrooms should be able to be opened and closed without touching the handles, opening-devices, or powered door-operators with the hand, whenever possible. If the door cannot be opened without touching the handle or door-operator, place trash-receptacle by the door to ensure a paper towel can be readily disposed of when operating the door. The location and positioning of waste-receptacles should not interfere with Life Safety requirements (e.g., egress, evacuation, emergency equipment) or any reasonable accommodations provided under the Americans with Disabilities Act.
9. Community drinking stations and water-fountains should not be available/used. Touchless water-filling stations may still be provided.

Recommendations

1. Do not share food or serve communal meals among staff.
2. Launder reusable face coverings before each daily use.

Building and ventilation protocols

Requirements

General building conditions: Buildings must be assessed to determine the status and capacities of the utility-systems within the building (e.g., ventilation, water-supply, sewer, gas), as well as potential issues associated with vermin, molds, and mildew, prior to putting the building into an operational status.

1. Follow established protocols for starting mechanical, electrical, plumbing, life-safety, and other systems after non-use.
2. Assess the building for indications of pest and vermin infestation, and consult a pest-control professional as appropriate.
3. See CDC's [Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation \(www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html\)](https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html).
4. Windows, fans, and air conditioning: CDC recommends working with facility management to determine how often to change air filters and to improve ventilation and exchanges for air from outside to the extent possible.

Day-to-day operations: Once systems are in a safe operational status, ensure the following practices and protocols are maintained:

1. Continuously maximize fresh-air into the work and communal spaces. Eliminate air recirculation.

2. Minimize air-flow from blowing across people.

Recommendations (if applicable to your situation and to the extent possible)

1. Supplement ventilation system with the use of portable HEPA filter units.
2. Keep systems running longer hours (24/7 if possible) to enhance the ability to filter contaminants out of the air.
3. Maintain relative humidity levels of RH 40-60%.
4. Add a flush cycle to the controls of the HVAC system, and run HVAC systems for 2-hours before and after occupancy if your system allows for this.
5. Check and rebalance the HVAC system to provide negative air-pressure whenever possible.
6. Consult an HVAC professional or the American Society of Heating, Refrigerating and Air-Conditioning Engineers to ensure proper ventilation is provided, and ventilation-systems are properly maintained. See [Coronavirus \(COVID-19\) Response Resources from ASHRAE and Others \(www.ashrae.org/technical-resources/resources\)](http://www.ashrae.org/technical-resources/resources).

WORK AND GATHERING SPACE CLEANING AND DISINFECTION PROTOCOLS

Requirements

1. Establish a documented sanitation schedule and checklist, identifying surfaces/equipment to be sanitized, the agent to be used, and the frequency at which sanitation occurs.
2. Routinely clean and disinfect all areas, such as offices, restrooms, common areas, shared electronic equipment, instruments, tools, controls, etc.
3. Frequently clean all high-touch items, such as doorknobs, countertops, barriers, railings, handles, ends of pews, tops of chairs, and other surfaces.
4. Clean and disinfect work-vehicles in-between the use of each worker or work-crew, before and after each use.
5. Electronic devices (e.g., light-switches, circuit-breakers) should not be sanitized with a liquid agent. Consider covering switches/devices with a poly-covering that allows the user to manipulate the device without touching the switch, and hangout the poly-covering frequently. Electronic devices must be sanitized only when disconnected from the power-source, and sanitized in accordance with the listing/labeling requirements.
6. Implement immediate cleaning and disinfecting of the work and gathering space if a staff, member, or visitor becomes ill with COVID-19. See CDC's [Cleaning and Disinfecting Your Facility guidance \(www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html\)](http://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html).
7. Select appropriate and ensure the needed supply of disinfectants – consider effectiveness and safety. The U.S. Environmental Protection Agency's (EPA) List N has identified a list of products that meet EPA's criteria for use against SARS-CoV-2. See [EPA's List N: Disinfectants for Use Against SARS-CoV-2 \(www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2\)](http://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2).

8. Ensure all trash is regularly disposed of and not allowed to accumulate, and minimize the number of staff involved in handling and disposal of materials.
9. Review product labels and Safety Data Sheets, follow manufacturer specifications, and use required personal protective equipment for the product.

Recommendations

1. Personal equipment, items used in rituals or services, microphones, and phones should not be shared or, if shared, should be disinfected after each use.
2. Sharing books, hymnals, and religious texts by people from one service to the next does not pose a significant risk in spreading COVID-19. Limit the sharing of these texts in close proximity to each other at the same time to those in your own household. You may consider cleaning the covers of these objects along with other frequently touched items in your worship space as established in your cleaning schedule.

DROP-OFF, PICK-UP AND DELIVERY PRACTICES AND PROTOCOLS

Requirements

1. Staff must maintain a distance 6-feet or greater from others during interactions while receiving or exchanging deliveries.
2. Receive deliveries via a contactless method whenever possible, including deliveries at loading docks, reception areas, and locations where staff can maintain a distance of at least 6 feet from others.
3. Whenever possible, attempt to do everything electronically (e.g., app, phone) to eliminate the need for close contact between staff and delivery personnel.
4. All persons interacting during the process of drop-off, pick-up and delivery must wear face coverings for the duration of the encounter.
5. Staff must minimize the unnecessary exchanging or sharing of scanners, pens, or other tools with delivery personnel.

Recommendations

- Consider establishing delivery or pick-up locations outside of the building to minimize delivery personnel having to enter.
- Provide accommodations for drop-offs, pickups and deliveries, and delivery workers, and minimize the need for delivery workers to enter the building (e.g. drop-off windows, secured lockers).

Communications and training practices and protocols

Requirements

1. All leadership and staff must be trained regarding COVID-19 exposure, as well as applicable policies, procedures, practices, and protocols. The training must be provided by and paid for the

organization, and must be provided in a manner and language that each staff can understand, and must be adjusted to reasonably accommodate all limiting factors present. See OSHA's [Resource for Development and Delivery of Training to Workers \(www.osha.gov/Publications/OSHA3824.pdf\)](https://www.osha.gov/Publications/OSHA3824.pdf). See also Minnesota's [Small Assemblies for Testing and Training \(dli.mn.gov/sites/default/files/pdf/COVID-19_training_facilities.pdf\)](https://dli.mn.gov/sites/default/files/pdf/COVID-19_training_facilities.pdf) for guidance with facilitating training for employees while addressing COVID-19 implications.

2. Ensure the COVID-19 Preparedness Plan is posted in easily accessible locations and is shared with and reviewed by all staff. Posting may be done through electronic dissemination of the plan to all staff as long as staff have access to review the electronic posting.
3. Ensure the required rules, protocols, and practices are communicated to all staff and adequately enforce their provisions.
4. Ensure the required rules, protocols, and practices are required by other entities (support groups, educational sessions, other community groups or event planners) using the facility.
5. Ensure all staff are provided with and use personal protective equipment necessary to perform their work.
6. Use signage as reminders for staff, delivery people, members, guests, and visitors of rules, protocols, and practices, including not to enter the building if they have COVID-19 symptoms, social distancing, handwashing, use of face coverings, and respiratory etiquette.
7. Staff must ensure they comply with and follow established rules, protocols and practices

Recommendations

1. Communication to educate members and participants about the steps being taken for their protection to mitigate the spread of COVID-19 is strongly encouraged. Communicate protective measures to members and participants prior to, and at the start of, the event or gathering to both educate and inform them of their role in protecting themselves, the staff, and others.
2. Provide periodic, ongoing reminders to staff and members of the faith-based organization to remind them of social distancing and other protections and protocols regarding COVID-19. Include encouragement to follow guidance for their health and safety and updates about new information and resources they may find helpful.

Helping members, visitors, and guests minimize transmission

Requirements

1. Post signage at the entry of the building, and provide additional messaging (e.g., websites, emails, and social media posts), that if members, visitors, or guests do not feel well or have any COVID-19 symptoms, they must not attend services, events, or other activities at the facility and are strongly encouraged to stay home. They must also refrain from coming to the facility and are strongly encouraged to stay home if they have a household member experiencing symptoms compatible with COVID-19.

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- Symptoms can include fever, cough, shortness of breath, chills, headache, muscle pain, sore throat, or loss of taste or smell. Other less common symptoms include gastrointestinal symptoms like nausea, vomiting, or diarrhea. Refer to CDC's [If You are Sick or Caring for Someone \(www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html\)](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html).
2. Ensure that all participants maintain a distance of at least 6 feet from people not in the same household at all times. This includes establishing this distance with people next to, in front of, and behind each other. Remove or block off seating, clearly mark entrances and exits and space within the facility to ensure adequate spacing of participants.
 3. If members, visitors, or guests begin to feel unwell while in the facility, they must leave immediately. If they are a member of a household group at the facility, the household group must also leave. Plan for how you will address this if it occurs. See CDC's [Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 \(COVID-19\), May 2020 \(www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html\)](https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html).
 4. Advise members, guests, and visitors to wash and/or sanitize their hands upon entering the premises, and to regularly wash and/or sanitize their hands while at the facility.
 5. Require members, guests, and visitors wear a face covering, when required by Executive Order 20-81. More information about face covering requirements and exemptions is available on the MDH website at [Masks and face coverings \(www.health.state.mn.us/diseases/coronavirus/prevention.html#masks\)](https://www.health.state.mn.us/diseases/coronavirus/prevention.html#masks). You can also visit these webpages: [Face Covering Requirements and Recommendations under Executive Order 20-81 \(www.health.state.mn.us/diseases/coronavirus/facecover.html\)](https://www.health.state.mn.us/diseases/coronavirus/facecover.html) and [Frequently Asked Questions About the Requirement to Wear Face Coverings \(www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html\)](https://www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html).

Cloth face coverings are NOT a substitute for maintaining a physical distance of 6 feet from other people. For additional information about cloth face covering and how to make, wear and wash them, refer to CDC's [Use of Masks to Help Slow the Spread of COVID-19 \(www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html\)](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html).

Recommendations

1. Encourage members, guests, and visitors to conduct a self-check of their body temperature the day they plan to attend the service, event, or activity at your facility. They are expected to stay home if they, or any members of their household, have symptoms of COVID-19.
2. Facilitate a process for members, visitors, and guests to review a screening survey that checks for COVID-19 symptoms, close contacts with confirmed cases and quarantined cases, and out of state travel. The questions would be the same as those completed by staff. People are expected to stay home if they have had an exposure. See [Visitor and Employee Health Screening Checklist \(www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf\)](https://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf).
3. Post signage at the entry of the facility and provide additional messaging (e.g. web-sites, emails and social media posts) advising people who may be at higher risk for severe COVID-19 infection to strongly consider refraining from attending services or events at the facility. People over 65 and people of any age with underlying medical conditions are at higher risk. See CDC's [People Who Are](#)

[at Increased Risk for Severe Illness \(www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html\)](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html).

4. Advise members and visitors of the added COVID-19 precautions that will be taken prior to arrival at the site. Use websites, social media, pre-appointment phone calls, and other outlets to educate members on the steps being taken for their protection and the protection of staff.
5. Post signage at the entrances and exits outlining established protocols.
6. Limit the equipment, products, or items touched by participants while in the building.
7. If people's faces come into contact with the floor, carpet or other surface during prayers, request that they bring their own rug, or provide a paper covering for one-time use and then disposal.
8. Conduct processions and recessions in a manner that maintains at least six feet of distance between people from different households.
9. Adapt your practices during planned services, weddings, and funerals to avoid physical contact or passing objects between individuals (e.g., greetings, collection baskets, sharing of ceremonial objects).
10. Singing or chanting is a higher-risk activity as it more forcefully expels respiratory droplets than speaking. The act of singing or chanting may contribute to transmission of COVID-19, possibly through emission of aerosols. It is strongly recommended that congregations offer pre-recorded music/chants or have only one cantor at a distance of at least 12 feet from anyone else, while wearing a face covering.
11. Communion for some faiths is a critical part of their ritual. For faith communities that cannot make communion a touch-free encounter consider following these guidelines:
 - Distribute Communion hand-to-hand, not hand-to-mouth. Do not share cups.
 - Both the distributor and the receiver of communion are expected to wear face coverings.
 - Maintain a distance of at least 6 feet as much as possible between the communion distributor and the receiver. This would require both parties extending their arms as comfortably as possible.
 - The distributor of communion should use hand sanitizer prior to initiation, and again after touching their face, coughing, or sneezing, or significant touching of another person or object in the process of distributing communion.
 - Hand sanitizer should be used by the recipient before touching their mask to take it down for communion, and after touching the mask to put it back on. Note: hand sanitizer must be applied thoroughly and allowed to dry to be effective.
12. Evaluate all points in the services that previously involved a face-to-face or interaction closer than six feet to determine how they can be done in an alternative way.
13. Provide hand sanitizer and tissues at the entrance, in each seating area section, and other prominent locations.
14. Consider implementing usher directed entering and exiting of the seating area to maintain proper social distancing.

Additional protections and protocols

MANAGING ACCESS AND OCCUPANCY

Requirements

1. Faith-based communities, places of worship, wedding chapels, and funeral homes must reduce occupancy to accommodate for the required social distancing of at least 6 feet between people who do not live in the same household.
2. In indoor settings, occupancy must not exceed 50% of total occupancy, with a maximum of 250 people in a single self-contained space. In outdoor settings, gatherings must not exceed 250 people.
3. For large gatherings, utilize different entrances, pre-arrange staggered arrival and departure times, and signage and other mechanisms to limit the number of persons trying to enter the building at the same time and avoid congestion at entry and exit points.

Recommendations

1. Determine how your community will address arrivals after you have reached maximum capacity or if participants are not following the 6 feet of required distancing from others. Pre-plan as much as possible to avoid this situation and prepare a plan for if it occurs.
2. Evaluate and make changes to space, configuration, and movement through the space to allow for distancing of 6 feet between people from different households at all times.
3. Mark entrances, exits, restrooms, and other areas of congestion to provide for social distancing of at least 6 feet, including floor markers for distance, lane lines and signage in adjacent areas where people may be waiting for access.
4. For parking lot services or gatherings in vehicles, see the MDH [Guidance for Vehicle Gatherings, Parades, and Drive-ins \(www.health.state.mn.us/diseases/coronavirus/vehiclegather.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/vehiclegather.pdf).

ADDITIONAL PROTOCOLS FOR THE USE OF FACE COVERINGS

Requirements

1. Faith-based communities, places of worship, wedding chapels, and funeral homes must take reasonable steps to ensure that staff, members, and visitors wear face coverings in accordance with Executive Order 20-81 and conspicuously post face covering policies for staff, members, and visitors. Cloth face coverings are NOT a substitute for maintaining a physical distance of 6 feet from other people.
2. Ensure all people, including staff, members, and visitors bring their own face coverings, or offer face coverings for use.
3. Establish a protocol for accommodating staff who cannot wear a face covering due to a medical condition, mental health condition, or disability. Comply with applicable law, including civil rights laws, relating to verification of a staff person's disability or medical condition.

INDUSTRY GUIDANCE FOR SAFELY REOPENING: FAITH-BASED COMMUNITIES, PLACES OF WORSHIP, WEDDINGS, AND FUNERALS

- If a staff member is unable to use a face covering due to a medical condition, mental health condition, or disability, then the organization must engage with the staff person to identify and implement alternative protections as to ensure that staff, as well as other member, visitors, and workers, maintain a similar level of protection (e.g. face shields, isolating the worker, job reassignment).
4. Establish a protocol for accommodating members and visitors who cannot wear a face covering due to a medical condition, mental health condition, or disability. Faith-based communities, places of worship, wedding chapels, and funeral homes may not require members or visitors to provide proof of a medical condition mental health condition, or disability, or require members or visitors to explain the nature of their conditions or disability.

OTHER IMPORTANT CONSIDERATIONS

1. As organizations and facilities consider further opening of gathering spaces worship, rituals, prayer meetings, scripture studies, weddings, or funerals, it is important to consider the unique characteristics of your community members and your shared spaces.
2. Some of your staff and members may be at higher risk for COVID-19; these persons are strongly urged to stay at home and not participate in any group gatherings involving people outside of their immediate household.
3. Continue virtual services, phone contact, and other outreach to vulnerable community members, even as other members begin to engage in person. Some of your members may not feel comfortable resuming in-person contact for a longer period of time. It is important to respect their decisions while continuing to remain connected in other ways.
4. Remember that as restrictions are lifted on a state-wide level, your community has the choice to continue the practices put in place during the stay-at-home orders and delay in-person gatherings. Faith communities need to take steps to ensure that members do not experience negative consequences from those communities because of their decision of whether or not to attend services or events.
5. These Requirements are being implemented universally across various sectors with similar gathering spaces in our communities. Consideration is given to space size, flow of movement, duration of time in designated shared space, and the nature of the COVID-19 virus to easily spread in large group gatherings no matter how much planned social distancing is implemented.
6. If there is evidence of COVID-19 spread within your faith community, you may be advised to stop offering in-person services until it is safe to return. Contact your local or state health department for further guidance in these situations.
7. Resume in-person services and ceremonies only when adequate protective measures, as written in your COVID-19 Preparedness Plan, have been implemented.
8. Refer to the MDH [Guidance for Caring for People in Their Homes \(www.health.state.mn.us/diseases/coronavirus/visitingathome.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/visitingathome.pdf) for non-medical visits to deliver services.

Appendix A – Guidance for developing a COVID-19 Preparedness Plan

General

[Centers for Disease Control and Prevention \(CDC\): Coronavirus \(COVID-19\)](https://www.cdc.gov/coronavirus/2019-nCoV/)
(www.cdc.gov/coronavirus/2019-nCoV)

[Minnesota Department of Health \(MDH\): Coronavirus](https://www.health.state.mn.us/diseases/coronavirus/) (www.health.state.mn.us/diseases/coronavirus)

[State of Minnesota: COVID-19 Response](https://mn.gov/covid19/) (https://mn.gov/covid19)

Businesses

[CDC: Businesses and Workplaces](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html) (www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html)

[CDC: General Business Frequently Asked Questions](https://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html) (www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html)

[CDC: Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 \(COVID-19\), May 2020](https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html): (www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html)

[MDH: Businesses and Employers: COVID-19](https://www.health.state.mn.us/diseases/coronavirus/businesses.html)
(www.health.state.mn.us/diseases/coronavirus/businesses.html)

[MDH: Visitor and Employee Health Screening Checklist](https://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)
(www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)

[MDH: Materials and Resources for COVID-19 Response](https://www.health.state.mn.us/diseases/coronavirus/materials/index.html)
(www.health.state.mn.us/diseases/coronavirus/materials/index.html)

[Minnesota Department of Employment and Economic Development \(DEED\): COVID-19 Information and Resources](https://mn.gov/deed/newscenter/covid/) (<https://mn.gov/deed/newscenter/covid/>)

[Minnesota Department of Labor and Industry \(DLI\): Updates Related to COVID-19](https://www.dli.mn.gov/updates)
(www.dli.mn.gov/updates)

[Federal Occupational Safety and Health Administration \(OSHA\)](https://www.osha.gov) (www.osha.gov)

[AIHA: Back to Work Safely](https://www.backtoworksafely.org) (www.backtoworksafely.org)

Handwashing

MDH: [Videos for COVID-19 Response](#)

(www.health.state.mn.us/diseases/coronavirus/materials/videos.html)

Handwashing videos translated into multiple languages

Respiratory etiquette: Cover your cough or sneeze

CDC: [How to Protect Yourself & Others](#) (www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html)

CDC: [Coughing and Sneezing](#) (www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html)

MDH: [Protect Yourself & Others: COVID-19](#)

(www.health.state.mn.us/diseases/coronavirus/prevention.html)

Face Coverings

MDH: [Face Covering Requirements and Recommendations under Executive Order 20-81](#)

(www.health.state.mn.us/diseases/coronavirus/facecover.html)

MDH: [Frequently Asked Questions About the Requirement to Wear Face Coverings](#)

(www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html)

MDH: [Best Practices for Masks: Considerations for People with Disabilities and Special Health Needs](#)

(www.health.state.mn.us/diseases/coronavirus/guidemasks.pdf)

CDC: [Use of Cloth Face Coverings to Help Slow the Spread of COVID-19](#) (www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html)

Housekeeping

CDC: [Cleaning and Disinfecting Your Facility](#) (www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)

CDC: [Cleaning And Disinfecting Your Home](#) (www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html)

CDC: [Cleaning and Disinfection for Community Facilities](#) (www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html)

Environmental Protection Agency (EPA): [List N: Disinfectants for Use Against SARS-CoV-2 \(COVID-19\)](#) (www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2)

Employees exhibiting signs and symptoms of COVID-19

[CDC: What to Do If You Are Sick \(www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html\)](http://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html)

[MDH: Symptoms and Testing: COVID-19 \(www.health.state.mn.us/diseases/coronavirus/symptoms.html\)](http://www.health.state.mn.us/diseases/coronavirus/symptoms.html)

[MDH: Visitor and Employee Health Screening Checklist \(www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)

[MDH: COVID-19 and When to Return to Work \(www.health.state.mn.us/diseases/coronavirus/returntowork.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/returntowork.pdf)

[State of Minnesota: Should I Get Tested for COVID-19 \(https://mn.gov/covid19/for-minnesotans/if-sick/get-tested/index.jsp\)](https://mn.gov/covid19/for-minnesotans/if-sick/get-tested/index.jsp)

Training

[CDC: Prepare your Small Business and Employees for the Effects of COVID-19 \(www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html\)](http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html)

[Federal OSHA: Guidance on Preparing Workplaces for COVID-19 \(www.osha.gov/Publications/OSHA3990.pdf\)](http://www.osha.gov/Publications/OSHA3990.pdf)