



ARCHDIOCESE  
of BALTIMORE

# COVID-19 Response

*The following guidelines are subject to change, pending updated guidance from public health and governmental agencies*

## **PHASE ONE**

- PART 1 Guidelines for Wedding and Funeral Masses and the Sacraments
- PART 2 Guidelines for Resumption of Parish Ministries
- PART 3 Guidelines for Resumption of Parish Operations



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# **PART 1**

## **Wedding and Funeral Masses and the Sacraments**

- I. Overview
- II. General Directives
- III. Preparing the Church Environment
- IV. Preparing the People of God
- V. General Guidelines for Permissible Masses
- VI. Opening of Churches/Chapels for Private Prayer/Adoration
- VII. Sacraments

## I. Overview

After consultation with regional vicars and the priests and laity of the diocese – including the Presbyteral Council and the Archdiocesan Pastoral Council – this instruction is given to update, clarify, and determine the methods to be observed in the various phases of the resumption of “limited public worship” in the Archdiocese of Baltimore. While the enclosed guidance represents a directive of the Archbishop of Baltimore, all pastors, parochial administrators, and other personnel are to follow all official governmental and public health guidelines enacted for the prevention of the contraction and spread of the COVID-19 virus, including limitations on gatherings, physical distancing, hygiene and sanitation measures and the use of personal protective equipment (PPE).

This document outlines only Phase I of the Archdiocese of Baltimore’s response to the State of Maryland’s instruction for “Resuming Limited Public Worship.” Guidelines for Phases II and III will be provided at a later date. The beginning dates and length of each phase are unknown as of the time of the drafting of this document, but it is envisioned that the effective dates for each phase will be proximate to or coincide with the dates of the State of Maryland’s three-stage plan.

## II. General Directives

*Daily and Sunday Masses will continue to be held without the presence of the faithful during Phase I. Therefore:*

1. Archbishop Lori has extended his dispensation of the faithful from the obligation to attend Sunday Mass. Parishes will continue to make Masses available to the faithful through such means as internet livestream or recording, television, and radio, thereby ensuring that the faithful may maintain a spiritual connection with their local church.
2. Only wedding and funeral Masses may be held with the presence of the faithful during Phase I, provided that:
  - The number of individuals present at Mass, including liturgical ministers, does not exceed the State’s restriction (currently 10-person maximum) on the number of people able to be gathered.
  - Those who are symptomatic or who have been exposed to the virus within 14 days are not permitted to enter the church, in accordance with national, state and local health directives. All attendees are asked to check their temperature at home before coming to church for any reason. Likewise, anyone with a persistent cough or who otherwise does not feel well should not come to church.
  - Those who are at risk because of an underlying health issue or who are 60 years of age or older are strongly encouraged, for their own health, to avoid the risk of attending public celebrations of the Church until all restrictions have been lifted. Any such persons attending assumes some personal risk.
3. The Sacraments of Reconciliation and Baptism will be available to the faithful.
4. Churches will be reopened during Phase I for private prayer and adoration.

### III. Preparing the Church Environment

1. Appropriate cleaning of high-use areas within the church is to be done before and after each service. *More information about cleaning and sanitation can be found in Part 3 on page 17.*
  - Pews used for wedding or funeral Masses must be wiped down with disinfectant.
  - All hymnals and missalettes are to be removed from the pews and stored for the duration of the pandemic. No other materials may be left in the pews. Printed or e-worship aids, such as myParish App, are strongly recommended. Printed aids must be disposed of after each liturgy.
  - Restroom facilities and door handles, push plates, and knobs are to be sanitized after each service.
2. Holy water fonts are to remain empty until further notice.
3. Hand sanitizer is to be made available at all entrances and exits throughout the church, in the narthex, in the restrooms, near the ambo and altar, and on the table(s) prepared for distribution of Holy Communion.
4. Pews should be marked with physical distancing indicators from the beginning of Phase I. Removable tape, such as painter's tape, is encouraged. Such markers should indicate 6-foot sections within each usable pew. Every other pew may be used by the faithful. Please section off every other pew in the church prior to the beginning of Phase I so that an accurate count of the church's seating capacity can be ascertained. This will assist in the planning for Phases II and III.
5. Entrance and exit doors and bathrooms are to be adequately designated, monitored and sanitized.
6. Consider hygienic options for the Liturgy of the Word (near the ambo), for instance:
  - Use the same lector for the first two readings;
  - The priest or deacon could proclaim all readings;
  - Each reader could have a personal microphone, or the proclaimer of the first and second readings might have an entirely separate pulpit;
  - Anti-bacterial wipes or hand sanitizer should be placed near the ambo.
7. Collection baskets (when appropriate) should be placed in a conspicuous location for donations. *See General Guidelines for Mass, Section IV, Item 6.*
8. Prepare the restroom area in this, or a similar, way:
  - Only one person at a time may occupy the restroom.
  - At the entrance to the restrooms, the floor should be marked in 6-foot intervals, beginning 6 feet from the door.
  - Place antibacterial/viral wipes in each stall.
  - Post a sign on the door and in each restroom indicating the following:
    - *Only one occupant in the restroom at a time.*
    - *When waiting, stand at least 6 feet apart (as indicated by floor markings)*
    - *Clean toilet seat with anti-bacterial wipes before and after use. Please dispose of these wipes in the trash. Do not flush them.*
    - *Wash hands thoroughly with soap and warm water for at least 20 seconds prior to leaving restroom.*

9. A small table should be placed where the Communion minister will distribute Eucharist at the funeral or wedding Mass. The table should be large enough to accommodate a corporal, purificator, ciborium, and hand sanitizer.
10. Markings (such as painter's tape) should be placed 6 feet apart on the floor approaching this table, indicating physical distancing of communicants in the Communion line.
11. A plan for dismissal of the assembly should be created so that the six-foot physical distancing is observed as the faithful leave the church.

#### **IV. Preparing the People of God**

1. Each member of the faithful must wear a facial covering while in the church, including during the celebration of Mass. All parish staff and volunteers are to wear facial coverings and gloves (when gloves are not available, frequent hand sanitizing will be necessary) throughout the celebration of Mass. Lectors should also wear facial coverings, but they may remove them when proclaiming Scripture. Pastors are to see to it that these obligations are enforced without exception.
2. The priest need not wear a facial covering while celebrating Mass, but may do so if he feels compromised. He must wear a facial covering during distribution of Communion, particularly if he is at high risk. He may also choose to have a deacon or Extraordinary Minister of Holy Communion distribute the Eucharist.
3. *Strict* physical distancing must be observed during Phase I. This is defined as “avoiding close contact with those outside one’s household.” Close contact generally means avoiding being within 6 feet of another person, especially if this will last for 15 minutes or more.
4. State restrictions on gatherings of people – currently a 10-person maximum – applies to churches and must be strictly enforced. This includes clergy, liturgical ministers and staff/volunteers. This must be communicated clearly by parish personnel to parishioners, including advanced communications and notices placed at all entrances.
5. At least one staff member or volunteer must be present while the church is in use to *enforce compliance with the gathering restrictions and hygiene protocols.*

#### **V. General Guidelines for Mass**

*(During Phase I, only Wedding and Funeral Masses are allowed with a maximum of 10 persons.)*

1. Entrance and exit doors are to be adequately designated and monitored. Entrance doors are to be propped or held open before Mass, and exit doors are to be propped or held open at the end of Mass to prevent people from touching door handles, knobs or push plates.
2. Processions through the center aisle are prohibited during Phase I. The celebrant and other ministers should enter/exit via the sacristy or other area near the sanctuary.
3. Staff, ushers or other volunteers should assist with directing people to marked pews.
4. Families are to maintain 6 feet between their family and other families or individuals while on church property, including throughout the celebration of permissible Masses (funerals and weddings in Phase I). Because of their very nature, small children might find it difficult to maintain physical distancing. Parents should consider this when deciding whether to bring them to church when physical distancing is required.

5. Seating is to be arranged such that 6 feet of distance can be maintained between members of one household and members of another.
6. One pew is to be left vacant in between congregants such that 6 feet of distance can be maintained in all directions.
7. It is recommended that only an accompanist fulfill music ministry during Phase I.
8. Based on scientific research and the opinion of the National Association of Teachers of Singing (NATS), the American Choral Directors Association (ACDA), Chorus America, the Barbershop Harmony Society, and the Performing Arts Medical Association (PAMA) congregational singing by the assembly is suspended until further notice. Because singing expels significantly more aerosolized particles of virus than speaking, it creates a much greater risk of spreading the virus. In particular, choirs should not rehearse or sing until further notice.
9. Processions of the Gifts are suspended during Phase I.
10. Collection baskets (or any other materials) are not to be passed from one family to another, nor shall ushers take up the collection from the assembly. Stationary baskets may be used for donations and are to be monitored by the ushers until the donations are collected and handled according to the proper protocols in place. It is recommended that the faithful make use of electronic giving to minimize the risks associated with the handling of envelopes and cash.
11. During the Preparation of the Altar and of the Gifts, the ciborium(a) for the faithful should be placed on a corporal away from the celebrant's paten and covered with lids, or purificators if there are no lids. Chalices for concelebrating Priests and for the Deacon(s) should be covered with palls until the reception of Communion.
12. The faithful does not hold hands during the *Lord's Prayer*.
13. The physical *Sign of Peace* is omitted during Phase I.
14. All concelebrating priests, as well as deacons assisting at the Mass, may receive Holy Communion at the usual time and in the usual manner. However, each must have a separate chalice from the main celebrant.
15. Distribution of Holy Communion from the chalice is prohibited to the faithful during Phase I. For those who are gluten intolerant, special arrangements are to be made with the priest prior to Mass.

### **Protocol for Distribution of Communion during Phase I**

1. At the beginning of Mass, or at a suitable point during Mass, the priest should explain that those who desire to receive Holy Communion might do so at the appropriate time. He may add that the faithful should maintain a six-foot distance from each other as they come forward. Members of the assembly who choose not to receive must, however, enter the procession if others would have to step across them to access the aisle. They may ask for a blessing when arriving at the sanctuary, or simply wait until the person in front of them has received and then follow that person and return to the pew.
2. The Most Precious Blood will not be distributed to the faithful during Phase I.
3. A small table that is large enough to accommodate a corporal, a purificator, hand sanitizer and room for the ciborium will be set near each Communion station.

4. The priest must perform hand hygiene (e.g., with hand sanitizer) immediately before distributing Holy Communion. The priest must wear a facial covering as he distributes Communion.
5. If the celebrant is at high-risk or otherwise uncomfortable distributing Communion, another priest, deacon or Extraordinary Minister of Holy Communion should be asked to distribute the Eucharist.
6. The flow of the Communion procession should be considered and publicized before it begins. For instance, those receiving Communion could come forward via the center aisle, but return to their seats via the side aisle.
7. The faithful must also wear a facial covering when coming forward to receive Communion. They will lower the covering just prior to reception of the Eucharist.
8. Holy Communion may not be distributed with gloves, nor may it be received in the hand if a member of the faithful is wearing gloves.
9. However, it is strongly suggested that communicants receive in the hand. If the priest or Communion minister senses that his/her fingers have made contact with a person, he/she should pause, place the ciborium on the corporal, and use hand sanitizer. Even if, while distributing Communion to someone who receives on the tongue, the minister does not come in contact with the communicant's tongue, the minister must perform hand hygiene before distributing Communion to the next communicant. The minister repeats this process as often is necessary during the distribution of Holy Communion. It is not necessary, however, for the Communion minister to use hand sanitizer between each communicant who receives in the hand, unless the minister makes actual contact.
10. At the conclusion of the distribution of Holy Communion, the priest (and any other ministers) return the remaining hosts to the tabernacle, remove the small table, and then perform hand hygiene (e.g., with hand sanitizer).
11. The manner of dismissal must be considered prior to sending the assembly forth so that appropriate physical distancing can be maintained.

## **Weddings**

1. Follow the *General Guidelines for Mass* beginning on page 5.
2. The physical greeting of friends and family at the entrance of church by the clergy is prohibited.
3. If a bride wishes to use the center aisle for the entrance procession, 6 feet of physical distancing must be observed in regard to those seated in pews.

## **Funerals**

1. Follow the *General Guidelines for Mass* procedures beginning on page 5.
2. The physical greeting of friends and family at the entrance of church by the clergy is prohibited.
3. The casket is placed near the sanctuary prior to the start of Mass
4. Graveside services that abide by the current restrictions limiting the number of people to be gathered must be observed. This includes personnel from the funeral home.



5. Participants at graveside services must wear facial coverings throughout the service and physical distance requirements must be observed. The priest or deacon need not wear a facial covering when presiding at liturgy.

## **VI. Churches/Chapels Open for Private Prayer/Adoration**

In Phase I, churches and chapels may be open for personal prayer and adoration, always maintaining the State restriction on the number of people to be gathered. It is not advisable to limit the hours of visitation, as that might cause a large number of people to gather at the same time, thus making it difficult to manage the restrictions. If a church also has a separate chapel, the Pastor should determine which would be more appropriate to use for visitation. For example, a chapel should not be used if it is too small to maintain physical distancing or if the space has surfaces that are difficult to sanitize (carpet, cushions, etc.). The following additional guidelines are to be observed during periods of private prayer and adoration:

### **Personal Prayer**

1. A parish staff member or volunteer should be stationed at the front door while the church is open to ensure that no more than the allowed number of people are present inside the church/chapel at one time and that everyone is seated according to physical distancing guidelines.
2. After each visitor leaves, staff/volunteers will sanitize that area of the pew.
3. Doorknobs and other high-traffic areas of the church should be frequently sanitized.

### **Adoration**

1. Exposition, Adoration, and Benediction of the Blessed Sacrament may be offered to the faithful.
2. The scheduled timeframe for exposition should be long enough (several hours) to prevent a large crowd from gathering at one time.
3. The assigned staff/volunteers should always maintain the gathering limit in the church/chapel and ensure that the faithful are seated according to physical distancing requirements.
4. If possible, the Priest/Deacon should expose/repose the Blessed Sacrament without the assistance of altar servers to observe proper physical distance and to prevent the need for multiple people handling surfaces. Instead, a thurible stand and boat with incense can be placed near the front of the altar so that the Priest/Deacon has access to the thurible if being used. The same would apply for a humeral veil for Benediction, allowing the Priest/Deacon to put it on and take it off without assistance.
5. The Priest/Deacon should not use the center aisle to process/recess, but instead should enter the sanctuary from the sacristy.
6. Any liturgical ministers (including Priest, Deacon, altar server, organist, etc.) are to be included in the overall count of those gathered.
7. At the conclusion of Adoration, the staff member/volunteer should ensure the faithful maintain physical distancing while exiting the church. The church door should be propped/ held open so that the faithful do not need to touch the door.



## VII. Sacraments

### Sacrament of Reconciliation

In Phase I, both outdoor and indoor confessions are allowed.

#### General Guidelines

1. Given the Catholic Church's norms for Confession, the priest must be physically present to the penitent and must be able to hear the penitent without the aid of electronic devices (that is, independently of a wired phone, a mobile phone, an intercom, or other audio or video transmitting device). As always, the priest should take great care to ensure that the conversation with the penitent remains confidential.
2. Facial coverings for the penitent and the priest must be worn at all times.
3. A parish staff member or a volunteer should be stationed at the entrance of the church building for indoor confessions or at the beginning of the car lane for outdoor confessions in order to provide instructions and to ensure order and appropriate privacy. Note: to allow for anonymity, "sign-ups" for Confession times should not be required.

#### Confessions in a Church

1. Individual confessionals or reconciliation rooms must not be used, as neither allows for safe physical distancing and it requires the use of high-touch surfaces by the Penitent. It is advised that a room, such as a sacristy or church hall, be used so that access is possible without having to touch anything and privacy may be maintained.
2. A 6-foot distance between the priest and penitent must be maintained at all times.
3. The restriction on the number of people to be gathered in the church at any one time, including the priest and staff member/volunteer, must be adhered to at all times.
4. It is advisable to set up a zone where the faithful can wait in line while maintaining a 6-foot distance from others. Floors should be marked to indicate the required distance.
5. The parish should offer the option of face-to-face and anonymous confessions for the penitents. Two chairs are to be placed 6 feet apart facing each other and a screen with a kneeler is to be placed 6 feet to the left or right of the priest.

#### Outdoor/"Drive-up" Confessions

1. The priest may either be seated at a designated location, such as a curb, or be in his own car facing the opposite direction of the penitent's car, always maintaining at least 6 feet of distance from the other vehicle.
2. The limit of one person per vehicle must be observed while the Confession is taking place in order to ensure the Seal of Confession.
3. Alternative suggestion: Penitents could wait in their cars until their turn to confess. The priest could sit inside an open doorway fitted with a makeshift screen (e.g., a sheet hanging in the doorway), with a chair for the penitent outside the door, 6 feet away. Once the penitent gets back in his/her car, the next person can approach the chair.
4. Facial coverings are to be worn at all times by both priest and penitent.

## **Baptism**

In Phase I, the Sacrament of Baptism is allowed outside of Mass and for one family at a time. The directives for physical distancing and restrictions on the number of people gathered must be observed. The following additional guidelines are to be followed:

1. Everyone is to wear a facial covering, including the minister of the Sacrament. (Children under two years old do not wear face coverings.)
2. The floor around the baptismal font should be marked with removable tape so that people are standing at least 6 feet apart during the Sacrament.
3. Only fresh water is to be used for each baptism. In addition, the baptismal font should be fitted with a glass or metal bowl so that the blessed water may be removed after each baptism.
4. A shell or other vessel is to be used to pour water over the infant's head instead of the Priest's or Deacon's hand.
5. For anointing, a cotton ball or swab should be used to apply the oil to the infant so that there is no physical contact between the minister and the infant.
6. In order to limit the handling of certain items by multiple people, the Godparent (or whomever will hold the baptismal candle) should pick up the baptismal candle and light it from the Paschal candle. This will prevent the minister from having to hand it directly to that person.
7. When the celebration concludes, the blessed water should be poured down the sacrarium or into the ground on church property if there is no sacrarium, the cotton should be burned, the shell or vessel, baptismal font, door handles, bathrooms, and any area that was in use should be thoroughly cleaned and sanitized.

## **Anointing of the Sick/Viaticum**

Priests have a sacred calling to be attentive to the needs of the sick and dying. During this Coronavirus pandemic, this must be done in an especially thoughtful, safe, and prayerful manner. In Phase I, the guidelines for the Pastoral Care to the Sick and Dying that were enacted March 26, 2020, will remain unchanged and are to be followed.

## **General Approach**

1. Pastoral Care of the Sick should be limited to those who are dying, those about to undergo serious surgery, and those with COVID-19 who request the Sacraments.
2. Communion shall not be distributed to any other parishioner who is homebound or who cannot attend Mass.
  - Priests are asked to find other ways of comforting and praying with the homebound, such as praying together by phone.
  - "Acts of Spiritual Communion" should be made widely available through parish websites and other such means.
3. Deacons and lay volunteers should not be visiting the sick in any official capacity.

## Specific Guidance

Having received best practice recommendations of health care professionals, the Archdiocese has established the following directives for priests providing sacramental ministry during this time of the COVID-19 (Coronavirus) outbreak.

1. For priests providing ministry to persons known to be carriers of COVID-19, the following restrictions apply for those who can fulfill this ministry:
  - No priest in the high-risk group.
  - No priest with comorbidity; i.e., when two or more chronic illnesses are present. For example, hypertension, diabetes, Crohn's disease, any cancers, rheumatoid arthritis, asthma, COPD, heart disease.
2. These restrictions follow the healthcare guidance that indicate younger, healthier individuals are at a much-diminished risk of contracting a serious case of COVID-19.
3. Consideration of the current living situation of young priests should also be a factor before a decision is made for an individual priest to engage in this ministry.

## For Those Suffering from COVID-19

1. If Anointing of the Sick is performed in a hospital or healthcare facility, the guidelines for protective measures, including garments, prevail. Please ask the facility for any written guidance in advance, if available.
2. At this time, if persons with COVID-19 are outside a hospital or healthcare facility, remote pastoral care, through the telephone, etc. should be given *UNLESS the person is in danger of death*. If a priest visits this person, the following protocol is to be followed:
  - i. If available, latex gloves should be worn unless the patient or priest has an allergic sensitivity to latex;
  - ii. Additionally, if available, protective eyewear (a pair of glasses will suffice) should be worn;
  - iii. Eyeglasses or goggles or eye protectors can be re-used BUT MUST be cleaned immediately after each visit with Lysol/Clorox wipes or washed with soap and water; and
  - iv. If possible, the patient should also wear a facial covering to prevent possible spread of disease.
3. The anointing must be done with a cotton-tipped swab or a cotton ball that is to be burned or buried after use and may be applied to *any part of the body*.
4. If the priest uses his gloved hand, the glove is to be burned or buried after the visit.
5. If Holy Communion is given, it is only to be distributed in the hand.
6. Maintain physical distance (6 feet) with everyone in the room, except the patient who should wear a facial covering, if possible.
7. Avoid physical contact while offering comfort to the patient.
8. Immediately after the visit, the priest must seek the guidance of a physician regarding whether he must self-quarantine. CDC guidance should also be consulted in these situations.

## For Those NOT Suffering From COVID-19

1. Persons who have *not tested positive* for COVID-19 and are not in any immediate danger of dying should first be contacted by phone or other electronic means, if possible, so the person and his/her family can receive appropriate pastoral care and support. This approach is guided by an abundance of caution to avoid the priest unknowingly bringing COVID-19 to an already compromised person.
2. If it is determined that a priest must visit a person who is *not* a carrier of COVID-19, the following directives apply for clergy providing Holy Communion to the Sick and Homebound.
3. The priest should prudently weigh the risks to himself, the community, the patient and his/her family before proceeding.
4. It is urgently recommended that these visits be *limited to those persons in danger of death only*, until current restrictions are lifted.
5. If the anointing is provided in a hospital or other healthcare facility, the guidelines for protective measures, including the wearing of garments, prevail. Please ask the facility for any written guidance in advance, if available.
6. If *not* provided in a hospital or other healthcare facility:
  - Latex gloves should be worn, unless the patient or priest has an allergic sensitivity to latex;
  - Protective eyewear (a pair of glasses will suffice) should be worn. Eyeglasses, goggles, or eye protectors can be re-used BUT MUST be cleaned immediately after each visit with Lysol/Clorox wipes or washed with soap and water.
  - If the sacramental ministry is provided in a home, priests should:
    - Wash hands or use hand sanitizer upon entering the home;
    - Avoid any physical contact with the person or family during the visit;
    - Use hand sanitizer again before distributing Communion;
    - Strongly encourage the patient to receive Communion in the hand, not the tongue;
    - Maintain physical distance (6 feet) with everyone in the room, except the patient; and
    - Avoid physical contact while offering comfort the patient.



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## **PART 2**

# **Guidelines for the Resumption of Parish Ministries**

- I. Overview
- II. General Directives – Phase I
- III. Moving Forward – Phases II and III
- IV. Monitoring Conditions in the Community

## **I. Overview**

During this period of closure due to the COVID-19 pandemic, ministries in parishes have either had to be discontinued or have transitioned to a distance-based model. A few essential ministries, such as food pantries, have continued to operate with the implementation of safety precautions, such as adherence to physical distancing requirements and the use of personal protective equipment (PPEs). With the resumption of some parish ministries in Phase I, it is essential parishes continue to follow the guidance from health and government officials to ensure the safety of those who will administer and participate in parish-based ministries.

## **II. General Directives**

In Phase I, in-person meetings related to parish-based ministries will still not be permitted and ministries must continue to operate remotely, with the following exceptions:

- Personal meetings required to be conducted in-person strictly for individuals involved in the preparation of the sacraments of baptisms and weddings in anticipation of future sacramental celebrations. In-person meetings to plan a funeral, if deemed necessary by the pastor or other clergyman.
- Small group gatherings which cannot otherwise be conducted remotely.

Each of the above exemptions are subject to meeting a number of conditions prior to taking place.

### **Personal Meetings**

For purposes of this guidance document, personal meetings are defined as meetings required to be conducted in-person strictly for individuals involved in the instruction and preparation of the sacraments of baptisms and weddings in anticipation of future sacramental celebrations. In-person meetings to plan a funeral service are permitted if, in the judgement of the pastor or his designee, such meetings are warranted.

These meetings are permitted during Phase I only if all of the following conditions are met:

- They are necessitated by extenuating circumstances for those individuals involved or if they are a specific requirement of the sacramental instruction.
- The number of those in attendance does not exceed the limit established by the State of Maryland.
- Those participating in the meeting observe physical distancing requirements at all times while on church property.
- Personal protective equipment (PPE), such as facial coverings, is strongly encouraged, particularly if there is concern about adherence to physical distancing guidelines.
- Prior to the start of the meeting, the host of the meeting ensures that the room has been properly sanitized, is properly ventilated and all other health and safety precautions are in place.
- If any participant of the planned meeting is experiencing flu-like symptoms or if a participant is considered to be in an “at-risk” category, the meeting host asks that the meeting take place remotely.
- Access to personal hygiene products, such as hand sanitizers, and to facilities for hand washing must be readily available

## **Small Group Gatherings**

Pastors may permit the gathering of “small groups” during Phase I under all of the following conditions:

- If it is not possible to conduct such gatherings remotely.
- The number of attendees (including clergy/staff) does not exceed the limit permitted by the State of Maryland.
- Physical distancing is observed at all times. Such groups must be comprised only of individuals able to responsibly adhere to physical distancing requirements.
- Personal protective equipment (PPE) is strongly encouraged, particularly if there is concern about adherence to physical distancing requirements. Such groups must be comprised only of individuals able to responsibly adhere to use of personal protective equipment.
- Prior to hosting the small group gatherings, the host ensures that the room has been properly sanitized, is properly ventilated and all other health and safety precautions are in place.
- If any participant of the small group gathering is experiencing flu-like symptoms or if a participant is considered to be in an “at-risk” category, the host asks that the gathering take place remotely.
- Access to personal hygiene products, such as hand sanitizers, and to facilities for hand washing must be readily available
- The nature of all activities needs to be considered low-risk for potentially spreading the virus. Activities that require little movement and are conducive to maintaining physical distancing are ideal.

The above guidance applies to all such gatherings, whether they occur indoors or outdoors. Parishes are encouraged to host group gatherings outdoors whenever possible during Phase I. All small group gatherings or related activities occurring on church property require the permission of the Pastor. Permission is not to be extended by Pastors to parish ministries for the hosting of small gatherings or other such activities in individual’s home or at other sites off of parish property. Parishes need to ensure that any permission extended under this provision is understood to apply to all parish ministries during Phase I.

## **III. Moving Forward**

As parishes move through Phase I and ultimately onto Phases II and III, there will be opportunities to continually expand the means by which a parish can carry out ministries in person, as well as the number of those allowed to participate. The order in which ministries can begin to be delivered in person will be determined based upon the “risk characteristics” of each ministry. Just as the State has attempted to categorize businesses based upon an objective set of criteria to develop a “risk profile,” parishes should likewise assess the risks associated with conducting each parish ministry.

In preparation for Phases II and III, a risk matrix will be provided to parishes to assist in assessing the “risk profile” for each ministry. Examples of criteria to include in the assessment of a ministry include the age of the participants, the likely number of participants, the nature of the activities, the ability of the ministry to be offered remotely and other applicable considerations.

By building a risk profile for each ministry, along with guidance as to which classification of ministries should be resumed during each phase, a parish will be better positioned to determine



which ministries can be safely resumed on campus. As each parish works through this process it is essential the parish continually comply with all related health and governmental directives. Resuming higher risk ministries too soon could result in an increase in the spread of illness and thus delay the progression to future phases.

#### **IV. Monitoring Conditions in the Community**

In addition to closely monitoring the well-being of parishioners, it is important that as parishes work through the process of returning ministries to in-person meetings and activities, the parish must also closely monitor the community at-large. Considerations such as an outbreak at a business in town, the community hospital operating at full capacity or the lack of basic needs being met in a community, may necessitate a parish delaying the resumption of some ministries until such time as the community has reached an improved level of recovery.



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## **PART 3**

# **Guidelines for the Resumption of Parish Operations**

- I. Overview
- II. General Directives
- III. Primary Objectives
- IV. Staffing Considerations
- V. Amended Administrative Policies and Procedures
- VI. Preparing the Facilities

## **I. Overview**

Part 3 of this document refers to the necessary administrative processes that must be followed during Phase I.

## **II. General Directives**

As each parish reviews and evaluates the guidance in this Phase I document, it is understood that parishes may advance through the implementation process at different paces. Parishes may also determine that certain recommendations or steps outlined in this document may not be applicable, due to the size or layout of the parish, the size of the staff or other considerations. For this reason, parishes are advised to review the enclosed protocols and apply the underlying standards when implementing them in their unique parish setting.

The decisions and directions a parish takes preparing for and moving through Phase I will help to prepare it for successful progression into future phases. Implementation of the protocols may change over time given factors such as the amount of activity at the parish, the anticipated increase in the number of employees and eventually the number of worshippers on campus, and the involvement of volunteers able to become involved in parish activities. It is advised that each parish review the protocols and establish a plan for implementation based on its unique circumstances. Please consult an Archdiocesan representative should help be needed in this important process. .

## **III. Primary Objectives**

To establish effective operations plan, a parish must first identify the primary objectives which must be achieved during Phase I. When identifying these objectives, it is critical to remain mindful of the need to adhere to all Federal, State and Local governmental and public health directives to ensure the safety of all members of the community. Thus, the primary objectives include:

- Sustaining the minimal operations that were permitted during the closure;
- Expanding the scope of additional administrative tasks to begin the process of returning the parish to normalized operations;
- Supporting the implementation and execution of liturgical and sacramental activities which will resume during Phase I;
- Establishing policies and procedures specific to the parish that address modifications or changes in work processes and office layout necessary to limit the potential spread of the virus; and
- Returning facility systems and equipment to full function.

At the discretion of the Pastor, parish offices may reopen to the public during Phase I. When making this determination, Pastors must first determine those functions which are essential and necessary, and which can only be carried out with person-to-person contact with members of the public. Many parishes have already developed remote or electronic solutions for functions such as receiving donations for Mass intentions and distributing Mass cards, gift-card programs, etc. However, for those parishes that determine there is a need to open offices to the public, consideration should be given to limiting hours, requiring appointments, or a combination of both. Finally, protocols for accessing the parish office should be communicated to staff and parishioners using such tools as email, website and signage.

## **Minimal Operations/Expansion of Administrative Operations**

Under the State of Maryland’s “shelter-in-place” order, each parish was required to close its offices to the public, while allowing on site those staff members who perform duties necessary to maintain “minimal operations,” such as:

- i. Facilitating remote working (e.g., telework) by other staff;
- ii. Maintaining essential property;
- iii. Preventing loss of or damage to property, including without limitation, preventing spoilage of perishable inventory; and
- iv. Performing essential administrative functions, including without limitation, picking up mail and processing payroll.

As parishes move forward with expanding administrative functions, it is critical that the “minimal operations” continue to be completed during Phase I. Additionally, the return of staff on site or extending the hours of those already working on site, must conform with Federal, State or Local health guidelines. Each parish must then address any outstanding administrative tasks and ensure they are fulfilled.

## **Implementation and Execution of Liturgical and Sacramental Activities**

The second core objective to be included in Phase I is ensuring the availability of sufficient staff to assist with the administration of the sacraments and liturgical activities to be reinstated. As outlined in the Part 1 of this guidance document, several specific administrative tasks in support of resumption of the sacramental and liturgical activities are noted.

## **Establishing Modified Policies and Procedures**

Each parish should establish revised policies and procedures that identify scheduling modifications and other changes in work processes that limit the potential spread of the virus. In addition to the establishment of such policies, it is critical that parish leadership ensure staff members and volunteers receive training in and demonstrate correct implementation of all new policies and procedures.

Establishing these policies will be important in setting expectations. From the employee’s perspective, if policies have been adjusted during the period of office closure – for example, work from home – this may be viewed by them as the “new norm.” Parishes should revisit relevant policies and determine the right approach for transitioning back to the physical workplace. As always, communication is key to establishing a climate of understanding and compliance.

## **Preparing the Facilities**

If some or all of the buildings on campus have been shuttered during this period of closure, it is critical that staff and, if needed, appropriate vendors, complete a number of pre-return checks, tasks and assessments to ensure a healthy and safe environment as the parish prepares to welcome employees back into the office. Not all of the items below will be applicable for every building. Rather, use your or your contractors’ specific knowledge of your buildings to prepare for the workforce to return. As you work through this process of completing these checks and verification of systems, worker safety must be of paramount importance.

## IV. Staffing Considerations

### Identifying Who Should Return, and When

Once a parish has completed the assessment of primary objectives and reviewed the resources needed to reestablish sacramental and liturgical practices, the parish should move forward with assessing its staff and determining which employees should return to work during Phase I. The process of determining which employees should return to work on site and when they should do so must be continually assessed by parish leaders based on changing needs and conditions. Staffing needs will change throughout the phases of recovery, as will the level of administrative activity at the parish. It is essential that the staffing on campus be kept to the minimum number of employees needed to perform required duties. Where feasible, employees who can continue to work remotely should be allowed to do so. When possible, parishes should consider having two or more teams or groupings of employees working on site on an alternating basis. For example, if a parish has individuals serving in similar roles (finance, facilities, etc.), it is recommended that they consider dividing those individuals into two teams that maintain different on-site work hours. If a member of one of the teams becomes infected with the virus, a parish will be in a position to have a second team available to manage the administration of the parish until the members of the other team or group are evaluated and cleared to return to work. Regardless of approach, the ultimate goal is to ensure the appropriate level of staffing to carry out the necessary duties of the parish while not compromising the parish's ability to ensure a safe and healthy working environment predicated on physical distancing and other such safeguards.

### Pre-screening the Chosen Associates

After the parish has identified the appropriate level of on-site staffing during Phase I, pastors are encouraged to communicate with each employee prior to their return to work. This is a critical step, as it is possible that during the closure the employee may have experienced a change in his/her life or family situation which may affect his/her ability or willingness to return at the designated time. With the many changes in employment law as a result of COVID-19, it is critical that this one-on-one discussion occurs. Communication with each employee will also help to reduce anxiety by assuring your colleague of the desire for a safe and healthy work environment.

Employees of the parish are likely to fall into one of the following six categories:

1. COVID-19 Positive;
2. Wishes to/ work remotely and the job allows them to continue to do so;
3. At risk of serious illness due to underlying medical conditions or age;
4. Childcare or family care considerations;
5. Concern and anxiety preventing from returning;
6. Those who can and will return to work.

While speaking with an employee, if it is determined that his/her current circumstances places them in one of the first five categories, the parish must document the information, and advise the employee the information will be reviewed before a decision is made regarding how to proceed. The parish needs to contact the Archdiocese's Department of Human Resources for guidance (see the "Human Resources" section on page 27). Under no circumstances should the parish take any form of employment action against an employee who falls into any of the above five categories or who for other reasons cannot or will not return to work, without first discussing the matter with Human Resources.

If it is determined the associate can continue to work remotely during Phase I, this should be documented in writing with the employee. While this employee may be given permission to work from home, it is important to share with him/her all information related to training on any newly established policy and procedures. This ensures that when the employee is in the office, he/she is aware of the revised policies and procedures and adheres to them.

For those employees who are needed by the parish to return to work on site and are ready and able to return to work, an agreed-upon date and time for their return should be established. It is also essential that the employee be advised of any policy or procedural changes that would impact their return, such as requiring entry through a particular set of doors or having health screenings in place. It is recommended that a communication be developed and shared with all employees advising them of new policies, protocols and other information to ensure compliance, promote safety and alleviate anxiety and confusion.

Employees who are not required to return to the parish during Phase I and are not able to perform their duties remotely, should be kept informed of their employment status. Depending on the duration of Phase I, the frequency and number of such updates will vary. The goal of such communications is to ensure employees in this category are aware of their status and what must occur before they will be notified to return to work on site.

### **Employee Training – The “New Normal”**

It is important to remember that the process of reopening the parish for business will require a period of transition and adjustment for some employees. It is also a time of other stressors related to the pandemic, including the financial impact to families and individuals. As well, it has created anxiety about the uncertainty of the future, including whether the virus will return or if a vaccine will be in place to prevent another wave of infections. Based upon these numerous stressors, it is critical that the parish make every effort to provide training for each employee regarding changes in procedures necessary for the prevention of the spread of the virus, as well as to provide any necessary refreshers on existing policies and procedures. Expectations need to be made clear regarding adherence to changed/new policies and procedures necessary for the safe return to the workplace.

## **V. Amended Administrative Policies and Procedures**

To ensure maximum compliance with best practices aimed at reducing the spread of COVID-19 in a parish setting, it is expected that each Pastor will review the following measures, evaluate their applicability to the parish’s unique setting and then develop specific policies and procedures for adaption on the parish campus.

### **Access**

Limiting access to a parish facility by visitors, guests, vendors and others is critical to limiting the spread of the virus.

- Restrict access to only certain workplace areas
- Limit the number of entrances (but maintaining code compliance) and direct occupants to use monitored and protected routes

## Hygiene Practices

Encourage and enable staff to engage in good personal hygiene and infection control practices while at work. While good personal hygiene has always been a desirable quality, with the introduction of COVID-19, strong personal hygiene is now part of ensuring the health and well-being of the parish community, as well as ensuring a parish's ability to continue to remain open for operations. Such practices include, but are not limited to the following:

- Recommended use of Personal Protective Equipment (PPE) while in the building;
- Provide PPE, if available;
- Encourage respiratory etiquette (including covering coughs and sneezes) and turn away from others when coughing or sneezing;
- Promote frequent and thorough hand-washing;
- Provide separate waste bins for the disposal of PPE;
- Make hand sanitizers available in multiple locations adjacent to common touchpoints, as well as in lobbies, near elevators and stairs;
- Provide disposable wipes so that common touchpoints (e.g., doorknobs, light switches, desks, desktop peripherals, remote controls and more) can be disinfected by employees before each use;
- Discourage the use or borrowing of other people's phones, desks, offices or equipment;
- Creating and posting guidelines for desk and equipment sharing, disinfecting and use;
- Removing shared keyboards and mice;
- Provide areas for storing personal items in the workplace;
- Utilize signage to encourage and remind staff and others of good personal hygiene;
- Consider acrylic dividers between service provider and users;
- Offer pre-packaged foods only;
- Continuously monitor and review existing cleaning guidelines and adjust or enhance as needed for cleaning paths of travel and high touch areas;
- Review elevator cleaning processes, and updates to ensure ongoing cleaning of high-touch surfaces such as elevator panels/buttons;
- Remind and encourage staff of the importance of shared responsibility for the health of all employees;
- Sanitize floor mats;
- Disposable sticker security tags rather than recycled clips or lanyards;
- Disable/decommission/remove registration kiosks/touchscreens;
- Implement a strict clean-desk policy so that non-essential items are not stored on the desk, but rather enclosed in cabinets or drawers;
- If desks or work areas are shared, advise individuals to sanitize all surfaces upon arrival at that seat. Supply disinfectants in the immediate proximity (or on each desk).



## **Physical Distancing**

Physical distancing is another key response and practice to curtail the possible spread of COVID-19 within a parish. Physical distancing is generally defined as maintaining a six-foot distance between oneself and others. According to the CDC one should also avoid exposure to another individual who lives outside of the same household for no more than 10-15 minutes. This means, incidental passing of or coming within close contact for less than 10-15 minutes still maintains the physical distancing standards. The following suggestions are provided to assist your parish in maintaining adequate distancing.

- For large facilities, determine a method for conducting regular counts of occupants per floor;
- Designate and signpost the direction of foot traffic in main circulation paths: corridors, stairs, and entries;
- Consider one-way circulation routes through the workplace;
- Mark six-foot increments on floors where queues could form;
- Only use alternate desks (checkerboard); disable the use of alternate desks; or remove alternate desks altogether;
- Add desks to spaces previously used for group activities (convert training/meeting rooms, café area and the like into desk areas);
- Increase space between desks;
- Add panels between desks including height adjustable panels for sit/stand desks;
- Specify seat assignments for employees to ensure minimum work distances;
- Establish limitations on the use of elevators, conference rooms and, if needed, decommission and repurpose large gathering spaces;
- Reduce capacity of spaces – e.g., remove some chairs from large meeting rooms;
- Prohibit shared use of small rooms by groups and convert to single-occupant use only;
- Close/forbid use of some rooms;
- Limit the number of attendees at in-person meetings and limit to spaces that accommodate safe distances;
- Host large team/staff meetings via video conference rather than in-person;
- Reconfigure visitor registration systems to avoid guests leaning over receptionists;
- Provide glass screens or transparent panels between guests and reception personnel;
- Touchless registration via personal mobile phone;
- Install signage at multiple, relevant locations in the entry sequence;
- Explain building access rules and other protocols that affect how occupants use and move throughout the building;
- Use signage or floor markings to direct foot traffic and ensure safe physical distancing;

- Explain new rules or protocols for common areas and casual gathering spaces;
- Signage inside elevator cars displaying healthy elevator use protocols – this may include floor stickers/tape to establish distancing zones and describe where and how to stand;
- Utilize the workplace arrival area to reinforce messages, new policies and protocols.

### **Frequently Touched Surfaces**

In addition to strong personal hygiene it is also critical that the facilities are kept clean and that proper sanitization is consistently and frequently completed. This is particularly important for those surfaces that are considered frequent or high-touch surfaces. The following suggestions are provided to assist with both ensuring proper sanitization as well as means to reduce the number of high or frequent touch points. For those recommendations that include eliminating touch points such as removal of doors or keeping doors opened or propped, such actions should not jeopardize the level of security and safety within the parish facilities.

- Affix signage to remind occupants to keep switches “on” all day;
- Install movement detectors to activate light switches – consider voice-activated controls;
- Remove non-essential doors;
- Remove door handles if viable;
- Affix doors in an open position;
- Disable/decommission room reservation panels outside meeting rooms;
- Remove shared conference phones and encourage the use of personal mobile phones or laptop softphones for teleconferences;
- Remove whiteboard pens and erasers and encourage individuals to bring and manage their own;
- Provide whiteboard cleaning solution and disposable wipes adjacent to every board;
- Remove remote-control handsets and provide instructions for manual equipment use instead;
- Remove unnecessary fabric upholstered chairs;
- Affix notices to each chair reminding occupants to avoid or disinfect touchpoints;
- Reduce the quantity of printers and copiers to dissuade printing.

### **Supplies storage**

Given the necessity of keeping supplies on hand at the parish, it essential that supplies are carefully monitored. Secure supply storage and designate specific personnel to order, stock and distribute items.

### **Storage**

Consideration should be given to allowing for storage of personal items in separate areas. Closets and coat rooms should not be used.

- Add places for individuals to store and secure their own items separately from others (i.e., individual coat hooks rather than coat closets used by the group).

## **Deliveries**

Incoming mail and packages must be handled with care and consideration given to the possibility that packaging could be carrying the virus.

- Designate one location for any deliveries to the building/space and disinfect items centrally;
- Assign delivery management and sanitizing as a task to specific employees only;
- Require personnel handling mail and parcels to wear PPE to receive parcels, mail and other deliveries, and train them in the proper use and disposal of PPE;
- Sanitize the exterior of packaging;
- If appropriate, remove items from boxes and appropriately discard the packaging.

## **Ventilation**

While the issue of mechanical ventilation is covered extensively in the facility portion of this guidance document, it is extremely important that where possible employees be allowed to generate fresh air flow either via open windows or keeping interior doors open. While generating additional fresh air flow in the building, attention still needs to be given to ensuring adequate safety in the building.

## **Travel Policy**

Each parish needs to establish and communicate the travel policy for employees. During Phase I, the only travel allowed is for associates to travel locally to acquire supplies and materials for the parish. Otherwise, travel is to be curtailed until Phase III.

## **Daily Wellness Screenings**

Parishes need to evaluate and implement the most effective process for daily wellness screening. This process could change as the number of employees and others begin to access the building during Phases II and III. Methods of screenings can include posting of signage reminding employees and visitors (as permitted during applicable Phases) if they are feeling ill, have been exposed to someone with COVID-19 or recently traveled to a “hot spot” for COVID-19, they are not to enter the building. Parishes can also conduct questionnaires with each individual as they arrive asking the same set of questions as noted above. Finally, parishes can consider having an employee at the entrance who is assigned to take the temperature of those seeking to enter the building. If this process is selected, be certain to provide the employee conducting the screening with proper training and PPE.

## **Visitors**

In order to limit the potential of having the virus introduced in the parish, a visitor policy should be implemented. During Phase I, visitors should be restricted, with limited exceptions. If a parish has elected to reopen to the public, a member of the public who is coming into the office to address a transaction or some other limited basis should be allowed in the building. However, the visitor should only be allowed access to the lobby or entrance area. Additionally, as noted in Part 2, meetings of small groups and other such gatherings may be allowed. These individuals should also be allowed in the building because they are considered as having a scheduled appointment.

## **COVID-19 Exposure Response Plan**

While parishes are allowed to begin the gradual reopening process, this does not mean more COVID-19 cases may not occur. For this reason, each parish is to have communication and escalation protocols outlining the management and decision-making processes of all stakeholders involved in response to potential COVID-19 exposures. To assist parishes in developing this plan the following guidance is provided.

### **Employees with a fever or exhibiting COVID-19 symptoms**

Will not be allowed re-entry and will be sent home or told to stay home. For this category of employees there are two re-entry OPTIONS:

Allow return once fever is resolved without the use of fever-reducing medications, **and** there is improvement in respiratory symptoms (e.g., cough, shortness of breath), **and** there are negative results of an FDA-authorized test for COVID-19 provided to the parish;

OR

At least three days (72 hours) have passed since recovery, i.e., the resolution of fever without the use of fever-reducing medications, **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**, at least seven days have passed since symptoms first appeared.

*NOTE: Those with FDA approved test-confirmed COVID-19 who have not had any symptoms should be excluded from work until 10 days have passed since the date of their first positive COVID-19 viral test.*

### **Employees with an ill family member, and employees in close contact with someone diagnosed with COVID-19**

These employees will not be allowed re-entry and will be sent home or told to stay home and required to work remotely until 14 days have passed.

### **Employees who have recovered from COVID-19**

Will be allowed re-entry only upon providing documentation from a medical practitioner that they are fully recovered from the virus.

### **Attendance**

In order to properly evaluate and remain apprised as to the health of the parish staff, it is important each parish implement a policy for reporting illnesses. If the individual responsible for managing the reporting of illnesses begins to notice any trends or concerns that would indicate a possible outbreak of COVID-19 at the parish, immediate action is to be taken to address this issue and address the health of all staff members. Parishes also need to be familiar with the policies and procedures of the local county health department for the required reporting of suspected COVID-19 cases or exposures.

## **Human Resources**

As referenced earlier in Part 3, the parish needs to place a priority on taking care of its employees. Managers should ensure that proper support is provided to those employees who are returning to work, including documentation of training on hygiene, social distancing, screening and scheduling. Also, each parish needs to monitor employees and ensure if counseling/emotional support appear appropriate and remind employees of the assistance available through the Employee Assistance Program. Active communication with employees will assist in alleviating many concerns.

As a parish moves through the phases of reopening, it may become necessary to evaluate a possible staffing decision. Managers considering staffing changes should consult with Human Resources before initiating any negative staffing actions, and fully consider the following before deciding a course of staffing action:

- i. The impact of staffing actions on the Paycheck Protection Program
- ii. Ensure that there is no discrimination in decisions
- iii. When converting Furloughs to Terminations:
  1. Good business reasons must be the basis
  2. Strive for equity of treatment, if possible
  3. Consider providing severance
  4. Communicate well to the affected employee(s)

During this transition, it is also appropriate that parishes remain mindful of those employees who are in at-risk groups or have parent/caregiver or childcare issues created by the impact of the pandemic.

## **Technology Recovery**

If as part of the remote work process, associates were issued laptops, printers or other parish-owned equipment, the parish must implement a policy for the collection of the equipment. It is also permissible for the parish to allow the equipment to remain in the custody of the associates if they will be permitted to continue to work from home. However, accurate records of this equipment must be maintained and if the associate separates his/her employment with the parish, this equipment must be returned as part of that separation.

## **VI. Preparing the Building Structure**

During Phase I of reopening, the development of protocols for parish facilities should include starting up systems as needed, conducting an assessment of all systems to ensure they are operating properly, evaluating the facilities to make modifications as feasible to layout and operations of the facility so as to reduce the opportunities for the virus to be spread and verifying adequate cleaning procedures and supplies on hand to meet the present and future needs of the staff and facility.

### **Cleaning Procedures and Supplies (see cleaning guidelines on page 29)**

- Review site inventory of cleaning chemicals, materials, and consumables to ensure inventory levels are aligned with forecasted building occupancy;
- Ensure a safety data sheet is available for all chemicals and requirements for safe use are followed;

- Ensure cleaning equipment and tools are in working condition;
- In-house cleaning staff should review and complete refresher training on general cleaning and site-specific protocols;
- In-house cleaning staff must be trained on proper disinfecting guidelines;
- If contracting with an external cleaning service, be sure to verify all employees are current on the training and that they are familiar with your site-specific standards;
- Determine areas that require thorough cleaning due to heavy usage such as lobbies, conference rooms and restrooms;
- Treat all surfaces using disinfectants from government-approved or -authorized lists ensuring all chemical dwell times are adhered to.

### **Systems Assessments**

Thoroughly inspect for any damage or issues caused by the vacancy. The physical condition and operation of equipment and services supporting the building also should be assessed. The systems to be evaluated or to have evaluated include the following:

- Mechanical Systems
- Water Systems
- Chilled/condenser water: open/closed loops
- Water features
- Conveyances
- Potable water
- Fire Life Safety Systems

As you conduct this review, it is essential it is done methodically so as to prevent any damage occurring from load shed due to simultaneous start-up. The amount of time you or your contractor allows equipment to run as part of the maintenance check needs to be consistent with the length of the shutdown. It is critical to ensure valves, switches, etc. are operating correctly. Also, be sure to follow all manufacturer specific requirements for restarting system after a prolonged shutdown. For any system that could generate CO, consider testing the CO levels to ensure all systems are functioning properly.

One mechanical system of great importance in addressing and working to avoid spread of the COVID-19 is the HVAC system. Both contractors and medical experts are encouraging facility operators to examine both the appropriate filter for your system to help increase your rate of filtration, as well as increasing fresh air intake in your facilities. It is important to use a properly installed, higher-efficiency filter that can remove particles of relevant size. Caution must be used as a high-efficiency filters may have a high initial pressure drop and/or load with dust and particles accumulating very quickly, thus requiring frequent filter changes. A high-pressure drop filter (either because it is that way when it is new or because it loads quickly) can also cause more air to bypass the filter if it is not properly installed and well-sealed. *Please see the attached Mechanical Appendix, page 33, that details the review process for specific facility systems.*

## **Curtailing the Spread of COVID-19**

As part of the pre-return activity and verification of systems, it is recommended that each parish develop a COVID-19-specific workplace plan that outlines strategies and tactics to combat and/or minimize the likelihood of the spread of the virus in the workplace. Building spaces should only be declared ready for occupancy after parish leadership and facility staff are in agreement the building is ready for occupancy.

Activities to strengthen your effort to combat the COVID-19 can include but are not limited to the following:

- Turn on appliances;
- Verify all pilot lights are lit and operational;
- Verify the operation of makeup and exhaust;
- Remove and dispose of any spoiled products;
- Clean and sanitize all appliances;
- Reset pest control normal operational frequency;
- Flush toilets to fill P-trap;
- Pour water in floor drains;
- Flow sink to fill P-trap with water;
- Plug in and turn on appliances;
- Turn on supply water to appliances (coffee makers, ice makers, etc.);
- Check operation of each appliance;
- Coordinate check of food, beverage, and other items with vending machine vendor;
- Provide adequate stock of hand sanitizer, disinfectant wipes, and other such products;
- Review utilization of the facility times shifts to optimize janitorial service performed to meet the needs of the parish;
- Ensure adequate stock of paper and plastic products exists (toilet paper, paper towels, etc.).

## **Proper Cleaning Guidelines**

The COVID-19 virus is primarily transmitted via large respiratory droplets and contact transmission, meaning that when an infected persons coughs or sneezes droplets from are dispersed through the air, contacting people in the vicinity (within 3-6 feet). Additionally, the virus can land on surfaces and be transferred via surface contact, shaking hands, or sharing a drink with an infected person.

There are basic measures that can be implemented to prevent the spread of the virus. Proper and thorough cleaning of parish facilities is one of the most important preventive measures to limit the spread of the virus. Therefore, all locations should be preparing their facilities now and should maintain active prevention measures for the duration of the outbreak.



## Action Steps

1. Please see the attached list of EPA-approved cleaners for COVID-19. Follow all label instructions regarding the use of the cleaner, including safe and effective use of the cleaning product as well as precautions needed while applying the product, such as wearing gloves and having adequate ventilation during use. In general, a hospital grade sanitizer, bleach diluted at a ratio of one part bleach to 50 parts water, or agents with 70% ethanol is recommended. Select a combined cleaning/disinfecting product. One-step cleaner disinfectants ensure that surfaces can be cleaned and disinfected in one step.
2. Begin the process of cleaning/disinfecting by starting with routine cleaning tasks such as emptying trash, dusting and vacuuming. Begin the disinfecting process after your routine cleaning is complete. This minimizes cross contamination.
3. Wear gloves when cleaning/disinfecting.
4. Disinfect surfaces from high areas to low areas to remove any dirt/dust that may contain microorganisms.
5. Disinfect surfaces from “clean” areas, such as the sanctuary, to “dirty” areas, such as restrooms, to minimize cross-contamination.
6. Disinfect all frequently touched surfaces daily, including desks, cubbies, cafeteria tables, restroom stalls/stall doors, door handles, keyboards/mice, sink fixtures. Increase the cleaning of areas of high-touch to 2-3 times/day as needed. For Churches, wipe down door handles before and in between every Mass with a disinfectant. If there are other high-touch areas in the worship space, disinfect these as appropriate based on facility use.
7. When disinfecting, ensure surfaces remain visibly wet for the contact time specified on the product label. Disinfectants should not be used while children are present. Follow all manufacturers’ recommendations to ensure adequate ventilation while using.
8. Make sure that all classrooms and other gathering spaces have been disinfected prior to students and others entering. Once classes or other events have ended, wipe down all areas with disinfectant wipes intermittently until routine cleaning/disinfecting can be completed.
9. Have alcohol-based hand sanitizers located throughout all facilities in open access spaces, at entrances to churches, classrooms, cafeterias and kitchens, bathrooms, and offices.
10. Post “Cover your Cough” and handwashing posters around your facilities including common spaces in churches to provide visual cuing. Everyone knows what they “should” do, but sometimes humans forget to do basic things in situations like this. The visual cues are helpful at keeping these basic prevention measures in front of us at all times. Consider having “Fact Sheets” posted around your facility as appropriate. Some locations have traditionally posted health related information inside bathroom stalls. Please see attached documents from the CDC as examples. Parish nursing teams may be a good resource to assist with this.
11. Provide tissues for people to use when coughing or sneezing. Provide lined, covered trash receptacles for disposal and hand sanitizers near the receptacles. Everyone should disinfect with an alcohol-based sanitizer after disposing of tissues. For schools or religious education environments, remind students to throw away their tissues immediately. Do not put used or dirty tissues anywhere but in a closed trash receptacle.

- 12. Provide clear guidance and direction to the community about remaining home when ill. Current CDC guidelines recommend workers or students who have a fever and respiratory symptoms should **stay at home** until 24 hours after their fever ends (100.4 degrees Fahrenheit or lower), without the use of medication.
- 13. Remind parishioners in vulnerable populations to stay home to minimize their exposure risk.
- 14. Develop a communications plan for your location to continually update parishioners, parents, staff, and students as appropriate.

**If a person becomes ill while at your facility:**

- 1. Identify a space that can be used to separate people showing symptoms. For example, if a child takes ill while at religious education once that’s allowed, there should be a separate place for the child to go until a parent can pick up the child. Clean and disinfect immediately after the ill person leaves.
- 2. If possible, designate a specific restroom for ill people. Clean and disinfect immediately after us.
- 3. In the case of suspected or confirmed COVID-19 exposure, facilities are to contact an outside professional cleaning service that can clean and disinfect the facility. Below is a list of professional cleaners that you may select. If you have another service that you wish to use, this is acceptable as long as they are equipped to specifically clean for COVID-19.

Name of Vendor	Contact Person	Phone Number	Email
Serv-Pro	Bruce Carey	410-229-0012	bruce@sphvhc.com
Service Master	Kate Bostwick	866-780-1700	kbostwick@servicemasterofbaltimore.com
PBI		888-PBI-1988	pbiresponds@pbi1988.com

- 4. Close off all areas used by the ill person and wait as long as practical before beginning cleaning/disinfecting to minimize the exposure to respiratory droplets. Open outside doors and windows to help increase air circulation. If possible, wait 24 hours prior to cleaning/ disinfecting (CDC recommendation).
- 5. Depending on the level of exposure, there are different protocols that are based upon CDC recommendations and guidelines in the disinfection and remediation of COVID-19. Different protocols are in place based upon the different levels of exposure. When contracting with a vendor, please review the scope of work and select the protocol that matches your individual site exposure to COVID-19. If you need assistance in contracting this work, contact:

**Christin Kinman**  
 christin.kinman@archbalt.org  
 240-491-8210  
 Div. of Facilities and Real Estate

**James Dimmer,**  
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 Risk Management

**Level 1 – Proactive Cleaning – Fogging only or fogging followed by wiping. The full scope of fogging and wiping is described below:**

1. Fog areas with disinfectant that have been identified by the client as being possibly contaminated.
2. Wipe frequently touched areas (elevator buttons, handrails, doorknobs, arm rests, tables, light switches, keyboards, etc.) with disinfectant.
3. Wipe bathrooms and kitchens with disinfectant.

**Level 2 – Suspected Case of COVID-19:**

1. Fog areas with disinfectant that have been identified by the client as being possibly contaminated.
2. Wipe frequently touched areas (elevator buttons, handrails, doorknobs, arm rests, tables, light switches, keyboards, etc.) with disinfectant.
3. Wipe bathrooms and kitchens with disinfectant.
4. Wipe horizontal surfaces (tables, desks, cubicle dividers) with disinfectant.

**Level 3 – Known Case of COVID-19**

Seal off areas where the confirmed case has visited before carrying out cleaning and disinfection of the contaminated environmental surfaces

1. Fog areas with disinfectant that have been identified by the client as being possibly contaminated.
2. Open windows where able.
3. Mop hard floor surfaces with disinfectant.
4. Apply disinfectant to carpets.
5. Wipe frequently touched areas (elevator buttons, handrails, doorknobs, arm rests, tables, light switches, keyboards, etc.) with disinfectant.
6. Wipe horizontal surfaces (tables, desks, cubicle dividers) with disinfectant.
7. Wipe wall surfaces 8' and under with disinfectant.
8. Wipe bathrooms and kitchens with disinfectant

It is recommended to have the building unoccupied for a minimum of 8 hours after cleaning.

**Safety – All contractors must (at a minimum):**

1. Recognize all NIOSH and OSHA guidelines;
2. Provide and wear appropriate personal protective equipment (PPE) as required, i.e. gowns, masks, respirators, eye protection, face shields, etc.;
3. Dispose of all PPE in accordance with NIOSH; and
4. Use an EPA-registered disinfectant known to kill COVID-19.

# Mechanical Appendix

## AIR-COOLED SYSTEMS

- Clean all outdoor condenser coils.
- Clean all indoor evaporator coils with a cleaner and disinfectant.
- Check the refrigerant level.
- Inspect the drain pans and condensate drains for obstructions.
- Check outdoor fan motors and indoor blower assemblies.
- Lubricate moving parts.
- Check belts for cracking and proper tension.
- Inspect all electrical controls, wiring connections and fuses.
- Inspect and clean or replace all filters.
- Vacuum and disinfect all return-air grilles.
- Run a general system test to check for unusual noises, odors and measure indoor/outdoor temperatures and system pressures as needed.

## BUILT-UP FAN SYSTEMS

- Clean outside air dampers and check for proper operation.
- Clean evaporator coils with a cleaner and disinfectant.
- Inspect the drain pans and condensate drains for obstructions.
- Check fan motors and blower assemblies.
- Lubricate moving parts.
- Check belts for cracking and proper tension.
- Inspect all electrical controls, wiring connections and fuses.
- Inspect and clean or replace all filters.
- Vacuum and disinfect all return-air grilles.
- Run a general system test to check for unusual noises, odors and measure indoor/outdoor temperatures and system pressures as needed.

## COOLING TOWERS

- Inspect fan blades for cracks and clean.
- Remove and clean strainer in sump.
- Check gear reducer lubricant and refill with factory-recommended oil.
- Clean gear reducer sight glass and check shaft thrust and play.
- Power-wash tower hot deck and cold deck.
- Power-wash tower fill and use scale remover as needed.
- Check bottom of hot and cold decks for corrosion and rust.
- Check the condition of the fan motor through temperature or vibration analysis and compare to baseline values.
- Perform meg-ohm test motor windings.
- Change oil in gear box if needed.
- Inspect vibrations safety switch.

## AIR-COOLED CHILLERS

- Clean condenser coils and check for leaks and corrosion.
- Check controls and safety circuits for proper operation.
- Condenser fans should be cleaned, bearings need to be checked for wear and lubricated, belts and couplings need to be checked and tightness checked and adjusted.
- The electrical disconnect and contactor needs to be inspected for tightness and no pitting.
- Compressor oil should be tested for acid.
- Check oil filter and change if needed.
- Check piping and compressor for any signs of leaks and test refrigerant pressures.
- Run a general system test to check for unusual noises, odors and measure supply/return temperatures and system pressures as needed

## WATER-COOLED CHILLERS

- Check quality of condenser and chilled water chemical levels.
- Check condition of condenser water.
- Check tubes and clean if needed.
- Check refrigerant levels.
- Check refrigerant purge unit.
- Check oil heater.
- Check oil levels.
- Inspect motors and starters.
- Run a general system test to check for unusual noises, odors and measure supply/return temperatures on both condenser and chilled water and system pressures as needed.



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