

SHEPHERDING THROUGH A PANDEMIC

J.W. Richardson (2020) With Special Guest: Ryan McKay, Sr. Policy Analyst for the Thomas Jefferson Health District

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Purpose



 Given the easing of restrictions, faith leaders are faced with deciding how, when, where and if to gather congregants, while simultaneously keeping them as safe as possible. This is a daunting task, because not only are we bombarded with an endless stream of information, additionally the health safety recommendations seem to change daily. This short information session is designed to provide the latest scientifically-based information on preventing the contraction and spread of COVID-19 in communities of faith.

Disclosure

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This session was created to synthesize the current recommendations from Centers for Disease Control and Prevention. Information about the COVID-19 virus is evolving. As we learn more about this novel virus some recommendations may change or be added over time. This session is NOT intended to provide clinical consultation. Specific clinical questions should be directed to the Thomas Jefferson Health District and health care providers.



- COVID-19 is a new virus that created a global pandemic.
- Because the virus is new, information about its transmissibility, health impact, vulnerable populations and infectious pathways adjusts as scientific knowledge is produced.
- The virus seems to target the respiratory system most severely, however, it also affects varied populations in different ways.
- One of the characteristics of this novel virus is its apparent ability to live on surfaces (cans, paper, clothes) for extended periods of time.

COVID -19 Testing

- How is testing for coronavirus done?
- One testing protocol for COVID-19 involves inserting a 6-inch long swab (like a long Q-tip) into the cavity between the nose and mouth (nasopharyngeal swab) for 15 seconds and rotating the swab several times.
- The swabbing is then repeated on the other side of the nose to make sure enough material is collected.
- The swab is then inserted into a container and sent to a lab for testing.



Terminology

- Social distancing, also called "physical distancing," means keeping space between yourself and other people outside of your home. To practice social or physical distancing:
 - Stay at least 6 feet (about 2 arms' length) from other people
 - Do not gather in groups
 - Stay out of crowded places and avoid mass gatherings
- **Quarantine** is used to keep someone who might have been exposed to COVID-19 away from others. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department.
- Isolation is used to separate people infected with the virus (those who are sick with COVID-19 and those with no symptoms) from people who are not infected. People who are in isolation should stay home until it's safe for them to be around others. In the home, anyone sick or infected should separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available).
- Contact tracing, a core disease control measure used by local and state health department personnel for decades.
 Contact tracing is part of the process of supporting affected individuals and warning contacts of exposure in order to stop chains of transmission.

How can you catch it?

- The virus that causes COVID-19 is spreading very easily and sustainably between people.
 - The CDC estimates that 40% of coronavirus transmission is occurring <u>before</u> people feel sick.
- People who have no symptoms and feel fine and persons with symptoms can infect others.
- The virus can spread 6 feet (about the length of a couch) or more through breathing, coughing or sneezing.
- The onset and duration of viral shedding and the period of infectiousness for COVID-19 are suspected to be between 2-14 days.
- A person can contract COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes

Symptoms

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People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.

- Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:
 - Cough
 - Shortness of breath or difficulty breathing
 - Fever
 - Chills
 - Muscle pain
 - Sore throat
 - New loss of taste or smell
- This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.



When to Seek Emergency Medical Attention

Look for **emergency warning signs*** for COVID-19. If someone is showing any of these signs, **seek emergency medical care immediately**

- Trouble breathing
- $\,\circ\,$ Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face
- *This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



Symptoms of Coronavirus Disease 2019 poster 🖪

Patients with COVID-19 have experienced mild to severe respiratory illness. Symptoms can include fever, cough and shortness of breath. Symptoms may appear 2-14 days after exposure.

Size: 8.5"W x 11"H

Alternative Languages: <u>Amharic</u> | <u>Arabic</u> | <u>Burmese</u> | <u>Dari</u> | <u>Farsi</u> | <u>French</u> | <u>Haitian</u> <u>Creole</u> | <u>Karen</u> | <u>Korean</u> | <u>Kinyarwanda</u> | <u>Kunama</u> | <u>Nepali</u> | <u>Oromo</u> | <u>Pashto</u> | <u>Portuguese</u> | <u>Russian</u> | <u>Simplified Chinese</u> | <u>Somali</u> | <u>Spanish</u> | <u>Swahili</u> | <u>Tagalog</u> | <u>Thai</u> | <u>Tigrinya</u> | <u>Ukrainian</u> | <u>Vietnamese</u>



Who is at risk?



People of <u>all ages</u> have gotten the virus. Some had no symptoms and some had lifethreatening illness.



People over 65 and African Americans are at more risk.

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People with illnesses, such as high blood pressure, overweight, diabetes, moderatesevere asthma, lung disease, kidney disease, liver disease, and compromised immune systems are more at risk.

Why Social Distancing is Important

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- COVID-19 spreads mainly among people who are in close contact (within about 6 feet) for a prolonged period. Spread happens when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and land in the mouths or noses of people nearby. The droplets can also be inhaled into the lungs. Recent studies indicate that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19.
- COVID-19 can live for hours or days on a surface, depending on factors such as sunlight, humidity, and the type of surface. Social distancing helps limit opportunities to come in contact with contaminated surfaces and infected people outside the home.
- Although the risk of severe illness may be different for everyone, anyone can get and spread COVID-19. Everyone has a role to play in slowing the spread and protecting themselves, their family, and their community.

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How to protect yourself and others

- Wash your hands often 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.
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid close contact with people who are sick,, even inside your home. If possible, maintain 6 feet between the person who is sick and other household members.
- Put distance between yourself and other people outside of your home.
- Remember that some people without symptoms may be able to spread virus.
- Stay at least 6 feet (about 2 arms' length) from other people.
- Do not gather in groups.
- Stay out of crowded places and avoid mass gatherings.
- Keeping distance from others is especially important for people who are at higher risk of getting very sick.



- Everyone should wear a cloth face cover when they have to go out in public, for example to the grocery store or to pick up other necessities.
- Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- Clean AND disinfect frequently touched surfaces daily. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.

PHASED REOPENING

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Gating Criteria	Threshold for entering Phase 1	Threshold for entering Phase 2	Threshold for entering Phase 3
Decreases in newly identified COVID-19 cases	Downward trajectory (or near-zero incidence) of documented cases over a 14-day period	Downward trajectory (or near-zero incidence) of documented cases for at least 14 days <i>after entering Phase</i> 1	Downward trajectory (or near-zero incidence) of documented cases for at least 14 <i>days after entering Phase 2</i>
Decreases in emergency department (ED) and/or outpatient visits for COVID- like illness (CLI)	Downward trajectory (or near-zero incidence) of CLI syndromic cases reported over a 14-day period	Downward trajectory (or near-zero incidence) of CLI syndromic cases reported for at least 14 days after entering Phase 1	Downward trajectory (or near-zero incidence) of CLI syndromic cases reported for at least an additional 14 days after entering Phase 2
Decreases in ED and/or outpatient visits for influenza- like illness (ILI)	Downward trajectory (or near-zero incidence) of ILI reported over a 14- day period	Downward trajectory (or near-zero incidence) of ILI reported for at least 14 days after entering Phase 1	Downward trajectory (or near-zero incidence) of ILI reported for at least an additional 14 days <i>after entering Phase 2</i>
Decreases in percentage of SARS-CoV-2 tests positive	Downward trajectory (or near-zero percent positive) of positive tests as a percentage of total tests over a 14-day period (flat or increasing volume of tests)	Downward trajectory (or near-zero percent positive) of positive tests as a percentage of total tests for 14 <i>days</i> <i>after entering Phase 1</i> (flat or increasing volume of tests)	Downward trajectory (or near-zero percent positive) of positive tests as a percentage of total tests for at least 14 days after entering Phase 2 (flat or increasing volume of tests)
Treat all patients without crisis care	Jurisdiction inpatient & ICU beds <80% full Staff shortage in last week = no PPE supplies adequate for >4 days	Jurisdiction inpatient & ICU beds <75% full Staff shortage in last week = no PPE supplies adequate for >4 days	Jurisdiction inpatient & ICU beds <70% full Staff shortage in last week = no PPE supplies adequate for >15 days
Robust testing program	Test availability such that percentage of positive tests is <20% for 14 days Median time from test order to result is <4 days	Test availability such that percentage of positive tests is <15% for 14 days Median time from test order to result is <3 days	Test availability such that the percentage of positive tests is <10% for 14 days Median time from test order to result is <2 days

CDC RECOMMENDATIONS FOR PHASED OPENING

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Virginia Phase One Reopening: Religious Services

Mandatory Requirements:

- Occupancy shall be limited to no more than 50% of the lowest occupancy load on the certificate of occupancy of the room or facility
- It is recommended that persons attending religious services be encouraged to wear face coverings over their nose and mouth at all times
- No items must be passed to or between attendees, who are not family members (think collection plates, hymnals, sacraments, bullitins etc.)
- Individuals attending religious services must be seated at least six feet apart at all times and must practice physical distancing at all times.
- Any items used to distribute food or beverages must be disposable and used only once and discarded
- A thorough cleaning and **disinfection** of frequently contacted surfaces must be conducted prior to and following any religious service
- Post signage at the entrance that states that no one with a fever or symptoms of COVID-19, or known exposure to a COVID-19 case in the
 prior 14 days, is permitted in the establishment.
- Post signage to provide public health reminders regarding social distancing, gatherings, options for high risk individuals, and staying home if sick

If any place of worship cannot adhere to the above requirements, it must not conduct in-person services.

Cleaning AND Disinfecting

- Wear disposable gloves to clean and disinfect.
- Clean surfaces using soap and water, then use disinfectant.
- Recommend use of <u>EPA-registered</u> <u>household disinfectantexternal icon</u>.
 Follow the instructions on the label to ensure safe and effective use of the product. Many products recommend:
 - Keeping surface wet for a period of time (see product label).
 - Precautions such as wearing gloves and making sure you have good ventilation during use of the product.
- Alcohol solutions with at least 70% alcohol may also be used.

Cleaning and disinfecting your building or facility if someone is sick

- Close off areas used by the person who is sick.
 Companies do not necessarily need to close operations, if they can close off affected areas.
- Open outside doors and windows to increase air circulation in the area.
- Wait 24 hours before you clean or disinfect. If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and ATM machines.
- <u>Vacuum the space if needed</u>. Use vacuum equipped with high-efficiency particular air (HEPA) filter, if available.
 - Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
 - Consider temporarily turning off room fans and the central HVAC system that services the room
 or space, so that particles that escape from vacuuming will not circulate throughout the facility.
- Once area has been appropriately disinfected, it can be opened for use.
- Workers without close contact with the person who is sick can return to work immediately after disinfection.
- If more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
 - Continue routing cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

VA Suggested Best Practices in Faith Community Settings

• Allow interior doors to remain open to limit touching of door handles

- Use separate doors to enter and exit the establishment when possible
- Provide sanitizing stations throughout the building, particularly at entry and exit points
- Consider discontinuing use of common items (e.g., microphones, books, hymnals, scriptural texts) that may be shared between people and are difficult to clean. Consider assigning religious books to a family or individual that they can bring to each service, or use a projector for the display of sacred texts, scriptures, and songs
- Discontinue shared meals and other activities where people may gather in groups (e.g., limit or suspend coffee stations, shared food, meet and greet time before and after services etc.), with the exception of essential food services for low-income residents



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What is it?

- COVID-19 is a new virus that is spreading around the world.
- Because the virus is new, everyone is learning and information is always changing.
- The virus attacks breathing most (respiratory system). See Other side for warning signs
- The virus can live on surfaces (cans, paper, clothes) for days.



Are you at risk?

- People of <u>all</u> ages have gotten the virus. Some had no symptoms and some had life-threatening illness.
- People over 65 and African Americans are at more risk.
- People with illnesses, such as high blood pressure, overweight, diabetes, moderate-severe asthma, lung disease, kidney disease, liver disease, and compromised immune systems are more at risk.

Source: https://www.cs

- https://www.cdc.gov/cdronawrds/doca-redy/mde/
 https://iamanetwork.com/journals/jama/fullarticle
- (J.W. Richardson, 2020)

Coronavirus – it's real.

How can you catch it?

- People can carry the virus and not know it.
- People who feel good can give the virus to others.
- The virus can spread 6 feet (about the length of a couch) or more through a cough or sneeze.
- The virus can spread if you touch a surface with the virus on it and then touch your face.
- Read the other side of this flyer for information about how to keep yourself and others safe.

Protect yourself & others. Spread the **word**, not the virus.

HOTLINE: (434) 972-6261







MAKING THE DECISION TO GATHER

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As you decide....Consider

- Consider all the surfaces congregants and staff touch
- Consider the points in worship where social distancing might be breached
- Consider the items that tend to pass between and among congregants
- Consider your entrances, exits and rest rooms
- Consider the personnel involved in worship (e.g. ushers, parking attendants, musicians, individuals who count offerings)
- Consider how you will educate the congregation on the meeting protocol
- Consider how you will enforce protocol measures
- Consider the most vulnerable in your congregation and how to mitigate their risk
- Consider your plan if an attendee tests positive for COVID-19

Resources

- CDC's main COVID-19 Web page: <u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>
 - https://www.cdc.gov
- Virginia Department of Health COVID-19 Web page: http://www.vdh.virginia.gov/coronavirus/
- Virginia Governor's COVID-19 Web page: https://www.virginia.gov/coronavirus/

Thomas Jefferson Health District

Working together for a healthy community.

The Thomas Jefferson Health District provides public health services to the residents of the City of Charlottesville, and the counties of Albemarle, Fluvanna, Greene, Louisa, and Nelson.



Thomas District COVID-19 Hotline 434-972-6261 8:00 a.m. to 4:30 p.m. Monday–Friday





