OVERVIEW

On March 19, 2020, the State Public Health Officer and Director of the California Department of Public Health issued an order requiring most Californians to stay at home to disrupt the spread of COVID-19 among the population.

The impact of COVID-19 on the health of Californians is not yet fully known. Reported illness ranges from very mild (some people have no symptoms) to severe illness that may result in death. Certain groups, including people aged 65 or older and those with serious underlying medical conditions, such as heart or lung disease or diabetes, are at higher risk of hospitalization and serious complications. Transmission is most likely when people are in close contact or in a poorly ventilated area with an infected person, even if that person does not have any symptoms or has not yet developed symptoms.

Precise information about the number and rates of COVID-19 by industry or occupational groups, including among critical infrastructure workers, is not available at this time. There have been multiple outbreaks in a range of workplaces, indicating that workers are at risk of acquiring or transmitting COVID-19 infection. Examples of these workplaces include places of worship, hospitals, long-term care facilities, prisons, food production, warehouses, meat processing plants, and grocery stores.

As stay-at-home orders are modified, it is essential that all possible steps be taken to ensure the safety of workers and the public.

Key prevention practices include:

✓ physical distancing to the maximum extent possible,
✓ use of face coverings by workers and volunteers (where respiratory protection is not required) and congregants/visitors,
✓ frequent handwashing and regular cleaning and disinfection,
✓ training workers and volunteers on these and other elements of the COVID-19 prevention plan.

In addition, it will be critical to have in place appropriate processes to identify new cases of illness in workplaces and, when they are identified, to intervene quickly and work with public health authorities to halt the spread of the virus.

PURPOSE

This document provides guidance for places of worship and providers of religious services and cultural ceremonies (referred to collectively as “places of worship”) to support a safe, clean environment for workers, interns and trainees, volunteers, scholars, and all other types of workers as well as congregants, worshippers, visitors, etc. (referred to collectively as “visitors” or “congregants”). This guidance does not obligate places of worship to resume in-person activity. Further, it is strongly recommended that places of worship continue to facilitate remote
services and other related activities for those who are vulnerable to COVID-19 including older adults and those with co-morbidities.

Even with adherence to physical distancing, convening in a congregational setting of multiple different households to practice a personal faith carries a relatively higher risk for widespread transmission of the COVID-19 virus, and may result in increased rates of infection, hospitalization, and death, especially among more vulnerable populations. In particular, activities such as singing and chanting negate the risk-reduction achieved through six feet of physical distancing.

*Places of worship must therefore discontinue indoor singing and chanting activities and limit indoor attendance to 25% of building capacity or a maximum of 100 attendees, whichever is lower. Local Health Officers are advised to consider appropriate limitations on outdoor attendance capacities, factoring their jurisdiction's key COVID-19 health indicators. At a minimum, outdoor attendance should be limited naturally through implementation of strict physical distancing measures of a minimum of six feet between attendees from different households, in addition to other relevant protocols within this document.

This revised limitation will be subject to regular review by the California Department of Public Health in consultation with local Departments of Public Health to assess the impact of these imposed limits on public health and provide further direction as part of a phased-in restoration of activities in places of worship.

NOTE: This guidance is not intended for food preparation and service, delivery of items to those in need, childcare and daycare services, school and educational activities, in-home caregiving, counseling, office work, and other activities that places and organizations of worship may provide. Organizations that perform these activities must follow applicable guidance on the COVID-19 Resilience Roadmap website.

The guidance is not intended to revoke or repeal any worker rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA. Stay current on changes to public health guidance and state/local orders, as the COVID-19 situation continues. Cal/OSHA has more safety and health guidance on their Cal/OSHA Guidance on Requirements to Protect Workers from Coronavirus webpage. The CDC has additional guidance for community- and faith-based organizations.

**Required Use of Face Coverings**

On June 18, CDPH issued Guidance on the Use of Face Coverings, which broadly requires the use of face coverings for both members of the public and workers in all public and workplace settings where there is a high risk of exposure.

People in California must wear face coverings when they are engaged in work,
whether at the workplace or performing work off-site, when:

- Interacting in-person with any member of the public;
- Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time;
- Working in any space where food is prepared or packaged for sale or distribution to others;
- Working in or walking through common areas, such as hallways, stairways, elevators, and parking facilities;
- In any room or enclosed area where other people (except for members of the person’s own household or residence) are present when unable to physically distance;
- Driving or operating any public transportation or paratransit vehicle, taxi, or private car service or ride-sharing vehicle when passengers are present. When no passengers are present, face coverings are strongly recommended.

Complete details, including all requirements and exemptions to these rules, can be found in the guidance. Face coverings are strongly encouraged in other circumstances, and employers can implement additional face covering requirements in fulfilling their obligation to provide workers with a safe and healthful workplace. Employers must provide face coverings to workers or reimburse workers for the reasonable cost of obtaining them.

Employers should develop an accommodation policy for any worker who meets one of the exemptions from wearing a face covering. If a worker who would otherwise be required to wear a face covering because of frequent contact with others cannot wear one due to a medical condition, they should be provided with a non-restrictive alternative, such as a face shield with a drape attached to the bottom edge, if feasible, and if the medical condition permits it.

Businesses that are open to the public should be cognizant of the exemptions to wearing face coverings in the CDPH Face Covering Guidance and may not exclude any member of the public for not wearing a face covering if that person is complying with the guidance. Businesses will need to develop policies for handling these exemptions among customers, clients, visitors, and workers.
Workplace Specific Plan

- Establish a written, workplace-specific COVID-19 prevention plan at every location, perform a comprehensive risk assessment of all work areas and all work tasks, and designate a person at each workplace to implement the plan.

- Incorporate the CDPH Face Covering Guidance into the Workplace Specific Plan and include a policy for handling exemptions.

- Identify contact information for the local health department where the workplace is located for communicating information about COVID-19 outbreaks among workers and congregants/visitors.

- Train and communicate with workers and worker representatives on the plan and make the plan available to workers and their representatives.

- Regularly evaluate workplaces for compliance with the plan and document and correct deficiencies identified.

- Investigate any COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update the plan as needed to prevent further cases.

- Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with CDPH guidelines.

- Identify close contacts (within six feet for 15 minutes or more) of an infected worker and take steps to isolate COVID-19 positive workers and close contacts.

- Adhere to the guidelines below. Failure to do so could result in workplace illnesses that may cause operations to be temporarily closed or limited.

Topics for Worker and Volunteer Training

- Information on COVID-19, how to prevent it from spreading, and which underlying health conditions may make individuals more susceptible to contracting the virus.

- Self-screening at home, including temperature and/or symptom checks using CDC guidelines.

- The importance of not coming to work or participating in activities
  - If a worker has symptoms of COVID-19 as described by the CDC,
such as a fever or 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, vomiting, or diarrhea, OR

- If a worker was diagnosed with COVID-19 and has not yet been released from isolation, OR
- If within the past 14 days, a worker has had contact with someone who has been diagnosed with COVID-19 and is considered potentially infectious (i.e. still on isolation).

- To return to work after a worker receives a COVID-19 diagnosis only if 10 days have passed since symptoms first appeared, their symptoms have improved, and the worker has had no fevers (without the use of fever reducing medications) for the last 72 hours. A worker without symptoms who was diagnosed with COVID-19 can return to work only if 10 days have passed since the date of the first positive COVID-19 test.

- To seek medical attention if their symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face.

Updates and further details are available on [CDC’s webpage](https://www.cdc.gov).

- The importance of frequent handwashing with soap and water, including scrubbing with soap for 20 seconds (or using hand sanitizer with at least 60% ethanol or 70% isopropanol when workers cannot get to a sink or handwashing station, per [CDC guidelines](https://www.cdc.gov)).

- The importance of physical distancing, both at work and off work time (see Physical Distancing section below).

- Proper use of face coverings, including:
  - Face coverings do not protect the wearer and are not personal protective equipment (PPE).
  - Face coverings can help protect people near the wearer, but do not replace the need for physical distancing and frequent handwashing.
  - Face coverings must cover the nose and mouth.
  - Workers should wash or sanitize hands before and after using or adjusting face coverings.
  - Avoid touching the eyes, nose, and mouth.
  - Face coverings must not be shared and should be washed or discarded after each shift.

- Information contained in the [CDPH Guidance for the Use of Face](https://www.cdph.ca.gov)
Coverings, which mandates the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices the employer has adopted to ensure the use of face coverings. Training should also include the employer's policies on how people who are exempted from wearing a face covering will be handled.

- Ensure all types of workers including temporary, independent contractors, and volunteer workers are also properly trained in COVID-19 prevention policies and have necessary PPE. Discuss these responsibilities ahead of time with organizations supplying temporary, contract, and/or volunteer staff.

- Information on paid leave benefits the worker may be entitled to receive that would make it financially easier to stay at home. See additional information on government programs supporting sick leave and worker's compensation for COVID-19, including worker's sick leave rights under the Families First Coronavirus Response Act and worker's rights to workers' compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the Governor's Executive Order N-62-20 while that Order is in effect.

**Individual Control Measures and Screening**

- Provide temperature and/or symptom screenings for all workers at the beginning of their shift. Make sure the temperature/symptom screener avoids close contact with workers to the extent possible.

- If requiring self-screening at home, which is an appropriate alternative to providing it at the establishment, ensure that screening was performed prior to the worker and/or volunteer leaving the home for their shift and follows CDC guidelines, as described in the Topics for Worker Training section above.

- Encourage workers and congregants/visitors who are sick or exhibiting symptoms of COVID-19, or who have family members who are ill, to stay home.

- Employers must provide and ensure workers and volunteers use all required protective equipment, including eye protection and gloves, where necessary.

- Places of worship should consider where disposable gloves use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items. All workers and volunteers should wear gloves when handling items contaminated by body fluids.
• Workers, volunteers, etc., should not enter the home or visit someone who has tested positive for, exhibited symptoms of, or has been in contact with someone infected with COVID-19 for an appropriate waiting period as described by CDC guidelines.

• Places of worship must take reasonable measures, including posting signage in strategic and highly-visible locations and in reservation confirmations, to remind congregants and visitors that they must use face coverings and practice physical distancing and should frequently wash their hands with soap for at least 20 seconds, use hand sanitizer, and not touch their face.

• Use social media, website, texts, email, newsletters, etc., to communicate the steps being taken to protect congregants/visitors and workers so that they are familiar with the policies (including to stay home if experiencing symptoms or are at increased risk of becoming sick, face coverings, physical distancing, handwashing and/or sanitizing, and cough etiquette), before arriving at the facility. Workers and volunteers are strongly encouraged to remind congregants/visitors of these practices with announcements during services or on welcoming guests.

• Remind congregants and visitors in advance to bring a face covering and make them available to anyone who arrives without one, if possible.

• Congregants/visitors should be screened for temperature and/or symptoms upon arrival to places of worship and asked to use hand sanitizer.

Cleaning and Disinfecting Protocols

• Perform thorough cleaning of high traffic areas such as lobbies, halls, chapels, meeting rooms, offices, libraries, and study areas and areas of ingress and egress including stairways, stairwells, handrails, and elevator controls. Frequently disinfect commonly used surfaces including doorknobs, toilets, handwashing facilities, pulpits and podiums, donation boxes or plates, altars, and pews and seating areas.

• Establish frequent cleaning and disinfection of personal work areas such as desks and cubicles and supply the necessary cleaning products. Provide time for workers to implement cleaning practices during their shift. Cleaning assignments should be assigned during working hours as part of the workers’ job duties.

• Discourage sharing items used in worship and services (such as prayer books, cushions, prayer rugs, etc.) whenever possible and provide single-use or digital copies or ask congregants/visitors to bring personal items.
instead. Avoid sharing work equipment and supplies, such as phones, office equipment, computers, etc., wherever possible. Never share PPE.

- Where such items must be shared, disinfect between shifts or uses, whichever is more frequent, including the following: shared office equipment (copiers, fax machines, printers, telephones, keyboards, staplers, etc.) and shared worship items, etc., with a cleaner appropriate for the surface.

- Ensure that sanitary facilities stay operational and stocked at all times and provide additional soap, paper towels, and hand sanitizer when needed. Consider more frequently cleaning and disinfecting handwashing facilities that are used more often. Use signage to reinforce handwashing.

- Disinfect microphones and stands, music stands, instruments and other items on pulpits and podiums between each use. Consult equipment manufacturers to determine appropriate disinfection steps, particularly for soft, porous surfaces such as foam mufflers.

- Consider using disposable seat covers for congregants/visitors, particularly on porous surfaces or where a facility has multiple daily services. Discard and replace seat covers between each use. Provide disposable or washable covers on pillows used as seating on floors and change/wash them after each use.

- Install hand sanitizer dispensers, touchless whenever possible, at entrances and contact areas such as meeting rooms, lobbies, and elevator landings.

- When choosing disinfecting chemicals, establishments should use products approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list and follow product instructions. Use disinfectants labeled to be effective against emerging viral pathogens, diluted household bleach solutions (5 tablespoons per gallon of water), or alcohol solutions with at least 70% alcohol that are appropriate for the surface. Provide workers training on the chemical hazards, manufacturer’s directions, ventilation requirements, and Cal/OSHA requirements for safe use. Workers and volunteers using cleaners or disinfectants should wear gloves or other protective equipment as required by the product instructions. Follow the asthma-safer cleaning methods recommended by the California Department of Public Health and ensure proper ventilation.

- Wash religious garments and linens after each service or event, at the highest water setting possible. Ask congregants/visitors to bring their own storage bags for personal garments and shoes. Workers, congregants, and visitors should wear gloves when handling others’ dirty linens, shoes, etc.
• Discontinue passing offering plates and similar items that move between people. Use alternative giving options such as secure drop boxes that do not require opening/closing and can be cleaned and disinfected. Consider implementing digital systems that allow congregants/visitors to make touch-free offerings.

• Mark walking paths between spaces designated for congregants/visitors to sit/kneel so that people do not walk where someone may touch their head to the floor.

• During meetings and services, introduce fresh outside air, for example by opening doors/windows (weather permitting) and operating ventilation systems.

• Where possible, do not clean floors by sweeping or other methods that can disperse pathogens into the air. Use a vacuum with a HEPA filter wherever possible.

• Consider installing portable high-efficiency air cleaners, upgrading the building’s air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in worship areas, offices, and other spaces.

Physical Distancing Guidelines

• Places of worship should continue to provide services through alternative methods (such as via internet live and/or recorded streaming, telephone, drive-in, etc.) whenever possible.

• Consider holding in-person meetings and providing in-person services outside whenever possible.

• Implement measures to ensure physical distancing of at least six feet between workers and congregants/visitors, etc. This can include use of physical partitions or visual cues (e.g., floor or pew markings or signs to indicate where people should sit and stand). Reconfigure seating and standing areas to maintain physical distancing of six feet or more between congregants/visitors from different households. Consider limiting seating to alternate rows. Members of the same household may be seated together but should maintain at least six feet of distance from other households.

• Consider dedicating workers to help people maintain distances during activities.

• Shorten services to limit the length of time congregants/visitors spend at facilities whenever possible. This could include limiting speeches, asking congregants/visitors to put on garments at home before arrival, etc.
• Close places of worship for visitation outside of scheduled services, meetings, etc., whenever possible.

• Consider implementing a reservation system to limit the number of congregants/visitors attending facilities at a time. This can include the use of digital platforms or other types of tools.

• Encourage congregants/visitors to meet with the same group, particularly when services meet frequently and/or require a certain number of people to be present. This can reduce the spread of transmission by minimizing the number of different individuals who come into close contact with each other.

• Consider offering additional meeting times (per day or per week) so that fewer guests attend meetings and services at one time. Clean meeting areas between each use as described in this guidance.

• Discontinue large gatherings that encourage congregants/visitors to travel and break physical distances during activities, such as concerts, large holiday and life event celebrations and remembrances.

• Children should remain in the care of those in their household unit and not interact with children of other parties at any time while visiting facilities. Close play areas and discontinue activities and services for children where physical distancing of at least six feet cannot be maintained.

• Encourage congregants/visitors to physically distance themselves from others outside their household, avoid touching surfaces, and to leave the facility if they do not feel well.

• Consider limiting touching for religious and/or cultural purposes, such as holding hands, to members of the same household.

• Dedicate workers to direct guests to meeting rooms upon entry to places of worship rather than congregating in lobbies or common areas. Consider using ushers to help people find places to sit and stand that are at least six feet apart from other guests/household groups. Ask congregants/visitors to arrive and leave in a single group to minimize crossflow of people. Welcome and dismiss congregants/visitors from altars, podiums, meeting rooms, etc. in an orderly way to maintain physical distancing and minimize crossflow of traffic, to the extent possible.

• Prop or hold doors open during peak periods when congregants/visitors are entering and exiting facilities, if possible and in accordance with security and safety protocols.

• Close or restrict common areas, such as break rooms, kitchenettes, foyers,
etc. where people are likely to congregate and interact. Consider installing barriers or increase physical distance between tables/seating when there is continued use of these areas.

• Remove from service or find low-community touch alternatives for communal/religious water containers such as fonts, sinks, and vessels. Empty and change water between uses. Where there is a possibility of contaminant splash, workers, congregants, visitors, etc., are strongly encouraged to use equipment to protect the eyes, nose, and mouth using a combination of face coverings, protective glasses, and/or face shields. Reusable protective equipment such as shields and glasses should be properly disinfected between uses.

• When washing is a required activity, modify practices whenever possible to limit splashing and the need to clean and disinfect washing facilities. Encourage necessary washing to be performed at home prior to entering a facility, if possible.

• Reconfigure podiums and speaker areas, office spaces, meeting rooms, conference rooms, etc., to allow for at least six feet between people.

• Establish directional hallways and passageways for foot traffic, if possible, and designate separate routes for entry and exit into meeting rooms, offices, etc., to help maintain physical distancing and lessen the instances of people closely passing each other.

• Limit the number of individuals riding in an elevator at a time. Post signage regarding these policies.

• Utilize practices, when feasible and necessary, to limit the number of workers and congregants/visitors in office, meeting spaces, etc., at one time. This may include scheduling (e.g. staggering start/end times), establishing alternating days for onsite reporting, returning to places of worship in phases, or continued use of telework when feasible.

• Consider offering workers and volunteers who request modified duties options that minimize their contact with congregants/visitors and other workers (e.g., office duties rather than working as an usher or managing administrative needs through telework).

• Stagger worker breaks, in compliance with wage and hour regulations, to maintain physical distancing protocols.

• Discontinue nonessential travel and encourage distance meetings via phone and internet.

• Close self-service item selection such as pamphlet displays and bookshelves and provide these items to congregants/visitors individually as necessary. Consider delivering items and information electronically.
• Consider limiting the number of people that use the restroom at one time to allow for physical distancing.

• Discourage workers, congregants, visitors, etc., from engaging in handshakes, hugs, and similar greetings that break physical distance. Take reasonable measures to remind people to wave or use other greetings.

• Reconfigure parking lots to limit congregation points and ensure proper separation (e.g., closing every other space). If performing drive-in services, ensure vehicle windows and doors are closed if six feet of distance is not possible between vehicles.

• Continue to support non-in person attendance of services and other related activities by those who are vulnerable to COVID-19 including older adults and those with co-morbidities.

Considerations for Places of Worship

• Discontinue offering self-service food and beverages. Do not hold potlucks or similar family-style eating and drinking events that increase the risk of cross contamination. If food and beverages must be served, provide items in single-serve, disposable containers whenever possible. Workers or volunteers serving food should wash hands frequently and wear disposable gloves.

• Discontinue singing (in rehearsals, services, etc.), chanting, and other practices and performances where there is increased likelihood for transmission from contaminated exhaled droplets. Consider practicing these activities through alternative methods (such as internet streaming) that ensure individual congregation members perform these activities separately in their own homes.

• Consider modifying practices that are specific to particular faith traditions that might encourage the spread of COVID-19. Examples are discontinuing kissing of ritual objects, allowing rites to be performed by fewer people, avoiding the use of a common cup, offering communion in the hand instead of on the tongue, providing pre-packed communion items on chairs prior to service, etc., in accordance with CDC guidelines.
Considerations for Funerals

- Consider reduced visitor capacity and stagger visitation times at funerals, wakes, etc., if possible. Follow all cleaning and disinfection measures as described in this guidance. Whenever possible, remind visitors to maintain physical distance from each other, from workers and volunteers, and from the deceased.

- Consider modifying religious or cultural practices when washing or shrouding bodies of those who have died from COVID-19, in accordance with guidance from CDPH and the CDC. If washing the body or shrouding are important religious or cultural practices, work with funeral home staff and families to reduce exposure as much as possible. All people participating in these activities must wear disposable gloves and if there will be splashing of fluids, people must use additional protective equipment including protection for the eyes, nose, and mouth, such as face shields.

- Consult and comply with local guidance regarding limits on gathering sizes, travel, holding funerals for those who died from COVID-19, etc.

- Consider other recommendations and modifications of services related to places of worship outlined above, as applicable for funeral services.

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1Additional requirements must be considered for vulnerable populations. Places of worship must comply with all Cal/OSHA standards and be prepared to adhere to its guidance as well as guidance from the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH). Additionally, places of worship must be prepared to alter their operations as those guidelines change.