

CALVERT COUNTY HEALTH DEPARTMENT

P.O. Box 980

975 Solomons Island Road, N
Prince Frederick, Maryland 20678

Laurence Polsky, MD, MPH, F.A.C.O.G
Health Officer

Champ Thomaskutty, MPH
Deputy Health Officer

Sharon Walser, Director
Administrative Services



STATE OF MARYLAND

Washington Area (301) 855-1353

Baltimore Area (410) 269-1051

Fax (410) 535-5285

www.calverthealth.org

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Dear Congregation Leaders,

As of August 2, 2020, Religious Leaders should consider the following suggestions in response to the ongoing COVID pandemic. The most significant change since last month is **face masks are now required** for all attendees of indoor religious services by order of the Governor. Face masks are recommended for outdoor services, as well. The prevalence of the virus has increased since July 4th in Calvert County. We are now seeing over 80 cases of COVID per week. This is 4-times more cases than a month ago. Most of these cases are occurring in teens and young adults (55% in those aged 15-29). It is greatly concerning that younger people will likely begin transmitting the virus to older adults who are more at-risk for severe illness.

Please consider sending word to your congregation members to speak to the teens and young adults in their families about the importance of avoiding crowded gatherings, particularly where alcohol is being served and people aren't distancing themselves or wearing face coverings. Older adults living in the same home as those 15-29 years old should take extra precautions if they are concerned about who their younger relatives may have been exposed to.

All changes from July 2nd guidance are in ***bold, italic font***.

1) Encourage congregants who are at high-risk of COVID complications to either continue to worship in their homes (possibly viewing or listening to a live stream or recorded service) or the ministry should hold a separate service for the medically vulnerable.

Separate services for the medically vulnerable should allow significant spacing of individuals. I would recommend at least 15 feet between participants. If a separate service is held, it should occur prior to the service for the general congregation. This avoids virus particles lingering in the air or on prayer books, door handles, etc., that could lead to infection. The supplemental service should conclude at least an hour prior to the start of the general service so the two groups don't physically interact.

People at high-risk include anyone age 60 or older and those with chronic medical conditions including diabetes, long-standing high blood pressure, COPD, congestive heart failure, a recent history of chemotherapy, and any condition that requires immunosuppressant medications.

2) It is extremely important that word be sent to congregation members that anyone with any illness or anyone with a sick member in their household should not attend service for at least 2 weeks. Even if a person feels well, they could have contracted it from an ill family member and be capable of infecting others.

3) *Face masks must be worn by everyone 6 and older while inside the building unless an individual has a true medical reason she/he cannot safely wear a face covering. Very few people have such reasons, and for those who do, it is questionable whether their health status makes it safe for them to be in a setting with large groups of people from outside of their household. Face masks should be encouraged for those ages 2-5. Face masks should not be worn by children less than 2 years old. The same holds when outdoors if people can not space at least 6 feet apart. Even when spacing is possible, face masks should be encouraged for all congregation members ages 2 and over.*

4) Singing by the congregation or choirs should not take place. Humming for brief periods may be considered as an alternative. Singing dramatically increases the risk of transmitting COVID. If someone is an asymptomatic carrier of the virus (feels fine but is infected), singing increases the amount of virus they exhale and at least doubles the distance the virus carries through the air. Outside of nursing homes, some of the worst outbreaks of COVID have occurred as the result of singing in churches.

Soloists can perform. She/he should be at least 25 feet from the closest person. If the service takes place outside, the soloist should ideally be downwind from the congregation.

Although song is such an elemental part of religious tradition, this is one time when it is critically important for us all to modify our established behaviors for the safety of our fellow human beings. As the Good Book teaches, in each of our actions, we must be protective of the most vulnerable.

5) If possible, services should be held outside. This helps dissipate viral particles much more effectively than indoor settings. I realize that the weather in Southern Maryland is not always conducive to outdoor events and some congregations may not have the physical space or equipment to hold services outdoors. If outdoor services are feasible, members of the congregation should be encouraged to bring their own fold-up chairs.

6) Regardless of the setting, members of the congregation should be more than 6 feet apart in each direction. Ideally, a 10-foot radius should be provided to decrease the potential for virus transmission. Family members living in the same household do not need to be spaced apart.

The Governor's Order allows capacity at indoor services to be 50% of the Fire Marshall's allowance. In almost every building, this is too many people, and will not allow for safe spacing between worshippers. I would discourage leaders from using this benchmark as a safe measure of occupancy.

7) Keep services as short as you reasonably can. Virus transmission is a result of the proximity and duration of exposure to an infected person. The longer someone is near an infected person, the more likely they are to get sick. Given the potential for severe illness with COVID-19, it is very important to limit the time people spend in group settings.

8) When possible, consider outdoor settings for children's gatherings. Children's services or daycare areas should have no more than 15 people in a room, including supervising adults. If the room is small, please adjust the number of occupants accordingly. Children should wash their hands with soap and water (preferable) or apply hand sanitizer before entering the room. Consider a craft day that allows children to design or make their own masks with the help of adult volunteers. There are many online guides to making face masks for COVID prevention.

Instead of grouping strictly by age, please consider assigning children from the same household to the same room. Children should attend the same room with the same adult supervisors from week-to-week. Grouping by household and keeping the same assigned rooms each week will decrease the number of children who are potentially exposed to a carrier of COVID. Space children apart as much as reasonable. Children from the same household may sit or play together.

If there are several services in a day, the books, toys, or other materials used should be different for each group of children so virus isn't transmitted by objects. Common touch surfaces should be thoroughly wiped with disinfectant after each group of children leave the room. Please give at least 15 minutes between groups to allow for cleaning.

9) Bathrooms should be cleaned with a basic disinfectant after each service is completed. Please factor this into the timing of services.

10) Consider taping a weekly message, sermon, or service for those who can't safely attend in-person services. This can be placed ahead of time on a Facebook or other social media outlet. For those without internet access, it could be placed on a phone recording.

11) No physical contact should occur between religious leaders and congregants. COVID-19 is more easily spread than the flu. Physical contact of any kind, hand shaking, hugs, delivery of the Eucharist, laying of hands, etc., put you at risk as well as those in your ministry.

12) Good, basic hygiene should be observed. Ideally, hand sanitizer should be made available at the entrance to members of the congregation or they should be encouraged to wash their hands with soap and water immediately upon entry to the facility. All common touch surfaces should be disinfected prior to each service. Ideally, prayer books should not be used. Disposable paper pamphlets for each service are a safer way to provide guides for members of the congregation.

For any questions, please contact me: Laurence.polsky@maryland.gov or 410 535-5400 x306.

God bless,

A handwritten signature in black ink that reads "Laurence Polsky MD". The signature is written in a cursive style with a large, stylized "L" and "P".

Dr. Larry Polsky, Calvert County Health Officer