

# Recommendations for a Safe Return to Worship

PROTECTING  
THE GREATER  
GOOD



## Preparation

### PLANNING

- Assign responsibility for monitoring and incorporating government orders and guidance.
- Assign responsibility for coordinating with local health authorities and law enforcement.
- Provide leaders, staff and volunteers with masks and other protective equipment to wear while serving.
- Establish protocols for physical distancing before, during and after services including seating arrangements, modified worship practices and dismissal procedures.
- Continue offering online worship options for those who are sick, higher risk, have been exposed to a coronavirus (COVID-19) patient within the last 14 days or are otherwise uncomfortable gathering in person.
- Develop isolation protocols should a staff member, volunteer or attendee become ill at your facility.
- Minimize use of printed or hand-held materials such as bulletins, hymnals, bibles and attendance pads.
- Do not share equipment used for worship services such as microphones, etc.
- Minimize areas of your building(s) being used during services and gatherings to minimize disinfecting needs.
- Block off unused areas of your building(s).
- Designate 1-in-1-out protocol for tight spaces.
- Establish frequency and processes for enhanced cleaning and disinfecting — between services at minimum.
- Develop admission criteria for worship services, noting that anyone who is ill or appears ill should plan to worship remotely.
- Postpone children's activities such as nursery/child care or implement additional safeguards.
- Discontinue playground use or implement additional safeguards and limitations.
- Postpone mission trips and summer activities such as vacation bible school (VBS).

### CRITICAL NUMBERS

- ✓ Six feet of distance = 113 square feet per person.
- ✓ The virus can live on surfaces up to seven days.
- ✓ Disinfectants may need 2-10 minutes of contact to be effective (see EPA list).
- ✓ Symptoms typically show within 7-14 days.

### BUILDING

- Conduct a thorough facility inspection/walk-through to check on the safety of your building before it is reopened.
- Restart systems and reset thermostats and lights.
- Flush hot and cold water through all points of use in your building if unoccupied for a prolonged period.
- Complete spring HVAC (professional) maintenance.
- Address overgrowth and other issues stemming from building vacancy.
- Check for any rodent/pest activity or infestations.
- Address any slip, trip and fall hazards.
- Thoroughly clean and disinfect the building and contents before reopening.
- Ensure cleaning supplies and disinfectant have been ordered and are on hand.
- Make hand sanitizer and/or hand wipes available throughout the building.
- Post signs regarding social distancing, safety measures and handwashing.

## Preparation

### SUPPLIES

- Disinfecting agents for your facility.
- Hand sanitizer for staff, volunteers and attendees.
- Masks and gloves for staff and volunteers.
- Face coverings for attendees.

### COMMUNICATION

Prior to reopening, communicate your plan via multiple channels such as email, website, newspaper, social media, phone calls, etc.

- Communicate the plan and make it available to members and non-members alike.
- Update and share details of the plan as circumstances change.
- Reinforce messaging that persons who are ill or higher risk should continue worshipping remotely.

### INSTRUCTIONAL MATERIALS

Develop on-site instructional materials such as signs or projected images to generate awareness of new protocols and procedures.

- Directions to aid the flow of people and vehicles.
- Information on physical distancing and face coverings.
- Messaging to stay home if sick.
- Importance of handwashing and hygiene practices.

### TRAINING

Train staff, leaders, ushers and volunteers on established plans and protocols for worship services and gatherings.

- Addressing high(er) risk individuals that arrive or those presenting signs of illness.
- Maintaining physical distance requirements among those who attend.
- Understanding cleaning and disinfecting procedures, as well as the supplies used.

## Implementation

### BEFORE SERVICES

- Disinfect the worship area.
- Disinfect worship materials such as microphones and music stands.
- Disinfect restrooms and other common areas.
- Replenish disinfecting and covering supplies.

### DURING SERVICES

- At entrances, prop doors open (weather permitting), apply admission criteria and provide hand sanitizer.
- Seat individuals or family units from front to back if building entrance is located rear of the worship area.
- Modify "passing the peace" or greeting time to avoid physical contact.

### AFTER SERVICES

- Dismiss attendees from closest to furthest from the exit.
- Disinfect your worship area, materials, rooms used and frequently touched items such as doors, light switches, chairs, etc.
- Provide hand sanitizer and new protective equipment (masks and gloves) to those that have post-service responsibilities such as counting offerings, etc.

### CHILDREN'S ACTIVITIES

- Disinfect activity areas and equipment before, between and after activities.
- Establish admission criteria and have parents drop children off outside the activity area.
- Plan for activities that maintain appropriate spacing.

### OFFICE OPERATIONS

- Create accountability for yourself and your co-workers regarding established protocols.
- Maintain physical distance and wear face coverings to protect each other.
- Consider having office spaces deep cleaned on a weekly basis.



# Interim Guidance for Places of Worship and Religious Services (May 22, 2020)

On April 23, 2020, Governor Cooper announced a [three-phased approach](#) to slowly lift restrictions while combatting COVID-19, protecting North Carolinians and working together to recover the economy.

This guidance provides the steps places of worship should take, and some additional guidance and preventative measures to prevent the spread of COVID-19.

**Guidelines for Places of Worship:** Any place where people gather together poses a risk for COVID-19 transmission. All entities that congregate people in an enclosed space should create and implement a plan to minimize the opportunity for COVID-19 transmission. The guidance below will help places of worship reduce the spread of COVID-19 in their communities.

If the place of worship offers child care or educational programming for children and youth, please follow CDC [guidance](#) for those settings.

## **This guidance covers the following topics:**

- Social Distancing and Minimizing Exposure
- Cloth Face Coverings
- Cleaning and Hygiene
- Monitoring for Symptoms
- Protecting Vulnerable Populations
- Combatting Misinformation
- Water and Ventilation Systems
- Additional Resources

## **Social Distancing and Minimizing Exposure**

[Social distancing](#) is a key tool to decrease the spread of COVID-19. Social distancing (“physical distancing”) means keeping space between yourself and other people outside of your home. Stay at least 6 feet (about 2 arms’ length) from other people; do not gather in groups; stay out of crowded places and avoid mass gatherings. Phase 2 includes several requirements and recommendations to support social distancing in spaces where the public may gather.

### **It is recommended that places of worship:**

- Space seating arrangements so there are 6 feet between groups who live in the same household. Consider limiting seating to alternate rows.
- Ensure members of a choir or music ensemble maintain a distance of 6 feet from each other.

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- Post signage reminding people about social distancing. [Know Your W's](#) sign templates are available in English and Spanish on the NC DHHS COVID-19 response site.
- In indoor and outdoor areas where people gather, provide floor markings at six-foot intervals to encourage social distancing.
- Clearly mark designated entry and exit points; if a house of worship or building has only one entry/exit point, try to stagger entry and exit times if possible.
- Provide an option for virtual services.
- Continue remote working for staff as much as possible. This includes clergy holding virtual visits by phone or online when possible. Stagger shifts where remote working is not possible.
- Provide education for staff on how to properly wear, remove, and wash face coverings.
- Consider whether gatherings such as religious classes, youth events, support groups, or other programming may be held virtually to ensure social distancing.
- Limit the use of frequently-touched objects such as worship aids, prayer books, hymnals, attendance registers, or other shared or passed items. Encourage congregants to bring their own prayers, bulletins, songs and texts through electronic means if possible.
- Consider a stationary collection box, or mail or electronic methods of collecting financial contributions instead of shared or passed collection trays or baskets.
- Encourage avoidance of physical contact among attendees as permissible within the community's faith tradition.
- If food is offered at any event, have pre-packaged boxes or bags for each attendee, instead of a buffet or family-style meal. Avoid serving food from common dishes.

### Cloth Face Coverings

It is strongly recommended that all staff and congregants wear a cloth face covering when they may be near (less than 6 feet from) other people. An FAQ about face coverings is available in [English](#) and [Spanish](#).

- It is encouraged that places of worship provide cloth face coverings for staff and congregants. If provided, they must be single use or properly laundered using hot water and a high heat dryer between uses.
- Please share guidance to employees on use, wearing, and removal of cloth face coverings, such as [CDC's guidance on wearing and removing cloth face masks](#), [CDC's use of cloth face coverings](#), and [CDC's cloth face coverings FAQ's](#).

### Cleaning and Hygiene

Washing hands with soap for 20 seconds or using hand sanitizer reduces the spread of transmission.

**It is recommended that places of worship:**

- Perform ongoing and routine environmental cleaning and disinfection of high-touch areas (e.g., doors, doorknobs, rails) with an [EPA approved disinfectant for SARS-CoV-2](#) (the virus that causes COVID-19), and increase disinfection during peak times or high density times.
- Systematically and frequently check and refill hand sanitizers and assure soap and hand drying materials are available at sinks.
- Prominently provide alcohol-based hand sanitizer (at least 60% alcohol) at entrances and exits and near high-touch areas.

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- Promote frequent use of hand washing and hand sanitizer for staff and attendees. Require handwashing of staff immediately upon reporting to work, after contact with individuals, after performing cleaning and disinfecting activities, and frequently throughout the day.
- To the extent possible, do not use items that are not easily cleaned, sanitized, or disinfected.
- All shared religious objects should be properly disinfected between uses as possible. Provide adequate contact time for disinfectant as required by the manufacturer before shared equipment is used by another person.
- Provide tissues for proper cough and sneeze hygiene.
- Increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety risk.

### Monitoring for Symptoms

Conducting regular screening for symptoms can help reduce exposure. Staff should be encouraged to self-monitor for symptoms such as fever, cough, or shortness of breath.

If they develop symptoms, they should notify their supervisor and return home. More information on [how to monitor for symptoms](#) is available from the CDC.

#### It is recommended that places of worship:

- Have a plan in place for immediately removing employees from work if symptoms develop.
- Employees who have symptoms when they arrive at work or become sick during the day should immediately be separated from other employees, customers, and visitors and sent home.
- Conduct daily [symptom](#) screening (use this standard interview questionnaire ) ([English](#) | [Spanish](#)) of employees at entrance to workplace with immediately sending symptomatic workers home to [isolate](#).
- Post signage at the main entrance requesting that people who have been symptomatic with fever and/or cough not enter, such as [Know Your Ws/Stop if You Have Symptoms](#) flyers (English - [Color, Black & White](#); Spanish - [Color, Black & White](#)).
- Establish and enforce sick leave policies to prevent the spread of disease, including:
  - o Enforcing employees staying home if sick.
  - o Encouraging liberal use of sick leave policy.
  - o Expanding paid leave policies to allow employees to stay home when sick.
- [Per CDC guidelines](#), if an employee has been diagnosed with COVID-19 or is presumed positive by a medical professional due to symptoms, the employee should be excluded from work until:
  - o No fever for at least 72 hours since recovery (without the use of fever-reducing medicine) AND
  - o Other symptoms have improved (e.g., coughing, shortness of breath) AND
  - o At least 10 days have passed since first symptoms
- [Per CDC guidelines](#), if an employee has been diagnosed with COVID-19 but does not have symptoms, they should remain out of work until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.
- Require symptomatic employees to wear masks until leaving the facility. Cleaning and disinfecting procedure should be implemented by designated personnel following [CDC guidelines](#) once sick employee leaves.
- Provide employees with information on help lines to access information or other support in reference to COVID-19, e.g. 211 and Hope4NC Helpline (1-855-587-3463).



## Protecting Vulnerable Populations

Information on who is at higher risk for severe disease is available from the [CDC](#) and [NCDHHS](#).

### It is recommended that places of worship:

- Encourage the use of virtual services or designate exclusive times to access services for seniors and other at-risk groups as defined by the CDC.
- Enable employees to self-identify as high risk for severe disease and reassign work to telework, minimize face-to-face contact, or otherwise maintain a distance of six feet from others.
- Offer provisions for persons at higher risk such as how to minimize interaction with patrons, social distancing and spacing reminders, recommending wearing a cloth face covering.

## Combatting Misinformation

Help ensure that the information your employees is getting is coming directly from reliable resources. Use resources from a trusted source like the [CDC](#) or [NCDHHS](#) to promote behaviors that prevent the spread of COVID-19.

### It is recommended that places of worship:

- Make information available to workers about COVID-19 prevention and mitigation strategies, using methods like videos, webinars, or printed materials like FAQs. Some reliable sources include [NC DHHS COVID-19, Know Your Ws: Wear, Wait, Wash](#), [NC DHHS COVID-19 Latest Updates](#), [NC DHHS COVID-19 Materials & Resources](#)
- Put up signs and posters, such as those found [Know Your Ws: Wear, Wait, Wash](#) and those found [Social Media Toolkit for COVID-19](#).
- If appropriate, have messaging such as a short video emphasizing the importance of maintaining physical distancing and hand hygiene.

## Water and Ventilation Systems

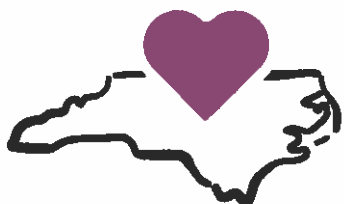
Reduced use of water and ventilation systems can pose their own health hazards. There is increased risk for Legionella and other waterborne pathogens from stagnant or standing water.

### Before reopening, it is recommended that places of worship:

- Follow the CDC's [Guidance](#) for Reopening Buildings After Prolonged Shutdown or Reduced Operation to minimize the risk of diseases associated with water.
- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk to people using the facility.

## Additional Resources

- CDC: [FAQs for Administrators and Leaders at Community- and Faith-Based Organizations](#)
- CDC: [Interim Guidance for Administrators and Leaders of Community- and Faith-Based Organizations to Plan, Prepare, and Respond to Coronavirus Disease 2019](#)
- CDC: [Interim Guidance for Businesses and Employers](#)
- CDC: [Cleaning and Disinfecting Your Facility](#)
- U.S. Environmental Protection Agency (EPA): [Disinfectants for Use Against SARS-CoV-2](#)
- U.S. Food and Drug Administration (FDA): [Food Safety and the Coronavirus Disease 2019 \(COVID-19\)](#)
- U.S. Department of Health and Human Services/Occupational Safety and Health Administration (OSHA): [Guidance on Preparing Workplaces for COVID-19](#)
- U.S. Department of Homeland Security: [Guidance on the Essential Critical Infrastructure Workforce](#)



**#StayStrongNC**

**Staying apart brings us together.  
Protect your family and neighbors.**

**Learn more at [nc.gov/covid19](https://nc.gov/covid19).**



**NC DEPARTMENT OF  
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## Coronavirus Disease 2019 (COVID-19)

### Interim Guidance for Communities of Faith

CDC offers the following general considerations to help communities of faith discern how best to practice their beliefs while keeping their staff and congregations safe. Millions of Americans embrace worship as an essential part of life. For many faith traditions, gathering together for worship is at the heart of what it means to be a community of faith. But as Americans are now aware, gatherings present a risk for increasing the spread of COVID-19 during this public health emergency. CDC offers these suggestions for faith communities to consider, consistent with their own faith traditions, in the course of preparing to reconvene for in-person gatherings while still working to prevent the spread of COVID-19. Implementation should be guided by what is feasible, practical, and acceptable, and tailored to the needs and traditions of each community of faith. The information offered is non-binding public health guidance for consideration only; it is not meant to regulate or prescribe standards for interactions of faith communities in houses of worship. Any decision to modify specific religious rites, rituals, and services should be made by religious leaders. Specific preventive actions are provided as examples only.

### Scaling Up Operations

- Establish and maintain communication with local and State authorities to determine current mitigation levels in your community.
- Provide protections for staff and congregants at [higher risk for severe illness](#) from COVID-19. Offer options for staff at [higher risk for severe illness](#) (including older adults and people of all ages with certain underlying medical conditions) that limit their exposure risk. Offer options for congregants at [higher risk of severe illness](#) that limit their exposure risk (e.g., remote participation in services).
- Consistent with applicable federal and state laws and regulations, put in place policies that protect the privacy and confidentiality of people at [higher risk for severe illness](#) regarding underlying medical conditions.
- Continue to provide congregants with spiritual and emotional care and counseling on a flexible or virtual basis or refer them to other sources for counseling and support if necessary.
- Encourage any organizations that share or use the facilities to also follow these considerations if feasible.
- If your community provides social services in the facility as part of its mission, consult CDC's information for [schools](#) and [businesses and workplaces](#), as relevant, for helpful information.

### Monitoring and Preparing

#### Promote healthy hygiene practices

- Encourage staff and congregants to maintain good hand hygiene, [washing hands](#) with soap and water for at least 20 seconds.
- Have adequate supplies to support healthy hygiene behaviors, including soap, hand sanitizer with at least 60 percent alcohol (for those who can safely use hand sanitizer), tissues, and no-touch trash cans.



- Encourage staff and congregants to cover coughs and sneezes with a tissue or use the inside of their elbow. Used tissues should be thrown in the trash and hands washed.
- Whenever soap and water are not readily available, hand sanitizer with at least 60% alcohol can be used.
- Consider posting signs on how to [stop the spread](#) of COVID-19 and [promote everyday protective measures](#), such as [washing hands](#), [covering coughs and sneezes](#), and [properly wearing a face covering](#).

## Cloth face coverings

- Encourage use of [cloth face coverings](#) among staff and congregants. Face coverings are most essential when [social distancing](#) is difficult. Note: [Cloth face coverings](#) should not be placed on children younger than 2 years old, anyone who has trouble breathing or is unconscious, and anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance. [Cloth face coverings](#) are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms.

## Intensify cleaning, disinfection, and ventilation

- [Clean and disinfect](#) frequently touched surfaces at least daily and shared objects in between uses.
- Develop a schedule of increased, routine cleaning and disinfection.
- Avoid use of items that are not easily cleaned, sanitized, or disinfected.
- Ensure [safe and correct application](#) of disinfectants and keep them away from children. Use products that meet [EPA disinfection criteria](#).
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
- Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, etc. Do not open windows and doors if they pose a safety risk to children or adults using the facility.
- If your faith community offers multiple services, consider scheduling services far enough apart to allow time for cleaning and disinfecting high-touch surfaces between services.
- Take steps to ensure that all water systems and features (for example, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of [Legionnaires' disease](#) and other diseases associated with water.

## Promote social distancing

- Take steps to limit the size of gatherings in accordance with the guidance and directives of state and local authorities.
- Promote [social distancing](#) at services and other gatherings, ensuring that clergy, staff, choir, volunteers and attendees at the services follow social distancing throughout services, as circumstances and faith traditions allow, to lessen their risk. This may include eliminating lines or queues, if a 6-foot distance between attendees is hard to ensure. Use of cloth face coverings should be encouraged when social distancing cannot be maintained.
- Consider holding services and gatherings in a large, well-ventilated area or outdoors, as circumstances and faith traditions allow.
- Consider appropriate mitigation measures, including taking steps to limit the size of gatherings and maintaining [social distancing](#), at other gatherings such as funerals, weddings, religious education classes, youth events, support groups and any other programming, where consistent with the faith tradition. Use of cloth face coverings should be encouraged when social distancing cannot be maintained.
- Provide physical guides, such as tape on floors or walkways and signs on walls, to ensure that staff and congregants remain at least 6 feet apart in lines and at other times as needed (e.g. guides for creating "one-way routes" in hallways).

- Add additional services to weekly schedules to maintain social distancing at each service if appropriate and feasible. Consider video streaming or drive-in options for services and other gatherings and meetings.
- Consider suspending or at least decreasing use of a choir/musical ensembles and congregant singing, chanting, or reciting during services or other programming, if appropriate within the faith tradition. The act of singing may contribute to transmission of COVID-19, possibly through emission of aerosols.
- Consider having clergy hold virtual visits (by phone or online) instead of in homes or at the hospital except for certain compassionate care situations, such as end of life.

## Take steps to minimize community sharing of worship materials and other items

- Consistent with the community's faith tradition, consider temporarily limiting the sharing of frequently touched objects that cannot be easily cleaned between persons, such as worship aids, prayer rugs, prayer books, hymnals, religious texts and other bulletins, books, shared cups, or other items received, passed or shared among congregants as part of services. Seek ways to uphold customs central to the practicing of one's faith that limit shared exposure to congregants. Consider photocopying or electronically sharing prayers, songs, and texts via e-mail or other digital technologies.
- Modify the methods used to receive financial contributions. Consider a stationary collection box or electronic methods of collecting regular financial contributions instead of via shared collection trays or baskets.
- Consider whether physical contact (e.g., shaking hands, hugging, or kissing) can be limited among members of the faith community.
- If food is offered at any event, consider pre-packaged options, and avoid buffet or family-style meals if possible.

## Nursery/Childcare/Youth Groups

- If a nursery or childcare will be provided during services and events, refer to CDC's information on [preventing the spread of COVID-19 in childcare settings](#) and adapt as needed for your setting.
- Consider virtual activities and events in lieu of in-person youth group meetings and religious education classes, as feasible. If in-person events will occur, follow considerations for other types of gatherings and use several strategies to encourage behaviors that reduce the spread of COVID-19.
- If holding summer day camps, refer to CDC's information on [youth and summer camps](#) and adapt as needed.

## Staffing and Training


Train all clergy and staff in the above safety actions. Consider conducting the training virtually, or, if in-person, ensure that social distancing is maintained.

## Safety Actions


### Check for signs and symptoms

- Encourage staff or congregants who are sick or who have had close contact with a person with COVID-19 to stay home. Share CDC's criteria for staying home with staff and congregants so that they know how to care for themselves and others. Consider posting signs at entrances with this information.




## Plan for when a staff member or congregant becomes sick

- Identify an area to separate anyone who exhibits COVID-like **symptoms** during hours of operation until they can be safely transported to their home or a healthcare facility. Ensure that children are not left without adult supervision.
- Notify local health officials if a person diagnosed with COVID-19 has been in the facility and communicate with staff and congregants about potential exposure while maintaining confidentiality as required by the **Americans with Disabilities Act (ADA)**  or other applicable laws and in accordance with religious practices.
- Advise those with **exposure** to a person diagnosed with COVID-19 to **stay home and self-monitor** for symptoms, and follow **CDC guidance** if symptoms develop.
- Close off areas used by the **sick** person and do not use the area until after cleaning and disinfection. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible. Ensure **safe and correct application** of disinfectants and keep disinfectant products away from children.
- Advise staff and congregants with **symptoms** of COVID-19 or who have tested positive for COVID-19 not to return to the facility until they have met CDC's **criteria to discontinue home isolation**.

## Maintain healthy operations

- Implement flexible sick leave and related flexible policies and practices for staff (e.g., allow work from home, if feasible), and provide requested reasonable accommodation absent undue hardship to individuals with disabilities under the **Americans with Disabilities Act (ADA)**  or other applicable laws and in accordance with religious practices.
- Monitor absenteeism and create a roster of trained back-up staff.
- Designate a staff person to be responsible for responding to COVID-19 concerns. Staff, clergy, volunteers, and congregants should know who this person is and how to contact them if they become sick or are around others diagnosed with COVID-19. This person should also be aware of state or local regulatory agency policies related to group gatherings and other applicable state and local public health guidance and directives.
- As volunteers often perform important duties (e.g., greeters, ushers, childcare), consider similar monitoring, planning, and training for them. Consider that volunteer and staffing may need to increase to implement cleaning and safety protocols and to accommodate additional services with reduced attendance.
- Communicate clearly with staff and congregants about actions being taken to protect their health.
- Encourage any organizations that share or use the facilities to also follow these considerations. If your community provides social services in the facility as part of its mission, consult CDC's information for **schools** and **businesses and workplaces**, as relevant, for helpful information.


## Signs and Messages

- Post **signs** in highly visible locations (e.g., entrances, restrooms, gathering halls/community rooms/gyms) that **promote everyday protective measures**  and describe how to **stop the spread**  of germs (such as by **properly washing hands** and **properly wearing a cloth face covering**  ).
- Include messages (for example, **videos**) about behaviors that prevent the spread of COVID-19 when communicating with staff and congregants (such as in emails and on community websites and **social media accounts**).
- Find freely available CDC print and digital resources on CDC's **communications resources** main page.

## Support Coping and Resilience

- Continue to provide congregants with spiritual and emotional care and counseling on a flexible or virtual basis or refer them to other sources for counseling and support.

## Closing

- Check [State](#) and [local](#)  health department notices daily about transmission in the community and adjust operations
- In the event a person diagnosed with COVID-19 is determined to have been in the building and poses a risk to the community, it is strongly suggested to dismiss attendees, then properly clean and disinfect the area and the building where the individual was present before resuming activities. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible.

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Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)



# REOPENING YOUR CHURCH



As North Carolina begins to slowly reopen, N.C. Baptist churches are anxious to gather in person for worship. Below is a helpful guide of ideas to assist you in making the most of this reengagement.

Please note, the items below are suggestions and in no way should replace guidelines from government officials and health care professionals. Every local church is autonomous and must therefore make their own decisions about how to move forward in order to be the church, honor earthly authorities, and love their neighbors.



Pastors, consider making a video to share with your church telling them what to expect their first Sunday back. The video should outline traffic flow, seating guidelines, children and preschool expectations, etc.



Keep in mind that while gathering together is a gift to believers and a witness to unbelievers, our desire to return to the building should never replace our Great Commission responsibility to "go and tell." We pray that soon, you will be able to say to your church, "See you on Sunday!"

[Reopening Your Church PDF](#)

[N.C. Health Guidelines PDF](#)

Preparing the Facility



Service Options (including ideas for limited gatherings)



Worship Service Considerations



Ministries 

