**Earlwood Baptist Church**

**COVID-19 INFECTION CONTROL POLICY**

**Summary:** COVID-19 is a serious infectious disease that is passed from person to person through respiratory droplets and contact. While in Christ, we need not be afraid, we must be cautious and fulfil our duty of care to our congregation and the general public. All organisations including churches are responsible for minimising transmission of disease. Because we as a community value Christ’s injunction to love our neighbours as ourselves, we will seek to minimise the risk of the transmission of COVID-19 among our people, and subsequently, the wider public. This policy document outlines practices that we as a community commit to, to minimise the risk of transmission of COVID-19 among our staff, leaders, volunteers, members and visitors.

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**Applies to:** All staff, leaders, diaconate and officially recognised volunteers. To be used for all official Earlwood Baptist Church meetings. Does not applied to social gatherings among Earlwood Baptist Church members.

**Governance and oversight:** Senior Pastor and church council

**Signed and Approved by:**

David Glinatsis Ken Kamau

Church secretary Senior Pastor

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## **1. PURPOSE**

The primary purpose of the EBC COVID-19 infection control policy is to operate alongside government recommendations while providing leadership to all EBC staff, leaders and volunteers on how to effectively prevent and manage the spread of COVID-19 within our community.

## **2. GOVERNANCE**

The Senior Pastor and Diaconate will be responsible for producing, distributing and enforcing this policy directive. Furthermore, they will be responsible for training all volunteers in infection control procedures and for investigating and addressing any breach to this policy. They may choose to delegate this responsibility to a suitable person.

## **3. THE RISK OF COVID-19**

COVID-19 is a new virus that has spread exponentially over the globe infecting millions of people and causing the deaths of hundreds of thousands of people. While we are still learning about this virus, we know the most common symptoms include tiredness, sore throat and dry cough. It can also cause other flu-like symptoms including aches and pains, headache, loss of smell and taste and headache. In some people, it can cause serious symptoms including breathing problems, heart attack, kidney failure and stroke. In some cases, COVID-19 can result in death. While those who are older, obese and have chronic diseases are at a higher risk of serious disease and death, the young and healthy can also become seriously ill and die.

When we as a church community meet in person, there is risk that someone who is infected with COVID-19 will spread it to others in that meeting. Those people then pose a risk to the wider community as they spread COVID-19 to their household members and wider community. We as a church have a duty of care to protect staff, leaders, volunteers, regular attenders and guests from spread of disease. We also have a duty to the wider community to not perpetuate the spread of disease further. Therefore, we must remain vigilant and committed to enacting measures to prevent disease spread.

## **4. BACKGROUND**

### 4.1 Scope

This document must be implemented both within the Earlwood Baptist Church building, or wherever staff, leaders, volunteers or members gather for official church purposes. This policy does not cover social gatherings among people affiliated with EBC. This policy includes:

* Strategies to minimise transmission of COVID-19 when and where we meet
* Incident management
* Education of volunteers
* Advice to be given to congregation members
* Seating arrangements and maximum capacity for each space
* Hand hygiene requirements
* Use of masks
* Surface cleaning requirements
* COVIDsafe app
* Food handling and safety
* Communion and offering
* Updating personal details and maintaining attendance logs
* Management of a confirmed case of COVID-19 within our community
* Equipment
* Signage to be displayed in church building
* COVID-19 Safety plan

### 4.2 Key Definitions

|  |  |
| --- | --- |
| Airborne | For a disease to be airborne, it must be contained in particles small enough to be suspended in air for some time. Under normal circumstances, COVID-19 is not airborne. It however can become airborne through certain medical procedures.  |
| Alcohol based handrub (ABHR) | An alcohol-containing preparation designed for reducing the number of infectious microbes on dry unsoiled hands. Must consist of 60% alcohol to be effective.  |
| Contact  | The touching of any persons or surfaces. Infections such as COVID-19 can be spread from person to person when someone touches another person or surface contaminated by COVID-19, and then touches their mouth, nose or eyes.  |
| Contact precautions | Precautions used to prevent the transmission of an infectious disease that is spread by touching an infected person or the environment they occupy. Contact precautions include performing hand hygiene before and after touching another person or shared environment and wearing gloves and plastic apron when doing surface cleaning. |
| Contact tracing | When a person becomes infected, public health officials will trace who that person has been in contact with. Those people are then be contacted and advised to be tested and to self-isolate |
| Droplet | Certain diseases such as COVID-19 and influenza are spread through the droplet route. When a person sneezes, coughs and speaks, they expel in their breath droplets of saliva and mucus. COVID-19 has been detected in these droplets. These droplets can spread up to 1 meter, and sometimes more when coughing sneezing, and some suggest, with singing. They are then suspended in air for varied periods of time which are dependent on environmental conditions. Others who breathe in these droplets can become infected. |
| Droplet precaution  | Precautions used to prevent the transmission of an infectious disease that is spread through respiratory droplets. The primary droplet precaution recommended in social settings is physical distancing. That is remaining at least 1.5 meters apart. Mask wearing is another effective droplet precaution. While mask wearing has not been mandated in social or work settings, people are free to use them if they wish.  |
| Hand Hygiene  | A general term used to describe the process of reducing the number of microorganisms on hands. ABHR may be used on unsoiled hands. Handwashing with soap and water followed by adequate drying is recommended when hands are soiled.  |
| Outbreak | A state characterised by multiple people who have become infected from a single location or event. |
| Pandemic | A disease that is prevalent over a whole country or the entire world. |
| Personal Protective Equipment (PPE) | Protective barriers used to prevent a person’s mucous membranes (eyes, nose, mouth, throat), skin and clothing from coming into contact with an infectious agent.  |
| Physical Distancing (also termed social distancing) | Because COVID-19 is spread through the contact and droplet rout, physical distancing is recommended to prevent this transmission. This involves remaining 1.5 meters from other people, limiting room capacity to one person for every 4m2  and not touching other people or their belongings. |
| Self-isolate  | This measure is implemented is cases of confirmed or suspected COVID-19 infection. This means to stay in your home for 14 days, or until you have been cleared of infection. During this time, you must not leave your home unless it is an emergency. You do not go to public places such as your workplace, or shopping centres and you do not allow visitors to enter your home.  |
| Surface Cleaning | Because COVID-19 can survive on surfaces for significant periods of time (estimates range from hours to days), all high touch surfaces must be cleaned at frequent intervals. The goal of such cleaning is to minimise the presence of infective material on high touch surfaces. Cleaning must be done using antimicrobial detergents, following manufacturer’s specification.  |

### 4.3 Legislative Requirements

Currently, the laws related to COVID-19 change frequently in response to our changing situation. In addition to reading this policy, it is the responsibility of the Senior Pastor and the Diaconate to make themselves aware of these laws as they change and ensure pastoral staff and volunteers are made aware of laws as they change and are applicable to them. We always have a responsibility to operate within the scope of the law. Staff and diaconate must keep abreast of NSW Government regulations and abide by them always. The latest NSW government guidelines can be accessed through the following portals:

* General restrictions within NSW can be accessed here: <https://www.nsw.gov.au/covid-19/what-you-can-and-cant-do-under-rules>
* Guidelines for places of worship can be accessed here: <https://www.nsw.gov.au/covid-19/industry-guidelines/places-of-worship>
* Leaders and staff are encouraged to find ways to be regularly updated on changing legislation. This may include subscribing to new sites or following NSW Health on social media.
* If legislation changes in such as way as to contradict anything in this policy, then that legislation will take priority over this policy document. This policy will be updated in due course to reflect this change in legislation.

## **5. RISK MANAGEMENT**

### 5.1 Safety Plan

The Senior Pastor and Diaconate are responsible for writing a safety plan for every event or regular gathering. The NSW Government COVID-19 Safety Plan template must be used for this. This plan must be filled in, printed and signed by the Senior Pastor for all meeting types. If appendices are needed, they can be written and attached to this safety plan. This task may be delegated to a responsible person. This form can be accessed here: <https://www.nsw.gov.au/sites/default/files/2020-05/covid-19-safety-plan-places-of-worship_2.pdf>

### 5.2 Incident management

Any difficulties adhering to this policy, non-compliance or incident should be reported to the Senior Pastor, and an incident form must be filled in. The Senior Pastor will then be responsible for remedying this incident and will mediate this with the person(s) involved. They may escalate this to other staff or the diaconate for consultation if required.

### 5.3 Education

All volunteers must undergo training in the risk mitigation requirements outlined in this policy. This training should be repeated annually for the duration of this pandemic to maintain competence. The Senior Pastor is responsible for this training. They may delegate this responsibility to someone who is capable to do this.

## **6. RISK MITIGATION REQUIREMENTS**

### 6.1 Entry and Exit points

Anyone meeting certain conditions will be refused entry. These include:

* Anyone who in the last 14 days has had flu-like symptoms (fever, dry cough, shortness of breath, sore throat, aches and pains, runny nose, congestion),
* Anyone who in the last 14 days has had contact with anyone who has displayed flu-like symptoms,
* Anyone who has recently returned from overseas or sea travel in the last 14 days or has been in contact with anyone who has.

The following posters should be displayed at entrances:

* Maximum capacity for facility. If the entrance is to an isolated section of the church such as the hall, sanctuary or entrance, then maximum capacity for that section of the church will also be displayed,
* Signage promoting handwashing, respiratory etiquette, social distancing and staying home when sick. This may be a single poster
* Conditions for entry must also be displayed. This includes forbidding entry to those listed in the above criteria.

All entry and exit points must be clear of obstacles to reduce cross-contamination and to make surface cleaning easier. Unnecessary furniture and objects should be removed, and all doors must be propped open.

Where practical, entry and exit points should be considered one-way, either entrance or exit only. In the case of a single entry point, people should be discouraged from entering as others are exiting and vice versa.

ABHR must be available at all entry points.

During gatherings, a single welcomer will be stationed at the entry point. Their responsibility is to ask everyone entering if they are well, if they have been in contact with someone with flu-like symptoms, or if they have recently returned from overseas or sea travel. They will politely turn away anyone meeting these criteria. They will discourage physical contact and will encourage everyone to use ABHR as they enter. That same person will encourage everyone to use ABHR as they exit.

### 6.2 Prohibition of Shared Objects

Objects must not be shared. This means that church Bibles can no longer be used by attendees, and kitchen items such as glasses, jugs, plates and cutlery must not be used. Attendees must be discouraged from sharing their personal items, food or drink. Single use cups will be made available in the kitchen for anyone needing a drink.

### 6.3 Infection Control Advice to Gatherers

Prior to the commencement or recommencement of any gathering, infection control advice must be sent to all those intending to come. This includes:

* Avoid all physical contact with others. This includes hugs, handshakes and touching other’s belongings,
* Stay 1.5 meters away from other people at all times,
* Do not share items, food or drink,
* Cough or sneeze into your elbow,
* If you need to use a tissue, please dispose of it and wash your hands after
* Use ABHR when entering and leaving,
* If you are tested positive to COVID 19 or are contact traced by a public health official within 14 days of attending a meeting, please advise church leadership of this.
* Stay home if you have:
	+ returned from overseas or sea travel in the last 14 days,
	+ been sick with fever or flu-like symptoms in the last 14 days,
	+ been told to self-isolate by a public health official or doctor,
	+ been in close contact with anyone with flu-like symptoms or who has been diagnosed with COVID,
	+ have been tested for COVID-19 and don’t have results yet.
* Extra precautions can be discussed with people in higher risk groups. These can include providing alternatives to attending in person such as using zoom, discussing risk mitigation strategies such as attending less frequently, wearing masks, attending for shorter periods of time and sitting further away from the group.

### 6.4 Seating arrangements and use of space

* The one person per 4m2 rule must not be exceeded for any EBC meeting.
* Chairs are preferred over pews. Chairs must be spaced a minimum of 1.5 meters apart. Chairs can be clustered in 2 or more for household groups to sit closer together. Floor markings could be used to indicate where to place chairs. This will help with set up and will discourage attendees from moving their chairs.
* Pew seating must be a last resort. If they are needed, household groups should sit together, every second pew will preferably be removed rather than barricaded off and people should sit at the ends of pews only. Household groups must remain a minimum of 1.5 meters apart. Ushers should be available to guide people to their seats to prevent people from breaching physical distancing protocols.
* The maximum number of people who can congregate in the sanctuary is: 21
* The maximum number of people who can congregate in the church hall is: 20
* The maximum number of people who can congregate in the Kids Room is: 6
* The maximum number of people who can be in the kitchen is: 2
* The maximum number of people who can be in the office is: 2
* The maximum number of people who can be in any of the bathrooms is: 2
* Upstairs, excluding the lady’s bathroom will remain out of bounds until further notice.
* The maximum number of people for each space will be displayed on the entry point to that space. Out of bounds areas will be barricaded off.

### 6.5 Hand Hygiene

For most hand hygiene activities, alcohol-based hand rub (ABHR) should be used. This must be available at every entrance and everyone will be encouraged to use it as they enter the premises and as they leave. When hands are visibly soiled, it is recommended that hands are washed with soap and water, then dried completely with a paper towel. Paper towels must be available from a dispenser in all bathrooms and the kitchen. People are not to wash hands in the kitchen sink. A sign above the kitchen saying as much should be displayed above the kitchen sink. Hand washing can only be done in bathroom sinks. A non-touch bin must also be available in every bathroom and kitchen.

Volunteers must be trained in proper handwashing protocols. Signage describing proper handwashing technique must be displayed above the sinks in each bathroom and signage displaying good ABHR technique should be displayed in locations where it is used.

### 6.6 Use of Masks

At time of publication, the Australian and NSW Governments advise that only those who are sick with COVID-19 and those caring for them should wear masks. There was no requirement for the general public to wear masks. Anyone who would prefer to wear a mask may do so without discrimination. If this legislation changes, we as a church will follow that legislation.

### 6.7 Use of gloves

The purpose of gloves is to prevent cross-contamination from one surface to another. Volunteers and staff are encouraged to only use gloves when they need to touch or handle a potentially contaminated surface or object. When using gloves, the following procedures must be adhered to:

* Gloves are to be worn on both hands,
* They are to only be worn while performing one task. For example: picking up and disposing of a used tissue, surface cleaning or counting money from offering,
* Avoid touching face, any body part, or non-contaminated surfaces while wearing gloves,
* Following this task, gloves are to be removed, disposed of in a bin and hand hygiene performed.

Gloves are not to be worn for extended periods of time. This is because it defeats the purpose of gloves which is to prevent the cross contamination of one surface from another. Incorrect use of gloves will increase the risk of disease spread. This is because extended or incorrect use of gloves gives people a false sense of security and discourages frequent hand hygiene which is a far more effective measure to prevent spread of disease.

### 6.8 Surface Cleaning

After every meeting, frequently touched surfaces must be cleaned by a person who has been adequately trained to do so. This may include a professional paid cleaner, or a volunteer.

For guidelines on effective environmental cleaning for COVID-19, please refer to the Australian Government Department of Health *Environmental Cleaning and Disinfection Principles for COVID 19*

These guidelines are available online here: file:///C:/Users/emath/Documents/Church/Policy/environmental-cleaning-and-disinfection-principles-for-covid-19.pdf

### 6.9 Sound desk, microphones, instruments and singing.

Single-use disinfectant wipes must be located at the sound desk, along with a bin for their disposal. The sound desk operator is responsible for using these to wipe down all electronic equipment before and after use. Only one person is to operate the sound desk to maintain social distancing and to prevent cross-contamination.

Microphones and instruments are not to be shared. Where possible, musicians are to use their own instruments. The keys on the piano are to be wiped down using disinfectant wipes before and after use. Microphones are to be wiped down by the person using them before and after use.

Until further notice, there will be no congregational singing. We may have one singer only who remains 3 meters away from others. Wind instruments such as flute, oboe or clarinet cannot be used.

### 6.10 COVIDsafe app

The Australian Government has released the COVIDsafe app – a tracking app that tracks your close contacts through Bluetooth. It allows public health officials to contact trace people who have been in contact with someone diagnosed with COVID-19. As per NSW Government guidelines, staff are advised that this app is beneficial for tracking the spread of COVID-19 and they advised to consider downloading it.

While not mandatory, EBC encourages staff, volunteers and attendees to download and use this app if they feel it is right for them. EBC understands that some may have concerns regarding privacy, so will respect anyone’s choice to not download or use it. Under no circumstance will anyone be pressured or coerced to download this app by EBC staff, leaders or volunteers.

### 6.11 Food Handling

As a general rule, food and beverages will not be served during a gathering. Disposable cups will be made available in the kitchen to those wanting water. If food is to be provided, it must be commercially pre-packaged and put out by someone who has performed hand hygiene prior to doing so. Similarly, if beverages are to be provided, they must not be self-serve. Rather, they must be made and poured by one person who has performed hand hygiene.

### 6.12 Communion and Offering

Until further notice, communion will be suspended. This may be amended, but only following risk assessment, and implementation of risk management strategies.

We will continue to encourage people to give electronically. Offering will not be collected during the service. A locked deposit box will be placed at the back of the church if people wish to give a cash offering. Volunteers counting money must use gloves in accordance with the above recommendations.

### 6.13 Updating personal details and maintenance of attendance logs

When we resume meeting, everyone will be asked to update their personal and contact details. We will also endeavour to obtain the contact details of any new attendee or guest. This will then be updated in UCare. Attendees will be informed that the purpose of collecting personal information is to keep accurate records in case they are needed by the government public health unit.

A log of attendance must be conducted for every meeting. This must be documented in UCare during the meeting, not after so as to minimise mistakes. This log of attendance must be kept for a minimum of 28 days.

It has been our usual practice to keep personal details of attendees and attendance logs to track attendance patterns, to contact attendees regarding church activities and business and to provide pastoral care as it is needed. Permission has already been obtained to use personal details in this way. When collecting details of new people or visitors, we will ask permission to use their contact details in this same way. If that permission is not given, then their details will only be kept for the purposes of COVID-19 tracing and nothing more.

### 6.14 Management of a confirmed case of COVID-19 in our church community

If a person has been contact traced or diagnosed with COVID within 14 days of attending a meeting, then the NSW Public Health Unit must be contacted for advice. They can be contacted by calling 1300 066 055. Their advice must be complied with without exemption. Responsibility for notifying the Public Health Unit belongs to the Senior Pastor. They may delegate this to an appropriate person if they choose to.

### 6.15 Equipment

Appropriate stock levels of the following items must always be maintained:

* Latex free gloves in small, medium and large. Latex containing gloves should be avoided due to risk of latex allergy
* Disinfectant cleaning solution
* Single-use disinfectant wipes
* Paper towel dispensers need to be installed in bathrooms and kitchen and must be regularly refilled with paper towel
* Touch free bins are to be stationed in all bathrooms and kitchen
* Disposable single-use wipes (for example chux wipes)
* Disposable cups in the kitchen
* Alcohol based hand sanitiser containing at least 60% alcohol.
* Liquid soap
* Tissues

### 6.16 Signage to be displayed

Free posters about handwashing and stopping the spread of COVID-19 are available on the NSW Government website. These are to be printed in colour, laminated and displayed in strategic locations. They can be accessed here: <https://www.nsw.gov.au/covid-19/industry-guidelines/posters-and-signage-for-business>