

COVID-19 Safety Protocol Draft

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Good Shepherd
CHURCH

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INTRODUCTION

Good Shepherd Church desires to be a safe place for all people who attend any ministry or activity either on or off our campuses. The safety and health of our staff, leaders, and participants is a primary concern. This COVID-19 Safety Protocol reflects our church's commitment to provide a safe space to worship, learn, and grow during the COVID-19 pandemic. These procedures apply to all Good Shepherd Church programs, ministries, activities, and gatherings.

Good Shepherd staff constantly researches the Center for Disease Control (CDC) as well as state and local government guidance and adopts their recommendations and requirements. We will review this document monthly and as updates are made by the CDC and others, we will pivot to implement those changes. Changes will be communicated and included in future revisions of this document.

Our overall strategy for mitigating COVID-19 infection includes:

- Valuing “our good” over “my rights.”
- Reducing infection risk and spread by adhering to policies that include social distancing, wearing face coverings, and washing hands.
- Adopting stringent disinfection goals that include ensuring that surfaces and high touch points are disinfected after each use.
- Owning the reality that avoiding infection is everyone's job.

LIABILITY WAIVER

Exposure to COVID-19 is an inherent risk in any public location where there are people present. Good Shepherd Church (GSUMC) cannot guarantee that you will not be exposed to the virus at our gatherings. GSUMC will not be held liable if you contract COVID-19 while participating in our gatherings or on our campuses.

DEFINITIONS

In this policy, the following definitions apply:

Attendee - a person who attends a Good Shepherd gathering

Child, Student or Minor - any person under the age of eighteen

Close contact - someone who is within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period. This time frame starts from 2 days before illness onset or 2 days prior to positive specimen collection for asymptomatic people until the patient is isolated. The person still counts as a close contact whether or not face coverings were worn.

Cohort or family model – smaller group of students and adults that remain together and not intermingle with other cohorts or groups.

COVID-19 - short for Coronavirus Disease 2019, is a disease that was identified in late 2019 and was declared a pandemic on March 11th, 2020. It is part of a large group of coronaviruses that cause illness in animals and humans. COVID-19 is caused by the 2019 novel (new) coronavirus.

COVID-19 like symptoms - symptoms can include but are not limited to fever or chills, fatigue, shortness of breath or difficulty breathing, cough, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. People with COVID-19 can have a wide range of

symptoms- ranging from mild to severe illness. People usually have a combination of symptoms rather than all symptoms listed.

Department leader - a staff member who supervises other staff or leaders

Gathering - a planned or spontaneous event, activity or meeting, indoors or outdoors, with a small or large number of people participating or in attendance

GSUMC - the initials for Good Shepherd United Methodist Church

Isolation room – a room designated for isolating sick people from well people and is not used for any other purpose.

Leader - any non-compensated individual who has a volunteer position at any GSUMC gathering

Social distancing - staying at least six feet apart from other people.

Staff - any compensated individual employed by GSUMC

Visitor - a person who visits Good Shepherd campus during office hours

FACE COVERINGS

Face coverings help prevent people who have COVID-19, including those who are pre-symptomatic or asymptomatic, from spreading the virus to others. Face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings. It is everyone's responsibility to wear a covering.

Requirements for face coverings:

- Must be worn over your nose and mouth.
- Face coverings with exhalation valves or vents should not be worn.
- Face coverings made of mesh or with holes in them should not be worn.
- Face shields alone are not a suitable replacement for a face covering, unless recommended by a healthcare provider as a substitution.

Who wears a face covering and when?

Per NC state government orders, face coverings should be worn by all people 5 years and older and are required to enter any GSUMC gathering or building. This includes off-site gatherings. In outdoor settings, face coverings must be worn when it is not possible to consistently stay more than 6 feet from non-household members.

Provide a face covering at the door to people who are not wearing one. Anyone who is not wearing a mask during a gathering should be offered a face covering and asked to wear it. Report anyone who refuses to wear a face covering to the Executive Director. If the person unwilling to wear a mask shows COVID-like symptoms, solicit assistance from a police officer if available.

- Face coverings may be taken off by staff only if in a private room or office and alone.
- Always wear a face covering when you are around people who don't live in your household, especially when social distancing is difficult to maintain.

- Always wear a face covering in public settings like hallways, bathrooms, and common areas, even if no one else is around.
- Face coverings should not be worn by children younger than two, people who have trouble breathing, or those who cannot remove the covering without assistance (anyone who is unconscious, incapacitated, or otherwise unable to remove the covering without assistance).
- Wearing face coverings does not permit us to increase capacity or conduct meetings in close quarters.
- Wearing a face covering is not a substitute for social distancing.

Considerations for Face Coverings

We recognize that wearing a face covering may not be possible in every situation or for some people. Appropriate and consistent use may be challenging for some, such as those with certain disabilities or underlying health conditions. These people should consult with their healthcare provider on wearing face coverings and inform church leadership.

WASHING YOUR HANDS

Washing your hands is one of the most effective ways to prevent the spread of germs. Follow these five steps every time to wash your hands.

- Wet your hands with clean, running water (warm or cold)
- Apply soap and lather your hands by rubbing them together.
- Scrub your hands for at least 20 seconds
- Rinse your hands well under clean, running water.
- Dry your hands using a clean towel.

Using Hand Sanitizer

- If soap and water are not readily available, use an alcohol-based hand sanitizer that contains at least 60% alcohol and wash with soap and water as soon as you can.
- Do not use hand sanitizer if your hands are visibly dirty or greasy. Wash your hands with soap and water instead.
- Supervise children when they use hand sanitizer to prevent ingestion.

Social Distancing

Social distancing should be practiced when you are around people who are not from your household in both indoor and outdoor settings. Maintain social distancing from others whenever possible. Social distancing should be practiced in combination with other everyday preventative actions to reduce the spread of COVID-19, including wearing face covering, avoiding touching your face with unwashed hands, and frequently washing your hands with soap and water.

SYMPTOM SCREENING

In order to protect the health of people inside the facility, symptom screening is intended to identify people who have possible symptoms of COVID-19. Those people are then kept from entering the setting or facility to reduce the risk of spreading the virus. The symptom screening is designed to be completed at the facility entrance to be the most effective.

All staff, leaders, and visitors will get a full symptom screening before participating in gatherings. Children under 18 will get a symptom screening before participating in child-specific gatherings.

Parts of symptom screening:

- **Temperature check** - using a non-contact thermometer, take a person's temperature on their forehead. Do not touch the person when using the thermometer.
 - If someone has a fever, they will need to immediately leave or be isolated until they can leave. Household members or anyone who carpoled should also leave at this time. A fever is a temperature over 99.9 degrees Fahrenheit.
 - Leader will fill out the COVID-19 Reporting form for documentation on www.gsumc.org/forms for contact tracing purposes immediately, if possible. If not, staff supervisor must immediately be notified and form must be completed within 12 hours.
- **Questionnaire** - If someone has any of the following symptoms, that indicates a possible illness and also puts them at risk for spreading. If someone answers "Yes" to any question below, they will need to immediately leave or be isolated until they can leave. Household members or anyone who carpoled should also leave at this time. NOTE: This list is not an all-inclusive list of symptoms that would cause a person to be excluded from participating. Other possible reasons (but not limited to) would be having another contagious condition.
 - Do you (or your child) have any of the following symptoms:
 - Temperature above 99.9F (without fever-reducing medication)?
 - Shortness of breath or new, uncontrolled cough that causes difficulty breathing?
 - Diarrhea, nausea, vomiting or abdominal pain?
 - New onset of a headache or sore throat?
 - New loss of taste or smell?
 - Has anyone in your household had close contact with a person with confirmed COVID-19 within the last 14 days?
 - Has anyone in your household been asked to quarantine due to possible exposure of COVID-19 within the last 14 days?
 - Is anyone in your household waiting for results from a COVID-19 test?
- Parents or guardians should monitor their child(dren) for symptoms of infections or illness everyday through home-based symptom screening.

CONSIDERATIONS FOR WORKING WITH MINORS

Working with Younger Children (Babies, Toddlers, and Preschool/Kindergarten Age)

- It is important to comfort crying, sad, and/or anxious infants and toddlers and they often need to be held. To the extent possible, when washing, feeding, or holding very young children, leaders can protect themselves by wearing a provided disposable long-sleeve smock and by wearing long hair up off the collar.
- Leaders working with children should change the child's clothes if secretions are on the child's clothing. Contaminated clothes should be placed in a sealed plastic bag. Once changing the child's clothes, leaders should wash their hands.
- If a toy or item has been put in a child's mouth or has any bodily secretions on it, remove the item and immediately follow the disinfectant procedure for that item under "[Disinfection](#)" section.

Drop Off and Pick Up During Children's Gatherings

- Ideally, the same parent or designated person should drop off and pick up the child after every class. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up or drop off children.

- Consider staggering arrival and drop of times and plan to limit direct contact with parents as much as possible.

Using the Cohort Model with Children

- Using additional safety protocols can mitigate COVID-19 infection, such as using the cohort or family model, where the groups remain together all day and does not mingle with other classes. This reduces the risk of infection while also providing contact tracing.
- When using the cohort or family model, reducing room capacity to 50% is not required but reduce capacity as much as possible.
- To prevent cross-contamination between groups of children, hallways should be used by one class at a time. If you notice another class in the hallway, please wait until they pass by before exiting your room.
- To prevent cross-contamination between groups of children, hallway bathrooms should only be used by one class at a time.

Reducing Cross Contamination Between Groups of Children (of All Ages)

- If you have a child using the hallway bathroom (rather than an individual classroom bathroom), areas touched by the child will be disinfected. Follow "[Disinfection](#)" section. Disinfect any areas that the child may have touched including the toilet flush handle, toilet seat, stall handle, sink handle, soap push bar, sink counter, paper towel turners, and bathroom door handle.

Toy Considerations for Children of All Ages

- Remove toys that cannot effectively be cleaned and disinfected. Toys primarily should be able to be cleaned in the dishwasher or laundered.
- Machine washable cloth toys should only be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.
- Do not share toys with more than one group of children, unless they are washed and disinfected before moving to another group.

PRACTICE GOOD HYGIENE

- Cover your nose and mouth with a tissue when you cough or sneeze, or use the inside of your elbow.
- Throw used tissues directly into the trash.
- Discourage hand shaking, fist bumps, and hugs.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wash your hands often, especially if you have been in a public place, or after blowing your nose, coughing, or sneezing.
- Avoid using other people's phones, desks, offices, or other supplies or equipment.

PREPARING AREAS AND SUPPLIES FOR GATHERINGS

Room/Space Considerations

- Remove items from the room that cannot be cleaned and sanitized. This may include furniture, toys, and supplies.

- Limit touch points by removing unused items from the space. The more items in a room, the more items that must be disinfected.
- Block off rows or sections of seating or change seating layouts in order to space people at least six feet apart.
- Limit touch points by holding doors open, using touchless dispensers in the bathroom, or other touchless items, where feasible.
- Eliminate lines or queues if possible. Do not allow lines or crowds to form without maintaining a distance of at least six feet from other people. It may be helpful to post signs or markers to help people maintain the appropriate social distancing of six feet.
- Close drinking fountains if they cannot be adequately cleaned and disinfected between uses.
- Use multiple entrances and exits. Discourage crowded waiting areas.

Supply Considerations

- Whenever possible, do not serve food at gatherings. If food is required, use pre-packaged food.
- Limit sharing of tools, equipment, or supplies between people. Use individual supplies whenever possible.
- Ensure adequate supplies to minimize sharing of high-touch materials to the extent possible.
- Discourage people from sharing items that are difficult to clean, sanitize, or disinfect. Remove supplies that cannot effectively be cleaned and disinfected.
- Limit use of supplies to one group of attendees at a time and clean and disinfect them between uses. Supplies need to be disinfected before the next group uses them.
- Supplies should be disinfected after use and only supplies that are clean should be used.
- Wash your hands or wear gloves before passing out supplies to groups of people.
- Establish and enforce an effective disinfectant strategy for disinfecting supplies and furniture used in your area following disinfectant procedures in "[Disinfection](#)" section.

SHARED SPACES

- If multiple groups will be using the same space, the space will be disinfected after each use and before the next use by the person using the room. See "[Disinfection](#)" section.
- Consider using signs to mark areas that are used and need to be cleaned and disinfected. For example, a "clean/in use" sign can be used. Use the "clean" sign after the room has been disinfected and use the "in use" sign when the room was used.
- Only one person is allowed in a closet at a time. Wait for one person to exit before the next person enters.

STAY HOME WHEN APPROPRIATE

Stay home if:

- you or anyone in your household has tested positive for COVID-19 within the last 14 days.
- you or anyone in your household had [COVID-19 like symptoms](#) within the last 14 days.
- you or anyone in your household is waiting for COVID-19 test results.
- you have had a close contact with a person who has [COVID-19 like symptoms](#) within the last 14 days. (See definition for close contact in "[Definitions](#)" section).
- you have had a close contact with a person with a confirmed case of COVID-19 within the last 14 days. (See definition for close contact in "[Definitions](#)" section).
- you are above 65 or older, or have a serious underlying health condition. Talk to your healthcare provider to assess your risk and determine if you should stay home.

- any health department or healthcare provider has contacted you and advised you or anyone in your household to isolate.
- you have had direct physical contact with someone with COVID-19 within the last 14 days (such as hugged, kissed, shared food/drink or carried person).
- a person with COVID-19 has sneezed, coughed, or gotten respiratory droplets on a person in your household within the last 14 days.

RETURNING TO WORK AND GATHERINGS

Individuals should not return to work or gatherings until they have met the CDC's criteria to discontinue home isolation.

Diagnosed with COVID-19 and with symptoms:

Either from positive test results or from a medical provider (not test)

Can return if they can answer yes to ALL questions:

- Has it been at least 10 days since the individual's symptoms first started?
- Has it been at least 24 hours since the individual had a fever over 99.9 degrees (without using fever reducing medication)?
- Has there been symptom improvement, including cough and shortness of breath?

Has COVID-19 Like Symptoms and has not been tested:

- Can return if they can answer yes to ALL questions:
 - Has it been at least 10 days since the individual's symptoms first started?
 - Has it been at least 24 hours since the individual had a fever over 99.9 degrees (without using fever reducing medication)?
 - Has there been symptom improvement, including cough and shortness of breath?
- An individual can return if they receive a confirmation of an alternate diagnosis from a health care provider that would explain the COVID-19 like symptoms AND can answer yes/true to questions below:
 - Has it been at least 24 hours since the person had a fever over 99.9 degrees (without using fever reducing medication)?
 - Has it been at least 24 hours since the person had symptoms including diarrhea, vomiting, a green or yellow runny nose, a spreading rash, excessive coughing, or a red sore throat without using symptom controlling medication?
 - The person does not have a contagious disease.
 - Has the person felt well for the past 24 hours?
- Depending upon the ailment, a doctor's note may be required stating the person is not contagious and may resume participation.

Diagnosed with COVID-19 (tested) with no symptoms:

Can return if they can answer yes/true to ALL questions:

- Has it been at least 10 days since their first positive COVID-19 diagnostic test?
- The individual has not developed symptoms since their first positive test. (If the individual has developed symptoms, use the diagnosed with COVID-19 with symptom questions).

Has [COVID-19 like symptoms](#) but tests negative:

Can return if they can answer yes to ALL questions:

- Has it been at least 24 hours since the person had a fever over 99.9 degrees (without using fever reducing medication)?
- Has it been at least 24 hours since the person had symptoms including diarrhea, vomiting, a green or yellow runny nose, a spreading rash, excessive coughing, or a red sore throat without using symptom controlling medication?
- Has the person felt well for the past 24 hours?

Has other illness/symptoms:

Can return if they can answer yes/true to ALL questions:

- Has it been at least 24 hours since the person had a fever over 99.9 degrees (without using fever reducing medication)?
- Has it been at least 24 hours since the person had symptoms including diarrhea, vomiting, body aches, headache, a green or yellow runny nose, a spreading rash, excessive coughing, or a red sore throat without using symptom controlling medication?
- The person does not have a contagious disease.
- The person does not have [COVID-19 like symptoms](#).
- Has the person felt well for the past 24 hours?

Depending upon the ailment, a doctor's note may be required stating the person is not contagious and may resume gatherings.

Close Contact with a person diagnosed with COVID-19

If a person had close contact with a person diagnosed with COVID-19, they must quarantine for 14 days since date of last exposure to person, even if individual tests negative.

If the person develops COVID-19-like symptoms, they must follow "[Has COVID-like symptoms](#)" above.

If your spouse or other household member comes in close contact with a person who was diagnosed with COVID-19, but you were not in contact, you are considered a "contact of a contact" and are not subject to quarantine unless your spouse or household member develops symptoms or tests positive for COVID-19.

WHEN TO GET A COVID-19 TEST

- Anyone who has [COVID-19 like symptoms](#)
- Close contacts of known positive cases, regardless of symptoms
 - Get tested immediately if you are experiencing [COVID-19 like symptoms](#) after a close contact of a known positive case.
 - If you are not experiencing [COVID-19 like symptoms](#) after a close contact of a known positive case, you should wait at least six days after your last known exposure to COVID-19 before you get tested.
- Groups of the population with higher risk of exposure or a higher risk of severe disease if they become infected. People in these groups should get tested if they believe they may have been exposed to COVID-19, whether or not they have symptoms.
 - Considering getting a COVID-19 test six days after a possible exposure. Possible exposures include mass gatherings, in crowds or other situations where they could not practice effective social distancing.
 - Before traveling or attending a gathering with people outside your household.
 - People who have been asked or referred to get testing by their medical provider or health department.

PERSON DISPLAYS SYMPTOMS DURING GATHERING

An isolation room is a room that is usually empty and only used to separate a sick person from the well people in the event a person shows [COVID-19 like symptoms](#). The isolation room can also be used if a person finds out they had close contact with a person who had [COVID-19 like symptoms](#) or tested positive for COVID, or the person themselves has tested positive for COVID-19 even if they do not have any symptoms.

In the event a person diagnosed with COVID-19 or with [COVID-19 like symptoms](#) is determined to have been in the building but is not currently onsite, follow below procedure to clean and disinfect the areas of the building where the individual was present before using the space. (Note: Follow all below steps except “Isolate the Sick Person” and “Person exiting the building.”)

All people should immediately notify their department leader if they become sick with [COVID-19 like symptoms](#), test positive for COVID-19, or have been exposed to someone with [COVID-19 like symptoms](#) or a confirmed case within the last 14 days.

ISOLATE THE SICK PERSON

- Immediately isolate the sick person in the designated isolation room.
- Encourage the sick person to keep their face mask on.
- If it is a child that has symptoms, the leader should remain as far apart as possible from child while maintaining visual supervision. The leader with the closest contact with the child that day should stay with the child. The leader should notify the parents to immediately pick up their child.

CLOSE OFF AREAS

- Ventilate with outside air if possible by opening a window.
- Close off all areas the sick person was in for that day and do not use them until they can be fully cleaned and disinfected. Spaces include both indoor and outdoor spaces such as rooms, offices, bathrooms, and hallways. Make sure to clearly mark the area as closed so no one will accidentally use the area.

PERSON EXITS THE BUILDING

- Sick person will immediately leave building through nearest exit. Any household or carpool members will also be sent home at this time.
- Leader will walk child out of building through nearest exit to meet parent or guardian.
- Leader will wash hands and shut any open windows.

DOCUMENTATION

- Leader will fill out COVID-19 Reporting form for documentation on www.gsumc.org/forms for contact tracing purposes immediately if possible. If not, staff supervisor must immediately be notified and form must be completed within 12 hours.
- Leader will confirm attendance and give list to their department leader.

CLEANING AND DISINFECTING AREAS USED BY SICK PERSON

- All supplies and items used by the person will be removed from use and cleaned and disinfected per disinfection protocol. See “[Disinfection](#)” section).
- Wait at least 24 hours before cleaning and disinfecting the room or rooms. If 24 hours is not feasible, wait as long as possible.
- Wear gloves when cleaning and open windows for extra ventilation if possible.
- Clean and disinfect all surfaces by following regular disinfection protocol.
- Turn off HVAC system and vacuum carpet. Turn HVAC system back on once vacuuming is complete.

ONCE CLEANING IS COMPLETE

- Wash hands after cleaning.
- Shut any open windows.
- Areas closed for cleaning can be reopened. Remove any “closed” signage.
- Leaders will perform symptom checks on people around the sick person throughout the rest of the gathering including a temperature check and watching for symptoms.
- Individuals who have had close contact with a person who has [COVID-19 like symptoms](#) should remain separated from others, be sent home, and self-monitor.

REPORTING

- All people should immediately notify their department or ministry leader if they become sick with [COVID-19 like symptoms](#), test positive for COVID-19, or have been exposed to someone with [COVID-19 like symptoms](#) or a confirmed case within the last 14 days.
- Inform staff of their potential exposure to COVID-19 in the workplace but maintain confidentiality. Instruct potentially exposed staff to stay home for 14 days, telework if possible, get a COVID 19 test at the appropriate time, and self-monitor for symptoms.
- The Director of Communications will serve as the COVID-19 point of contact for GSUMC and is responsible for responding to COVID-19 concerns. All staff and attendees should know who this person is and how to contact them.
- The Director of Communications will work with a team to determine how policy applies to each COVID-19 situation while maintaining that person’s confidentiality before issuing communications to others. Communication will be issued on a case by case basis to those involved in a timely manner.
- Staff and attendees are required to report if they had [COVID-19 like symptoms](#), a positive test for COVID-19, or were exposed to someone with COVID-19 within the last 14 days by immediately notifying their Department Leader and by completing the COVID-19 Reporting form within 12 hours on www.gsumc.org/forms for contact tracing purposes.
- Clearly communicate to attendees prior to gathering that they should not attend if they or someone in their household has [COVID-19 like symptoms](#), waiting for COVID-19 test results, had a positive test for COVID-19, were recently exposed to COVID-19 within the last 14 days. See “[Stay Home When Appropriate](#)” section for more guidance on when to stay home.
- The Director of Communications will identify and address potential language, cultural, and disability barriers associated with communicating COVID-19 information to gathering attendees and staff. The Director of Communications will tailor information that is easily understood by various audiences and is available in alternative formats and languages.
- For contact tracing purposes, attendance should be taken at all gatherings.

TRAINING AND PLANNING

- Staff and leaders should be trained on COVID-19 safety protocols and implement them at any GSUMC gathering.
- Staff should meet after gatherings and determine ways to improve planning and implementation of COVID-19 safety protocols, if the gathering will happen again. Plans will be updated regularly to abide by the state and local situations and orders.

ADVICE FOR GATHERINGS

- The size of a gathering should be determined based on state and local guidance and regulations.
- Avoid large gatherings and maintaining social distancing from others when possible during indoor and outdoor gatherings.

- Prioritize outdoor activities when social distancing can be maintained as much as possible.
- Offer online attendance options in addition to in-person attendance to help reduce the number of attendees.
- Use videoconferencing or teleconferencing when possible for work-related gatherings. When videoconferencing or teleconferencing is not possible, hold gatherings in an open, well-ventilated spaces continuing to maintain a distance of 6 feet apart and wear face coverings.
- Cancel, adjust, or postpone large work-related gatherings that can only occur in person in accordance with state and local regulations and guidance.
- Do not use a room or area if the HVAC system is not working properly. If portable ventilation equipment like fans are used, take steps to minimize air from blowing on one person directly at another person to reduce the potential spread of any airborne or aerosolized viruses.
- Limit attendance or seating capacity to 50% of the room capacity (rounded down) to allow for social distancing. (For example, if room capacity was 15, 50% would be 7.5, meaning 7 people could be in that room). See [Room Capacity](#) for Moss and Zoar room capacities.
- Limit bathroom capacity to allow for social distancing. The only exception to this is if an adult is helping a child during toileting.
- Make sure restrooms are stocked with hand washing supplies including soap and paper towels.
- Provide physical guides to ensure that individuals remains at least six feet apart in lines at other times. Consider creating one-way routes.
- Stagger use of shared indoor spaces by scheduling them far enough apart to allow time for cleaning and disinfecting the room before the next gathering.

DISINFECTION

As a GSUMC staff member, it is your responsibility to implement proper disinfection in your area and to disinfect shared spaces/supplies after you use them for any gatherings. This includes classrooms, offices, and bathrooms. Oxivir Five 16 disinfectant spray bottles are available in most rooms. Other supplies such as alcohol wipes are also available. Submit an FMS request in advance for supplies.

Definitions

- **Cleaning** - using soap and water to remove dirt/grime on a surface. The process doesn't necessarily kill germs, but by remove some, it lowers the risk of germs spreading.
- **Sanitizing** - lowering the number of germs on surfaces or object to a safer level (as judged by health professionals). Sanitizing is used on soft/porous surfaces.
- **Disinfecting** - using chemicals to kill germs on surfaces or objects. The process does not necessarily remove dirt or grime. The process focuses on killing 99.9% of germs to further lower the risk of infection. Disinfection is used on hard/nonporous surfaces.
- **Soft/porous surfaces** - surfaces like carpets/fabric that have small holes/gaps that allow virus/bacteria to hide. Think of something that would absorb disinfectant, rather than having disinfectant sit on top of it.
- **Hard/nonporous surfaces** - surfaces like plastic, laminate, and rubber that do not have tiny holes that absorb liquids. Think of something that would have disinfectant sit on the top of the surface, rather than absorbing it.
- **Electronics** - anything that has a power source (has a battery or that plugs into the wall). This includes surface tablets, iPads, cell phones, computers, computer mouse, computer keyboards, and headphones.

Using Disinfectant: Oxivir Five 16

Use an EPA-approved disinfectant against COVID-19 according to the instructions on the label. GSUMC is only using Oxivir Five 16 to disinfect for on-campus gatherings.

- Oxivir Five 16 is a hospital grade disinfectant that is effective against a wide variety of microorganism including viruses, bacteria, antibiotic-resistant bacteria, fungi, mold, and mildew.
 - Oxivir Five 16 is effective against Covid-19 (tested/confirmed by the Environmental Protection Agency).
 - Oxivir Five 16 has a **5-minute contact time** which means that the disinfectant must remain wet on the surface for a full 5 minutes in order to disinfect.
- Spray down items you want to disinfect. Once you finish spraying, set a 5-minute timer. Wait full 5 minutes before touching the surfaces. Once 5 minutes have passed, you can let remaining disinfectant air dry or wipe with a paper towel.
 - If disinfectant does not remain wet, spray again, and set a new 5-minute timer.
- While Oxivir Five 16 is very safe in terms of disinfectants, keep children away from wet disinfectant on surfaces and where the bottles are stored.

How to Disinfect Items

- Before following disinfectant procedure below, clear all surfaces and put everything away.
- Always clean items with soap and water to get dirt/grime off before disinfecting.
- Soft/porous items - use the most effective method possible.
 - **Most effective** - launder item on high heat and allow to dry completely after washing
 - **Moderately effective** - spray disinfectant on the entire surface of the item to sanitize item
 - **Least effective** - quarantine items like books or paper-based material for three days. These items should be placed in a plastic bin and they should not be touched until the quarantine is complete.
- Electronics - use alcohol wipes to wipe down surfaces of electronics. Alcohol wipes should wet the entire surface of the electronics.
- Hard/nonporous items - use the dishwasher whenever possible.
 - **Using the dishwasher** - Place item in dishwasher. If the items are the same size as your fist or smaller, place items in the mesh bag, and then in the dishwasher. Start dishwasher cycle and allow to dry completely after washing.
 - **Using disinfectant spray** - spray the disinfectant on the entire surface of the item to disinfect. The disinfectant spray must remain wet on surface for 5 full minutes to be effective. If it dries to quickly, spray more on the surface.

When Should Items or Surfaces be Disinfected?

- Follow “Disinfecting: How to Disinfect Items” procedure in the following situations.
 - Multiple times a day or in between uses if possible:
 - Frequently touched surfaces such as door handles, hand railings, counters. These are usually in high traffic area and touched by multiple people during the day.
 - High touch areas in bathrooms such as faucets, toilets, stall doors, counter tops, light switches, and door knobs.
 - After use and before the next use:
 - Individual supplies or objects such as pens and toys
 - Supplies used by a group of people
 - Room surfaces such as counters, tables, and anything people have touched

When Should the Backpack Sprayer be Used?

- The backpack sprayer should be used in large rooms and bathrooms, or any room used by children. The room needs to be cleaned (remove dirt/grime) before using the backpack sprayer and high touch points need to be disinfected including door knobs and table surfaces.
- How to set up a room to use the backpack sprayer:
 - Make sure all items are put away and surfaces are clean (remove dirt/grime).
 - In rooms with tables and chairs, pull out chairs 1 foot from table and do not stack.
- Using the backpack sprayer:
 - Before using the backpack sprayer, view the backpack sprayer training video on the common drive under @Facility. Anyone trained can use the backpack sprayer.
 - Wear proper safety equipment when using the backpack sprayer including a KN95 mask and eye protection (safety glass or any other type of glasses). Everyone in the room being sprayed needs to have the proper safety equipment.
 - Shock Hazard: Do not touch nozzle while backpack sprayer is turned on.
 - While backpack sprayer is off, fill tank with Oxivir Five 16 disinfectant from chemical dispenser in Janitor closet.
 - Make sure backpack sprayer battery is installed correctly and is charged.
 - Turn backpack sprayer on. Squeeze handle to spray. Use handle lock to lock handle when not in use. Turn off after use.
 - After spraying, wait 5 minutes.
 - Wash hands after disinfecting.

ADDENDUM A - ROOM CAPACITY

Total room capacity is listed on emergency exit maps in classrooms and on the Hub. To calculate 50% room capacity, divide by two and round down.

MOSS

Room	Total Capacity	50% Capacity
102	20	10
103	19	9
104	30	15
105	20	10
106	20	10
108	17	8
110	19	9
120	32	16
122	34	17
124	40	20
125	20	10
127	30	15
208	17	8
209/211	25	12
210	17	8
212	11	5
301	16	8
303	16	8
Bawl Room 304	22	11
305	16	8
307	16	8
309	17	8
311	16	8
320	26	13
321	28	14

Room	Total Capacity	50% Capacity
322	20	10
323	27	13
324	26	13
325	28	14
326	24	12
327	28	14
328	24	12
413	20	10
415	18	9
417	18	9
419A	21	10
419B	21	10
420	21	10
421	20	10
422	20	10
423	20	10
Living Room Worship	364	182
Living Room Game	307	153
Worship Center	693	346
Green Room 332	29	14
Choir Room	72	36
Cottage - Left	55	27
Cottage - Middle	27	13
Cottage - Right	32	16

ZOAR

Room	Total Capacity	50% Capacity
Kids Left Rm 201	9	4
Kids Middle Rm 202	8	4
Kids Right Rm 203	10	5
Kids Main	62	31
Nursery Left Rm 113	18	9
Nursery Back Rm 114	23	11
Nursery Right Rm 116	23	11
Chapel Front	180	90
Chapel Back	41	20
LifeGroup Room	13	6
Worship Center Room	369	184

COVID-19 SAFETY PROTOCOL ACKNOWLEDGEMENT

Please read the policy and complete the acknowledgement form below.

First Name _____ Last Name: _____

Email: _____

I acknowledge that I have received and read the COVID-19 Safety Protocol. I understand the policy and will adhere to all guidelines.

Signature: _____ Date: _____