# Guidance for Congregations from the Task Force for Re-entering, Re-opening, and Re-imagining for the Diocese of New Jersey

## May 6, 2022

"I give you a new commandment, that you love one another. Just as I have loved you, you also should love one another. By this everyone will know that you are my disciples, if you have love for one another."

--John 13:34-35

Due to the COVID-19 pandemic, the conditions affecting our worship and work as congregations and as disciples of Christ have changed many times since March 2020, and will continue to change. What does not change, and cannot change, is our primary commitment to love one another as Jesus has loved us. That commitment must be an active one on the part of congregations and individuals, and must adapt to the unique situation of each congregation.

Congregations are encouraged to plan for the protective measures and the policies and freedoms that best suit the needs, risks, and unique situation of their specific community; with love for one another and our community at the center of that planning. No congregation is required to conform to the standards of a different congregation or congregations.

This set of guidance from the Reentering, Reopening, and Reimagining (RRR) Task Force is meant to help congregations, their leaders and members, care for one another and plan to gather and work together with appropriate care and freedom as the pandemic continues to evolve. In addition, the Task Force or the Bishop may issue specific directives or guidance that temporarily supersede the guidance and permissions in this document.

For just as the body is one and has many members, and all the members of the body, though many, are one body, so it is with Christ. [...] The eye cannot say to the hand, 'I have no need of you', nor again the head to the feet, 'I have no need of you.' [...] God has so arranged the body, giving the greater honor to the inferior member, that there may be no dissension within the body, but the members may have the same care for one another. If one member suffers, all suffer together with it; if one member is honored, all rejoice together with it. Now you are the body of Christ and individually members of it.

1 Corinthians 12:12, 21, 24b-27

# REQUIRED PRECAUTIONS/ADAPTATIONS FOR ALL CONGREGATIONS AT ANY RISK LEVEL

- The congregation must verify and record the fully-vaccinated status of choir members (whose ministry requires them to project their breath further and more forcefully than most worshippers), lectors or readers, and any liturgical leaders whose ministry requires speaking to the congregation.
  - For purposes of these directives, "fully-vaccinated" refers to individuals who
    have received the initial recommended doses of their vaccine series and any
    recommended booster doses when eligible to receive such boosters under
    current FDA and CDC guidance and recommendation.
  - O Individuals who can show proof of a current medical exemption (i.e. since January 2021) from a doctor for the COVID-19 vaccine may serve in one of the leadership roles for which proof of vaccination is required. Such individuals must wear a mask while serving that role, or if unmasked in that role must maintain a distance of 10 feet from anyone not in their household or immunological bubble (15 feet when singing). These individuals should not take on a leadership role which requires them to be in close or regular contact with anyone immunocompromised, or too young to be vaccinated.
  - No "religious exemptions" to the requirements for COVID-19 vaccination are created or permitted by this guidance.
  - This vaccination verification requirement is suspended when your county is in the green/low CDC Community Level, but resumes when the county is in any higher level.
- Communion may be offered in both kinds, following the guidance issued by the Bishop November 19, 2021. (see Appendix A)
- Masking is strongly recommended for activities that involve, or focus on, children under 5, until such time as children of those ages have been eligible for vaccination for one month longer than necessary to complete a full course of vaccination (e.g., if two doses spaced five weeks apart are required for full vaccination, these precautions may be relaxed nine weeks (5 weeks + a month) after eligibility is opened.)
  - Congregations and their tenants must continue to follow any state and local guidance governing summer camps, schools, and pre-schools.
- Congregations offering school, childcare, feeding or shelter ministries must always follow local and state guidelines and requirements.

 If your congregation is contacted by someone who has been in your building(s) or on church grounds within the past 14 days and has been medically diagnosed with COVID-19, has been notified of a positive test for COVID-19, or for whom such is reasonably being considered by a competent medical professional, the congregation must notify any affected worshippers and visitors, but under no circumstances should the name of the person be revealed.

The congregation must also report the exposure to Canon Phyllis Jones (pjones@dioceseofnj.org), including specifics about when the person was at the church, for how long, and if it is suspected others may have been exposed, and cooperate with public health authorities in contact tracing as needed.

Please see Appendix B for guidelines in the event of an exposure in during the activities of the congregation.

#### **GUIDANCE FOR LOW TO MODERATE LOCAL RISK**

This guidance applies during periods when the county is at the CDC's LOW (GREEN) Community Level

(Find your county's metrics at <a href="https://covidactnow.org/us/new\_jersey-nj/">https://covidactnow.org/us/new\_jersey-nj/</a> or <a href="https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html">https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html</a>).

When planning worship and gatherings, congregations should be attentive to those who are not eligible for vaccination or are at higher risk from COVID-19 infection.

- At time of publication (March 11, 2022), no one under the age of 5 is yet eligible for vaccination. Evidence makes clear children are susceptible to COVID-19.
- Many congregations will have individual members who are not able to be vaccinated or for whom available vaccines will not be fully effective.

Protections and precautions such as masking, distancing, additional ventilation or cleaning are not *required* by the diocese and should be adapted to the particular situation of the congregation and community. When planning appropriate precautions, congregations should keep in mind that:

- Masking is more effective at reducing transmission risk than distancing or sanitizing surfaces and hands.
- Improving ventilation is an important tool for reducing transmission risk in indoor gatherings, and congregations with buildings that are not well ventilated may wish to consider other precautions more strongly.
- Some congregations may find that it is appropriate to support the health of their community by continuing to maintain requirements for everyone to be masked, regardless of vaccination.
- Any individual may choose to wear a face mask at any time, and should not be
  questioned about their reasons for doing so. Many may choose to continue to mask at
  church gatherings out of care for others, or the desire for additional protections for
  themselves.
- Congregations should make any requirements for masking or other precautions clear for all visitors, worshippers, members and guests.
- Regular washing or sanitizing of hands is encouraged for all, especially those who
  prepare the altar for worship, and those who lead worship and offer the sacraments for
  the church.

All congregations are encouraged to seek ways to make the worship of the church accessible and welcoming to those who are not vaccinated, or who need or desire to exercise greater precautions

- Congregations are strongly encouraged to continue to provide remote worship options (including streamed or online services).
- If your worship space allows, you may wish to set aside an area in which six-foot distancing and masking will be maintained. If doing so, ensure that these are not the least-desirable seats in the worship space.
- As singing still poses a higher risk of transmission than most other worship activities, congregations should consider regularly offering at least one service without singing.
- Congregations may also choose to designate that all must be masked or that
  additional transmission precautions will be taken at some but not all of their worship
  services.
- It is wise to explicitly discuss the precautions taken, and the conditions expected, with
  those being baptized, confirmed, or married at the church, and with the families of
  those individuals and families preparing for funerals, as appropriate. Congregations are
  encouraged to adopt extra precautions, if necessary, to allow individuals to receive
  these sacraments and services of the Church without the burden of worry about COVID19 or other infectious transmission.

Encourage all who can be vaccinated to get vaccinated to care for the whole Body of Christ and for the whole human community.

Continue to encourage those experiencing symptoms of transmissible illnesses (generally fever and respiratory or digestive symptoms) to refrain from attending in-person gatherings of the congregation while experiencing symptoms, whether those symptoms seem to be COVID-19 or not.

It is essential to clearly communicate what precautions will be taken and what participants can expect for any worship service or other gathering.

#### **GUIDANCE FOR MODERATE TO HIGH LOCAL RISK**

This guidance applies during periods when the county is at the CDC's MEDIUM (YELLOW) Community Level.

(Find your county's metrics at <a href="https://covidactnow.org/us/new\_jersey-nj/">https://covidactnow.org/us/new\_jersey-nj/</a> or <a href="https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html">https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html</a>).

Masking is recommended at 105 cases per 100,000 or more for indoor gatherings of the congregation, and all gatherings inside church buildings.

Masking, for all who are old enough to do so, should be required for nursery or Sunday School gatherings associated with worship or ministries of the congregation which involve children too young to be vaccinated.

Preschools, day schools, and tenant schools using church buildings, operating under state and local licensing, may follow the masking directives of their authorizing agencies even if those differ from the requirements of the congregation, so long as their presence in the building is separated from all activities of the congregation. (e.g., if a school gathers in the congregation's worship space, no members of the congregation not employed by or attending the school should be in that space during the school's gathering.)

Clergy should consult with participants in special liturgies, such as marriages and baptisms, about their comfort level when in close proximity to others not of their household or immunological bubble, and should mask or distance themselves and other participants in the liturgy appropriately.

• Care should be taken to use the precautions desired by the most cautious person whose participation in the liturgy is required (e.g. if a parent or sponsor of a candidate for baptism, or the candidate themselves, desire masking, all participants within 10 feet of the baptism should be required to wear masks during the baptism.

Fellowship gatherings with food and drink are discouraged indoors. "Grab and go" distribution of food, or outdoor gatherings for fellowship, reduce transmission risk and should be strongly considered.

Congregations may choose to require or encourage rapid at-home testing for gatherings such as retreats or meetings in which individuals must interact for extended periods with others outside their immunological bubble. Testing should not be required for admission to worship or other open gatherings of the congregation.

As much as possible, meetings of the congregation for business or formation purposes (such as Vestry meetings, classes, committee meetings) should be held virtually, or with a virtual participation option.

If traveling to a state or country on a NJ travel advisory or national COVID-19 advisory list, please do not attend church or other church related activity until a 10-day quarantine period (5 days for fully-vaccinated/boosted individuals) has ended. We encourage everyone returning from a region of high COVID-19 transmission to be tested for COVID-19 before returning to regular church activity.

Congregations are recommended to follow public health guidance that may be issued regarding limits on size, duration, or frequency of such gatherings, even if public health guidance specifically exempts houses of worship.

Encourage all who can be vaccinated to get vaccinated to care for the whole Body of Christ and for the whole human community.

Continue to encourage those experiencing symptoms of transmissible illnesses (generally fever and respiratory or digestive symptoms) to refrain from attending in-person gatherings of the congregation while experiencing symptoms, whether those symptoms seem to be COVID-19 or not.

It is essential to clearly communicate what precautions will be taken and what participants can expect for any worship service or other gathering.

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#### **GUIDANCE FOR HIGH OR EXTREMELY HIGH LOCAL RISK**

This guidance applies during periods when either the county is at the CDC's HIGH (ORANGE) Community Level OR upon direction from diocesan authority. (Find your county's metrics at <a href="https://covidactnow.org/us/new\_jersey-nj/">https://covidactnow.org/us/new\_jersey-nj/</a> or <a href="https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html">https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html</a>),

Indoor gatherings may be restricted or limited in times of extremely high transmission or risk. Congregations are recommended to follow public health guidance that may be issued regarding limits on size, duration, or frequency of such gatherings, even if public health guidance specifically exempts houses of worship.

Face masks should be worn for worship and all indoor gatherings of the congregation, and all gatherings of community or tenant groups inside church buildings.

Additional precautions should be observed in in-person worship, such as:

- Singing, which projects breath and thus carries a higher transmission risk, may be temporarily reduced or suspended.
- Additional options for distancing in worship between households/immunological bubbles should be offered.
- In any liturgies which require the celebrant to be within six feet of others while speaking (marriages, baptisms, confirmation, etc.), the celebrant, and all participants 2 years of age or older, must be masked.
  - Care should be taken to ensure that distancing can be maintained between participants in different households or immunological bubbles (e.g. two separate households should not stand next to one another at the font during baptism.)
  - A couple being married may remove their face masks for the exchange of vows and rings, and again for the Peace (i.e. "the kiss."). The wedding party and presider should step back to increase their distance from the couple while the couple is unmasked.
  - No reception or meal associated with weddings, funerals, or baptisms should be scheduled at the church during times of high or extremely high risk.
  - Use of hand sanitizer immediately before touching a participant in the liturgy is strongly encouraged.

Congregations may decide to temporarily suspend in-person worship or other activities, at the judgement of their own leadership. Congregations do not require permission from the bishop to temporarily suspend or resume in-person worship during periods of high or extremely high COVID-19 risk.

Fellowship gatherings with food and drink should not be held indoors. At these levels even unmasking outdoors for food and drink may be unwise. "Grab and go" distribution of food is wiser at times of high risk.

If an outreach or service ministry of the congregation *requires* the consumption of food or drink in church buildings, and "grab and go" meals are not an option, participants should be seated at least six feet apart from others not of their household or immunological bubble, and masking and distancing should be maintained while the food is being served, with unmasking only at distanced tables while actively eating.

Masking, for all who are old enough to do so, should be required for nursery or Sunday School gatherings associated with worship or ministries of the congregation which involve children too young to be vaccinated.

Preschools, day schools, and tenant schools using church buildings, operating under state and local licensing, may follow the masking directives of their authorizing agencies even if those differ from the requirements of the congregation, so long as their presence in the building is separated from all activities of the congregation. (e.g., if a school gathers in the congregation's worship space, no members of the congregation not employed by or attending the school should be in that space during the school's gathering.)

As much as possible, all meetings and gatherings of the congregation for business or formation purposes should be held virtually.

Congregations should consider requiring rapid at-home testing, or PCR testing if available, for any necessary in-person gatherings in which individuals must interact for extended periods with others outside their immunological bubble.

Testing should not be required for admission to worship or other open gatherings of the congregation.

Congregations should offer the opportunity for remote work, as much as possible, to staff and volunteers.

If traveling to a state or country on a NJ travel advisory or national COVID-19 advisory list, please do not attend church or other church related activity until a 10-day quarantine period (5 days for fully-vaccinated/boosted individuals) has ended. We encourage everyone returning from a region of high COVID-19 transmission to be tested for COVID-19 before returning to regular church activity.

Encourage all who can be vaccinated to get vaccinated to care for the whole Body of Christ and for the whole human community.

Continue to encourage those experiencing symptoms of transmissible illnesses (generally fever and respiratory or digestive symptoms) to refrain from attending in-person gatherings of the congregation while experiencing symptoms, whether those symptoms seem to be COVID-19 or not.

It is essential to clearly communicate what precautions will be taken and what participants can expect for any worship service or other gathering.

#### **APPENDIX A: Guidelines for Communion in Both Kinds**

The Rt. Rev. William H. Stokes, in consultation with Dr. Philip G. Lewis, MD, MPH, FACPM, FACOEM, and the Rev. Canon Valerie L. Balling, Co-Chairs of the RRR Taskforce, offer these guidelines to the clergy and communicants in the Episcopal Diocese of New Jersey.

In March 2020, at the outset of the COVID-19 Pandemic, in an effort to safeguard God's people, extraordinary authority was exercised by bishops across the Church and exceptional steps were taken with respect to worship. At first, church buildings were closed to in-person worship until standards and guidelines could be developed that would allow people to gather safely in-person. The Diocese of New Jersey was blessed to have expert persons as part of a Task Force formed in response to the COVID-19 crisis. This Task Force worked quickly and diligently on the problems posed by COVID-19. When in-person worship was resumed in church buildings, there was a provision for communion, but with the directive that communion could be offered in *one-kind* (that is, bread/host only) to all participants except for the celebrant. Though the emergency circumstances called for this, maintaining this practice for any length of time is clearly not desirable, nor in accordance with the customs and practices of The Episcopal Church.

According to the rubrics of the Book of Common Prayer: "Opportunity is always to be given to every communicant to receive the consecrated bread and wine separately. The rubric adds, "But the Sacrament may be received in both kinds simultaneously, in a manner approved by the bishop" (Book of Common Prayer—1979, p. 407–408).

When the COVID19 outbreak occurred, there were immediate questions and concerns about how the virus was transmitted. Many had, and still have, particular concerns about the possibility of transmission through use of the common cup whether one receives the wine by sipping from the common cup or by receiving communion using the method known as "intinction" (the edge of the consecrated host being dipped in the consecrated wine).

Dr. Phil Lewis, Co-Chair of The Diocese of New Jersey RRR Task Force has stated, "We need to remember that coronavirus is transmitted by the virus having contact with respiratory epithelium or surfaces which does not happen with oral contact with food, liquid or surfaces that have come in contact with food or liquid." He adds, "The fact is while there have certainly been many thousands of clusters of orally transmitted diseases investigated by the very best epidemiologists in the world over many years, none of those clusters have been traced back to people who took communion from a common cup or from intinction. Then let's also remember that modern epidemiology has been around since at least the middle of the 19th century. So...we have at least 170 years of data that suggest there is no risk from common cup communion practices" (email to the RRR Task Force—6/24/2021).

A<u>recent letter</u> written by several public health experts in Great Britain in the midst of the COVID19 pandemic to the Royal Society for Public Health stated: "the common communion cup may theoretically serve as a vehicle of transmitting infection, but the potential risk of

transmission is very small. Currently, available data do not provide any support for the suggestion that the practice of sharing a common communion cup can contribute to the spread of COVID-19 because SARS-CoV-2 transmission from a patient with COVID-19 or asymptomatic carrier to other people has not been reported."

With this in mind, and recognizing that 77% of New Jersey residents have now received at least one dose of the COVID19 vaccine and that more than 67% have received both doses, [1] I believe it is appropriate at this time to revise the guidelines for celebrations of the Holy Eucharist to permit the offering of communion in both kinds to every communicant as called for in the Book of Common Prayer and I direct that this be done as follows:

- 1. It shall be made clear in service leaflets/booklets that all persons may, but no person must receive communion in both kinds to receive the fullness of Christ's body and blood. The section "Ministration to the Sick" in The Book of Common Prayer, states, "If a person desires to receive the Sacrament, but by reason of extreme sickness or physical disability, is unable to eat or drink the Bread and the Wine, the Celebrant is to assure that person that all the benefits of Communion are received, even though the Sacrament is not received with the mouth." The exigencies of the COVID-19 pandemic have required the Church to expand its understanding of "spiritual communion" in a variety of ways. The legitimate concerns of the people of God about the risks and possibility of infection, especially for those with possible co-morbidities or who are immunocompromised must be taken seriously and the personal decisions made by each of the faithful honored without prejudice or judgment.
- 2. The Clergy shall determine, in consultation with the Wardens and Vestry/Mission Committees of their individual congregations how best to offer communion to communicants in their congregation who wish to receive in both kinds within the parameters dictated by this Church, its canons and the Book of Common Prayer. The use of individual cups is not authorized. The common cup is still normative in The Episcopal Church.
- 3. All persons administering communion (both bread and wine) shall thoroughly sanitize their hands immediately before administering communion to any person.
- 4. The common cup may be offered and received in the traditional way (i.e. for sipping) as is customary for each communicant by a clergy person or lay chalice administrator. The chalice administrator shall carefully wipe both the inside and outside edge of the cup with a purificator where a communicant's mouth has made contact with the cup, rotating the cup after each person receives.

<sup>&</sup>lt;sup>1</sup> See https://bit.ly/367rMGC

5.

- 5. A separate cup shall be offered for those who wish to receive communion by intinction.
  - The clergy person or lay chalice administrator may dip the edge of the host in the
    wine and then carefully place it on the tongue of the person receiving communion.
    If a chalice administrator knows that they have made physical contact with the
    mouth or tongue of a communicant, they shall immediately re-sanitize their
    hands.
  - 2. Individual communicants may dip the edge of their own hosts in the wine. It is recommended that the chalice/vessel contain a small amount of wine that is replenished as needed to avoid physical contact with the wine. If a chalice administrator knows that the wine has been touched, that wine should be disposed of properly and the vessel cleaned or replaced before resuming distribution.

The above guidelines are written in an effort to comply with the expectations of the *Book of Common Prayer* that "Opportunity is always to be given every communicant to receive the consecrated Bread and Wine separately" while also recognizing that caution is still called for and that many in today's continuing COVID-19 context may decide not to receive the Wine or not to receive either the Bread or the Wine. It is imperative that all remember that, no matter the individual choices of the faithful, our oneness is always in Christ Jesus.

#### Sample Bulletin Message

We will be offering communion with both Christ's Body and Blood. The consensus of public health studies to date show that there is no documentable risk of COVID19 transmission through the common cup. We understand individuals may have different comfort levels as to how they receive communion. Following the teaching of our Episcopal tradition, all persons may, but no person must, receive communion in both kinds to receive the full spiritual benefits of communion. You may choose to receive only the host at this time. Should you choose to receive the wine, one vessel will be offered for those who want to sip the wine from the common cup. Another vessel will be offered for those who wish to intinct (the host dipped in the wine). Congregations may offer more specific instructions on how/where to receive.

### **APPENDIX B: Guidelines for an Exposure to COVID-19**

If your church is contacted by someone who has been in your church's building(s) or on church grounds within the past 14 days and has been medically diagnosed with COVID-19 or has been notified of a positive test for COVID-19:

- Offer pastoral support and prayer. Ask specifically if the person wants their name shared, and follow the person's wishes.
- Encourage the person to contact their physician and local public health office to make sure they are aware of the COVID-19 case. Do not give any advice about quarantining or other public health measures.
- Notify Canon Phyllis Jones of the exposure (pjones@dioceseofnj.org). Include specifics
  about when the person was at the church, for how long, and if it is suspected others
  may have been exposed.
- Contact your local health department to report the exposure and ask for their recommendations about what actions need to be taken to protect the public health.
   This is important as the infected person may live in a different public health jurisdiction from where the church is located.
- The clergy or congregational response team should be notified of those recommendations and decide on a course of action (i.e. close the church, disinfect, continue with services, etc.).
- A pastoral notification of the congregation should be done with the utmost discretion.
  - No names should be used (unless the person gives specific permission to ask for prayers and support).
  - The facts of when the person was at the church (date, time, length of visit, etc.) should be shared.
  - Clearly state what actions have been taken (i.e. contacting the health department) and what the next steps are.
- If anyone is concerned about their exposure, they should call their personal physician or the local health department for further instructions. No one from the church should offer any medical or public health advice (such as whether someone should quarantine).
- Contact leaders of any outside groups that may be affected by the report.
- It is not the church's responsibility to perform contact tracing. That is for the local public health department. Only when asked by the health department for contact tracing information do we share with them the information we have gathered.

If a person suspects that they have been exposed to COVID-19 but have not had it confirmed by a test, encourage that person to get a test as soon as possible and to refrain from coming to the church for 14 days or until receiving a negative test result. If that person has been on or in church property, ask the person to notify the church immediately of their test results.