INDOOR WORSHIP
Executive Orders and Associated Guidance

FROM GOVERNOR’S EXECUTIVE ORDER – May 13, 2020

a. Religious Facilities. Subject to applicable Local Orders, effective as of 5:00 p.m. on May 15, 2020, churches, synagogues, mosques, temples, and other similar religious facilities of any faith in the State of Maryland (“Religious Facilities”) may open to the general public, provided, however, that the total number of persons permitted in a Religious Facility at any one time shall not exceed 50% of that Religious Facility’s Maximum Occupancy (defined below).

GUIDANCE FROM GOVERNOR’S WORKGROUP OF FAITH BASED LEADERS:

The Governor's Office of Community Initiatives convened a workgroup of faith-based leaders across the state representing a broad array of faiths and denominations to discuss the Governor's vision for reopening the economy based on the criteria outlined in his plan, "Maryland Strong: Roadmap to Recovery."


The Faith-Based Workgroup provided a report with recommendations reflecting its deliberations and review over the course of three rounds of meetings on May 4, 6, and 8, 2020. The recommendations represent a synthesis of the workgroup's consensus on complicated and divergent topics related to public worship. The following is a summary of that report.

The majority of the workgroup’s faith leaders felt that the best approach would be to limit the number of congregants to the primary worship space based on achieving the recommended distancing ratio in that space (7 feet between individual worshippers or same-household family groups), and reducing the allowable attendance to that number. The overall total would be capped to 250 worshippers. Faith-based institutions with much larger congregations and the space to accommodate them safely could submit a plan for county approval to accommodate a larger percentage of their congregations. The following public health safety measures are recommended for Stage I: wearing face masks; non-contact temperature taking at the doors (preferred) or voluntary temperature taking at home prior to arrival; seven-foot spacing between individual worshippers and same-household family groups in worship spaces; refraining from congregational singing; and sanitizing contact surfaces before and after worship. The size, location, and make up of Maryland’s religious congregations vary widely and these recommendations must take into account that a one-size-fits-all approach is not possible for the implementation of Stage I. Faith leaders may choose to implement additional and stricter rules for public worship than those permitted as they take into consideration vulnerable members in their respective congregations and other issues specific to their communities. Shortening the normal duration of services to accommodate more services into the day’s venue if needed and to take into consideration small children who may not be able to observe distancing protocols for an extended period of time. Lastly, the workgroup was unanimous in support of recommending that Stage I implementation should include faith-based ministerial activities such as pastoral and home visits that are vital to the faithful in crisis, fully observing public health guidelines.
f. EFFECTIVE AS OF 5:00PM ON MAY 29, 2020, CHURCHES, SYNAGOGUES, MOSQUES, TEMPLES, AND OTHER SIMILAR RELIGIOUS FACILITIES OF ANY FAITH MAY OPEN TO THE GENERAL PUBLIC PROVIDED HOWEVER THAT

i. THE TOTAL NUMBER OF PERSONS PERMITTED IN A RELIGIOUS FACILITY AT ANY ONE TIME SHALL NOT EXCEED 50% OF THAT RELIGIOUS FACILITY’S MAXIMUM OCCUPANCY

ii. NO MORE THAN 250 INDIVIDUALS MAY OCCUPY THE RELIGIOUS FACILITY AT ANY TIME

iii. FACE COVERINGS ARE REQUIRED

iv. 6 FEET SOCIAL DISTANCING SHALL BE MAINTAINED.
v. A RELIGIOUS FACILITY MAY APPLY TO THE COUNTY CHIEF ADMINISTRATIVE OFFICER FOR AN EXCEPTION TO ALLOW MORE THAN THE 250 INDIVIDUAL MAXIMUM BY PROVIDING A PLAN THAT DEMONSTRATES THAT ALL RELEVANT PRECAUTIONS HAVE BEEN SATISFIED AND THAT THE RELIGIOUS FACILITY MAY BE SAFELY OCCUPIED BY MORE THAN 250 INDIVIDUALS

vi. IN DETERMINING WHETHER TO GRANT THIS EXCEPTION, THE COUNTY ADMINISTRATIVE OFFICER (OR HIS DESSIGNEE) SHALL CONSULT WITH THE HEALTH OFFICER.