The following are preventive recommendations issued by the U.S. Department of Health and Human Services (DHHS) and the Centers for Disease Control (CDC) – as well as local ordinances or required actions and procedures issued by U.S. religious bodies for worship or religious gatherings in an effort to stem the spread of the Novel Coronavirus COVID-19 and protect the elderly and medically vulnerable. We recommend only CDC and DHHS products. However, if your philosophy mandates you, or there additional precautions make your congregation feel safer, consider some of the measures below.

Creation COVID-19 information and access is only good when from some standard medical or social authority, or and based on medical facts – data is the actual and solely credible messaging. Additionally, Congregations may consider the degradation to longevity of groups of people by prolonged isolation during the contagion found in this document. Take a moment to consider the impact to spiritual health and development. Congregations should encourage their parishioners and congregants to stay informed, exercise caution, and take care of their selves.

Congregation Preparation

Make sure your site is adequately prepared to meet the needs of your congregation. Make available to parishioners information and the contagion, support the spread of COVID-19, and to protect health. Provide, and be mindful of, warning signs of a contagion. At the time, disinfecting of public gatherings is not recommended. However, health officials are advising that the elderly and those with underlying health conditions, heart disease, cancer, diabetes, or a compromised immune system are at risk of contagion, severe and prolonged illness. Therefore, those who fall in this category may want to avoid gatherings or at least exercise caution in their decision.

1. Post signs of 6 ft. minimum and recommend that people keep 6 ft. apart, or other recommendations, when possible. Not only particularly in church or meetings. Ensure the capability of a social area or gathering, or the ability to separate or provide care and keep patients in their safety in a social area.
2. Discourage direct contact like use of holy water, offering.
3. Temporarily suspend the use of holy water, offering, and other shared items, including, but not limited to, distributing the bulletin, use of chairs, hymnals, prayer books, offering baskets, and other items. Consider using disposable or easily disinfectable items.
4. Congregants should be encouraged to wash their hands or use hand sanitizer before and after touching any surface, including, but not limited to, pews, chairs, and other items.
5. Consider suspending coffee hour and encourage congregants to bring their own, or individual or grab and go, coffee or tea. Consider the possibility of providing coffee and tea.
6. Consider suspending or limit other fellowship connections, such as communion, sharing of bread, offering, holy water, hand sanitizer, shaking hands, or other physical contact. Consider alternatives, or provide hand sanitizer and wipes.
7. Allow people, if they are sick, or feel sick, stay home, provide an individual recording. Consider using provided a "Virtual Resources" on a website page or link to stream.
8. Provide hand sanitizer and wipes throughout the church or congregation.

If your congregation has such needs or difficulty, consider requiring your workforce and volunteers to participate, especially to allow the elderly or vulnerable to participate – which will prevent social isolation of those particularly.

Provide, note, and use the collaborative, healthy, safe practices. Worship is one of prayer. Or, at a congregational home by