Comprehensive COVID-19 Exposure Control, Mitigation, and Recovery Plan

Christ Episcopal Church
Seattle, Washington

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Introduction – Comprehensive COVID Plan

The following is a plan created by the leaders of Christ Episcopal Church, Seattle (hereafter referred to as “Christ Church” or “CEC”) to be used by the Christ Church congregation and staff, and anyone who otherwise uses Christ Church facilities. Because this plan is expected to change from time to time, version and date issued are included at the bottom of each page.

The measures described in this document are based primarily from COVID-19 guidance from the Centers for Disease Control and Prevention. (See https://www.cdc.gov/coronavirus/2019-ncov/index.html.)

Document Change Log

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About COVID-19

COVID-19 Illness
• Infection with COVID-19 can cause illness ranging from asymptomatic to severe, and, in some cases, can be fatal.

How COVID-19 Spreads

COVID-19 most commonly spreads during close contact
• People who are physically near (within 6 feet) a person with COVID-19 or have direct contact with that person are at greatest risk of infection.
• When people with COVID-19 cough, sneeze, sing, talk, or breathe, they produce respiratory droplets. These droplets can range in size from larger droplets (some of which are visible) to smaller droplets. Small droplets can also form particles when they dry very quickly in the airstream.
• Infections occur mainly through exposure to respiratory droplets when a person is in close contact with someone who has COVID-19.
• Respiratory droplets cause infection when they are inhaled or deposited on mucous membranes, such as those that line the inside of the nose and mouth.
• As the respiratory droplets travel further from the person with COVID-19, the concentration of these droplets decreases. Larger droplets fall out of the air due to gravity. Smaller droplets and particles spread apart in the air.
• With passing time, the amount of infection virus in respiratory droplets also decreases.

COVID-19 can sometimes be spread by airborne transmission
• Some infections can be spread by exposure to virus in small droplets and particles that can linger in the air for minutes to hours. These viruses may be able to infect people who are further than 6 feet away from the person who is infected or after that person has left the space.
• This kind of spread is referred to as airborne transmission.
• Available data indicate that it is much more common for the virus that causes COVID-19 to spread through close contact with a person who has COVID-19 than through airborne transmission.

COVID-19 spreads less commonly through contact with contaminated surfaces
• Respiratory droplets can also land on surfaces and objects. It is possible that a person could get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes.
• Spread from touching surfaces is not thought to be a common way that COVID-19 spreads.

COVID-19 may spread by people who have few to no symptoms
• Evidence suggests that people who have mild symptoms or no symptoms can spread it to others without realizing they are infected.

How to Prevent the Spread of COVID-19

• Wash hands often
  o Wash with soap and water for at least 20 seconds, especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
  o It is especially important to wash: before eating or preparing food, before touching your face, after using the restroom, after leaving a public place, after blowing your nose or coughing or sneezing, after handling your mask, after changing a diaper, after caring for someone who is sick, after touching animals or pets
  o If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
  o Avoid touching eyes, nose, and mouth with unwashed hands
• Avoid close contact
  o Keep at least 6 feet of distance between yourself and people who don’t live in your household
• Cover mouth and nose with a mask when around others
• Cover coughs and sneezes
• Clean and disinfect
  o Clean and disinfect frequently touched surfaces daily
• Monitor your health

Vaccine Recommendation
• While influenza is a separate disease from COVID-19, public health authorities recommend that individuals be vaccinated against seasonal influenza, both to prevent influenza, but also to reduce load on the healthcare system that may be needed for COVID-19.
• When COVID-19 vaccines become available, we will refer to the recommendation of public health authorities.

Who is at Greater Risk from COVID-19?
Older Adults

Among adults, the risk for severe illness from COVID-19 increases with age, with older adults at highest risk.

Adults with Certain Medical Conditions
(See https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html)

- Adults of any age with the following conditions are at increased of risk of severe illness from COVID-19: cancer, chronic kidney disease, COPD (chronic obstructive pulmonary disease), heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies), immunocompromised state (weakened immune system) from solid organ transplant, unhealthy obesity, sickle cell disease, smoking, type 2 diabetes mellitus
- Adults of any age with the following conditions might be at an increased risk for severe illness from COVID-19: asthma (moderate to severe), cerebrovascular disease, cystic fibrosis, hypertension or high blood pressure, immunocompromised state (from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines), neurologic conditions, such as dementia, liver disease, obesity, pregnancy, pulmonary fibrosis (having damaged or scarred lung tissues), thalassemia (a type of blood disorder), type 1 diabetes mellitus.

Children and Teens
• While fewer children have been sick with COVID-19 compared to adults, children can be infected by the virus that causes COVID-19, can get sick from COVID-19, and can spread the virus that causes COVID-19 to others.
• Babies under 1 year old might be more likely to have severe illness from COVID-19.
• Other children, regardless of age, with the following underlying medical conditions might also be at increased risk of severe illness compared to other children: asthma or chronic lung disease, diabetes, genetic, neurologic, or metabolic conditions, heart disease since birth, immunosuppression (weakened immune system due to certain medical conditions or being on medications that weaken the immune system), medical complexity (children with multiple chronic conditions that affect many parts of the body who are often dependent on technology and other significant supports for daily life), obesity.
General COVID-19 Exposure Control, Mitigation, and Recovery Measures

The measures described in this section are intended to satisfy the requirements for a comprehensive plan as described in the “Phase 1, Phase 2, and Phase 3 Religious and Faith-based Organization COVID-19 Requirements” issued by the Governor of the State of Washington, and the “FAQ for Religious and Faith-Based Organizations” issued by the King County Public Health Department.

These measures apply to all activities in Christ Church facilities.

Personal Protective Equipment

- Masks or face coverings must be worn while in the Christ Church facility.
- While it is expected that individuals will provide their own mask, Christ Church will maintain a limited stock of masks for those who arrive without a mask.
- Disposable gloves shall be available for activities such as cleaning and disinfecting.

Physical distancing

- Physical distance of at least 6 feet must be maintained by those in the facility, unless they are members of the same household group.
- Markings shall be placed to indicate distancing of 6 feet in areas where multiple individuals are likely to gather, such as, but not limited to, entry to the church for worship, seating areas, restroom waiting areas.
- Distancing of at least 6 feet shall be maintained between work stations.
- Distancing and COVID safety posters shall be displayed prominently inside and outside the church building.

Hygiene

- Posters depicting hygiene practices shall be posted prominently. These practices include:
  - Cover nose and mouth with tissue or elbow when coughing or sneezing.
  - Wash hands frequently, especially after coughing, sneezing, or blowing one’s nose.
  - Wash hands using soap and water for at least 20 seconds.
  - Use alcohol-based hand sanitizer.

Sanitation

- Alcohol-based hand sanitizer and disinfecting wipes shall be readily available at entries and in the nave.
- Regular cleaning shall be provided by a contracted janitorial service.
- Other cleaning shall be performed when surfaces are dirty.
- High touch areas shall be cleaned with soapy water when dirty, and disinfected after use using appropriate disinfectants. High touch areas include, but are not limited to:
personal work stations, mirrors, pews, chairs, tables, headrests and armrests, doorknobs, handrails, light switches, restrooms and breakrooms.

**Symptom Screening**
- Every person who enters the Christ Church facility must prescreen themselves for the following and may not attend if:
  - They are experiencing any of the following symptoms: chills, fever of 100.4F (38C) or higher, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.
  - They have been diagnosed with or have tested positive for COVID-19 in the previous 10 days.
  - They have been knowingly in close or proximate contact with someone who has been diagnosed or tested positive for COVID-19 in the previous 14 days.
- Every person who enters the Christ Church facility must also complete the Christ Church COVID-19 “Attestation and Consent to Work/Participate Form”. These forms shall be kept in a secure location for 21 days.

**Returning After Illness or Exposure**
- If a person has been diagnosed with COVID-19, or tested positive for COVID-19, they may return to the Christ Church facility after meeting the following requirements:
  - 10 days since symptoms first appeared or 10 days after the positive test, **AND**
  - 24 hours with no fever without the use of fever-reducing medications **AND**
  - Other symptoms* of COVID-19 are improving or absent.
  - *Note, loss of taste and smell may persist for an extended period and need not delay the end of isolation
- If a person was severely ill with COVID-19 or has a severely weakened immune system (immunocompromised) due to a health condition or medication, remaining home for longer than 10 days may be warranted, should be discussed with the individual’s healthcare provider.
- Anyone who has had close or proximate contact with someone with COVID-19 should stay home for 14 days after their last exposure to that person, unless:
  - They have had COVID-19 within the previous 3 months **AND**
  - They have recovered **AND**
  - They remain without COVID-19 symptoms

**Exposure Response**
- Should an employee or attendee report to Christ Church of being diagnosed with COVID-19 within 10 days of attending a function in the church:
  - Defined cleaning and disinfection protocol shall be followed.
  - Members and employees and event attendees who have completed the contact tracing form shall be notified by email of the potential exposure, with a
suggestion that those in attendance at the same function either monitor their health, be tested for COVID-19, or self-quarantine.

- The identity of the person with COVID-19 shall not be divulged in the announcement unless permission has been expressly granted by the person.
- The name and contact information for all who attend an event shall be collected via the COVID-19 Attestation and Consent to Work/Participate forms. This information will be provided to public health authorities if requested for contact tracing purposes. The forms shall be kept in a secure location for 21 days after the event.

Training
- The rector or designee shall train volunteers to act as COVID supervisors, ushers, and to clean and sanitize prior to and following services. Then a sufficient number of people to cover all three roles shall be assigned to every gathering.

Facility ventilation measures
To reduce risks related to air circulation, Christ Church is adding the following technologies to its HVAC system prior to reopening for in-person worship:

- Ventilation filtering – to capture particles
- Bipolar ionization – generates reactive ions that react with airborne contaminants
- Ultraviolet-C germicidal irradiation – inactivates viral, bacterial, and fungal organisms
Appendix A – Measures for In-Person Worship or Events

This appendix is intended to list measures to be performed during in-person worship. The material is taken from the Comprehensive COVID Plan. If there is conflict or omission, the Comprehensive Plan shall govern.

COVID Supervisor
- There will be a COVID Supervisor at all worship events. It shall be the responsibility of the COVID Supervisor to ensure that all persons at the gathering are following these guidelines.

At-Risk Individuals
- Individuals who are at high risk from COVID-19, per the CDC guidelines, are strongly discouraged from attending in-person worship or events at Christ Church.

Before Arrival at Worship
- An online reservation system will be used to ensure that allowed capacities are not exceeded. A limited number of slots will be set aside for walk-ins.

Personal Protective Equipment
- Masks or face coverings must be worn at worship services.
- All persons, except children under the age of 5, are expected to bring their own mask or face covering. A limited number of masks will be available for those who require one.
- Very limited mask removal is permitted at certain points during worship. See Protocols for Eucharist in Appendix 2.

Physical distancing
- All persons must maintain a distance of at least 6 feet from other persons. This restriction does not apply to persons who live in the same household.
- Physical contact between members of different household groups is not allowed. Prohibited actions include, but are not limited to: hugs, handshakes, fist bumps, elbow bumps, etc.
- Areas for seating and waiting shall be marked to facilitate distancing.

Maintaining hygiene
- A handwashing station shall be provided.
- Hand sanitizer shall be provided.
- Tissues and trash receptacles shall be readily available.
- When restrooms are made available for use by the congregation, they shall be used for urgent or emergency use only. A person will monitor usage to maintain physical distancing.
- Handwashing and disinfecting procedures will be posted in the restroom.
• Music and singing will be at least as restrictive as the then current guidelines established by the state, county, and the diocese.
• Bulletins will be published in electronic form. Attendees may bring their own printed or electronic copy. Paper bulletins be provided only after ending of restrictions by state, county, bishop, and rector.

Sanitation
• Indoor – As there will be only one service a week, regularly contracted cleaning is deemed sufficient. Outdoor – no cleaning is required.
• High touch areas and items shall be disinfected before and after worship. These include, but are not limited to:
  o Seating backs and seats
  o Door handles and knobs
  o Light switches
• EPA-approved disinfectants shall be used for this purpose.

Symptom Screening
• Touchless temperature screening shall be performed on every individual while checking in for worship. Individuals with a temperature of 100.4 F or above WILL NOT BE ADMITTED.
• Every person who enters the Christ Church facility must prescreen themselves for the following and may not attend if:
  o They are experiencing any of the following symptoms: chills, fever of 100.4F (38C) or higher, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.
  o They have been diagnosed with or have tested positive for COVID-19 in the previous 10 days.
  o They have been knowingly in close or proximate contact with someone who has been diagnosed with or tested positive for COVID-19 in the previous 14 days.

Arriving for Worship
• A single entry/exit shall be used for access to worship services. Indoor – church door facing Brooklyn Avenue. Outdoor – courtyard gate.
• Masks must be worn. Those refusing to wear a mask will not be admitted.
• While waiting to enter, physical distancing must be maintained. Markers will placed to indicate appropriate distancing while waiting.
• Each person shall complete and submit their own COVID-19 Attestation and Consent to Work/Participate form. Children under the age of 18 may be included on the form of a parent or guardian. Sanitized pens shall be provided.
• Each person who completes a form will receive a sticker that must be worn in a visible location. The COVID Supervisor will check for stickers during the worship service.
• Each person will wash or sanitize hands on entry.
• If an offering is to be collected, a collection receptacle will be placed at the back of the church and offerings should be deposited there at time of entry.

Seating
• Indoor – Alternate pews will be used for seating and the other pews will be blocked. Seating will be clearly marked to maintain a minimum of 6 feet of distancing. Outdoor – Places shall be marked to maintain distancing of 6 feet.
• Non-essential items, such as prayer books and hymnals shall be removed.
• Attendees shall be directed where to sit.
  o Seating shall begin at seats farthest away from the entrance, working toward the entrance.

Departing from Worship
• Persons shall remain in their seats until dismissed by group.
  o Persons will be dismissed from nearest the exit, working toward the farthest seats.
• Attendees shall depart from church grounds immediately after being dismissed. They shall not gather at the exit. Physical distancing shall be maintained.

Training
• The rector or designee shall train volunteers to act as COVID supervisors, ushers, and to clean and sanitize prior to and following services. Then sufficient people to cover all three roles shall be assigned to every gathering.
Appendix B – Protocols for Specific Rites

Baptism Protocols During Phase III

1. For baptism, only one Presider is allowed for all manual acts, blessing the water, baptizing, anointing, etc.
2. Water should not be put into the font until the actual blessing of the water.
3. Only the Presider may touch the water.
4. Presider will vigorously wash their hands and sanitize before the Blessing of the Water, and will repeat this action before and after each baptism.
5. If aspersions are planned for the congregation, that water should be extracted from the font, in a dedicated bowl, by the Presider, before any baptisms take place and set aside for use for this.
6. If there are multiple baptisms, you have several options when baptizing. You may take water in your hands and move away from over the font, and pour the water over the candidates head. Or you could use a separate bowl and walk to the candidate to baptize, trying not to let water fall off the head of the person, back into the bowl. If this does happen, please use a new bowl. In fact, it would be best to have a new bowl for each candidate.
7. Presider only anoints. Wearing mask.
8. Candles should either be not used during this time, OR, you may light the candle, show it to the person, then blow it out and keep this to be sanitized after the service and given to the candidate. You could do all of this after the service if you wish.
9. During this time there is to be no sprinkling of the congregation with the water in font or bowls used for baptisms. Only use the water set aside in the beginning.
10. All water, in all bowls and the font should be discarded BEFORE the ending of the service.
11. Prior to the baptism you could send a link to the congregants with a card whereby people could download and print that includes the line, “Will you who witness these vows do all in your power to support this person in her life in Christ? We will.” And ask people to write a message and mail it to the baptismal candidate, affirming their participation in the liturgy and the covenant and whatever other message of welcome and support they want to give.
Eucharist Protocols During Phase III

1. Proper precautions and all PPE and distancing guidelines should be followed by all in the chain of work. Altar Guild, and all in the chain need to carefully sanitize all surfaces, wash and sanitize hands, wear masks, etc. All linens, including the pall should be cleaned thoroughly after each use and certainly before each use.

2. Everyone in the service, and in the altar party, should always wear masks. Only the one speaking at any time may remove their mask.

3. The Presider alone will set the table. Try to keep all other hands out of this, including any altar assistants. This includes bringing items from the credence table. The Presider should simply go to retrieve all the elements, vessels, etc.

4. Presider should vigorously wash and sanitize hands before the service, and multiple times throughout the service, most especially just before setting the table and beginning the consecration prayer. This should not be ceremonial washing but vigorous washing.

5. In setting the table, the Presider should use the pall to cover all wafers, and only expose the priest host. If you want to use an additional covering you may but at least the pall. The main point here is to stop droplets that may come from the Presider.

6. Priest host will only be touched and consumed by the Presider.

7. No one else should stand near the Presider at the altar.

8. For distribution, the presider will either consume the priest host before distribution or set it aside to consume after all have received.

9. Wafers are then placed at least 6 inches apart in a line around the side and front of the altar. Presider should make every effort not to touch the linen if possible.

10. If there are steps or a concern about accessibility you can consider another table put at floor level upon which the Presider could also place wafers. This could also be used in larger settings to offer multiple access points to communion.

11. After Presider has placed these first wafers on the table, the ushers can begin to allow the congregants to come forward one at a time, all the while keeping social distance. You might consider putting marks with tape on the floor to show six feet distance and offer some guidance.

12. Before approaching the altar EVERY PERSON receiving should sanitize their hands, allowing them to dry, before going forward.

13. Every person should take one wafer, and NOT consume it until back at their seat. At that point they can remove their mask and consume the wafer. If possible, sanitizer could be in each pew or aisle so that people could sanitize after consumption if possible and desired.

14. You are highly encouraged NOT to use real bread during this time. If you choose to you must follow the above guidelines but can only distribute by putting bread into a small disposable cup or similar.

15. There is to be no wine offered to anyone other than the Presider until at least Phase IV. More guidelines will come as we get to that phase.
Appendix C – Measures for Street Chaplaincy

This appendix is intended to list measures to be performed as part of Street Chaplaincy. The material is taken from the Comprehensive COVID Plan. If there is conflict or omission, the Comprehensive Plan shall govern.

Street Chaplaincy Background

Street Chaplaincy at Christ Church is a parish ministry which serves the people on the streets of the University District by providing zero-barrier distribution of personal-use items, including water, snacks, socks, underwear, and other necessities. Christ Church is known for performing this ministry every Sunday, rain or shine, hot or cold. When COVID hit, changes were made to allow Street Chaplaincy to continue.

Street Chaplaincy occurs in two parts. Packers prepack gallon-size ziplock bags with most items, with underwear and candy bars kept separate to provide choice to our clients. Items to be distributed are loaded into a wagon. Walkers follow a route through the University District and distribute the prepacked bags, underwear, and candy bars to recipients.

Street Chaplaincy Lead

- There shall be a Lead at all Street Chaplaincy activities. It shall be the responsibility of the Lead to ensure that all persons at the gathering are following these guidelines.

At-Risk Individuals

- Those who are at high risk from COVID-19, per CDC guidelines, are discouraged from participating in packing for Street Chaplaincy.
- Those who are at high risk from COVID-19 per CDC guidelines are PROHIBITED from walking for Street Chaplaincy due to significantly increased risk of exposure.

Signup

- A signup system shall be used to ensure that the number of walkers or packers is limited to no more than three persons.

Personal Protective Equipment

- Masks or face coverings shall be worn during Street Chaplaincy activities.
- All persons, are expected to bring their own mask or face covering. A limited number of masks will be available for those who require one.
- Walking – gloves shall be worn while walking on Street Chaplaincy.
- Packing – hands shall be washed or sanitized prior to packing. Subsequent hand washing or sanitizing shall be performed as needed.

Physical distancing

- All persons participating in Street Chaplaincy must maintain a distance of at least 6 feet from other persons. This restriction does not apply to persons who live in the same household.
Walkers must endeavor to maintain distancing, though when items are being given to a client, momentary violation of 6 foot distancing is likely to occur.

Maintaining hygiene
- While packing, hand washing and/or hand sanitizer shall be provided.
- While walking, hand sanitizer shall be carried in case of inadvertent contact with a client.

Sanitation
- As Street Chaplaincy occurs once a week, regularly contracted cleaning of the room where Street Chaplaincy activities occur is deemed sufficient.
- High touch areas and items shall be disinfected after being used in Street Chaplaincy activities. These include, but are not limited to:
  - High-touch areas of the wagon
  - Cabinet door handles and locks
- Disinfecting shall be performed by a member of the Street Chaplaincy team, and EPA-approved disinfectant wipes shall be used for this purpose.

Symptom Screening
- Every person who enters the Christ Church facility must prescreen themselves for the following and may not attend if:
  - They are experiencing any of the following symptoms: chills, fever of 100.4°F (38°C) or higher, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.
  - They have been diagnosed with or have tested positive for COVID-19 in the previous 10 days.
  - They have been knowingly in close or proximate contact with someone who has been diagnosed or tested positive for COVID-19 in the previous 14 days.
  - Each person shall complete their own COVID-19 Attestation and Consent to Work/Participate form, either on paper or in the reservation system.

Training
- Street Chaplaincy Leads shall be trained on the measures described in this Appendix.
Appendix D – COVID-19 Building Entry Consent, Attestation, and Contact Tracing Form
The health and wellbeing of our community is our paramount concern. Therefore, all participants in the above event are required to sign this form and agree to voluntarily assume any risk of physically participating at this event.

I understand that:

- COVID-19 is a serious, infectious disease that can result in long-term damage to my health, which may include damage to the respiratory, cardiovascular, and neurological systems as well as other vital organs, or may even result in death.
- My attendance and participation may pose a risk of contracting COVID-19.
- I may pose a risk to others if I have recently been exposed to COVID-19.
- If I have a condition(s) that places me at higher-risk, as defined by the CDC, I should stay home and avoid in-person participation.

Health Screening Criteria:

- I currently have, or have had in the past 14 days, symptoms of COVID-19:
  - Fever or chills
  - Cough
  - Fatigue
  - Muscle or body aches
  - Headache
  - New loss of taste or smell
  - Sore throat
  - Congestion or runny nose
  - Diarrhea
  - Nausea or vomiting
  - Shortness of breath or difficulty breathing
- I have tested positive for COVID-19 in the past 14 days
- I have been in close or proximate contact with someone who has had symptoms of COVID-19, or have attended gatherings where physical distancing or masking was not practiced, in the past 14 days
- I have traveled internationally or to a COVID hotspot in the past 14 days

If you meet ANY of these criteria, please leave the premises IMMEDIATELY

Mitigation Protocols - I agree to:

- Wear a mask at all times, indoors and outdoors, until I leave the property.
- Maintain a distance of at least 6 feet from any persons who are not members of my household, except as needed for temperature screening.
- Clean my hands with soap or hand sanitizer upon entering the building, before and after contact with high-touch surfaces, before and after using the restroom.
- Notify the church immediately if I test positive for COVID-19 within 14 days of the above event
- Allow my name and contact information to be shared with Public Health officials so that they may engage in an approved contact tracing program in the event of an outbreak. I understand that this form will be retained for 21 days for this purpose only.

Your participation at this event is conditioned upon your acceptance and agreement to the above.

Name ____________________________________________ Date ____________________

Phone number __________________________ Email address ________________________________

Signature ________________________________________________________________