Holding Our Plans Loosely

RETURNING TO CHURCH 2.0
INTRODUCTION

Returning to Church 2.0 is the continuation of the Wisconsin Council of Churches’ ongoing guidance to churches for how to make safer choices during the COVID-19 pandemic. We say safer choices, because no choice is definitively safe. We can only mitigate risk, not eliminate it altogether.

We have learned a great deal since the first edition of our guidance was released in April 2020. Significant interim updates have included recommendations on singing and other church music, cleaning and ventilation, and funerals, as well as specific guidance on whether or not it was prudent to gather at all. Returning to Church (1.0) was based upon the Wisconsin Department of Health Services “Badger Bounce Back,” which is now obsolete. Politicization of responses to the COVID pandemic at the state and federal level have made it difficult to mount a coordinated plan covering a wider region, leaving local governments and public health agencies to issue their own guidance – or not. In many areas, churches are excepted from these recommendations, leaving them to cobble together their own plans and assumptions.

The Wisconsin Council of Churches ecumenical recommendations have been shared around the United States. Rather than lean on specific plans from one state or jurisdiction, this edition (2.0) relies instead upon specific data sets which are easily found at the statewide and county-level, and regularly updated. We have compiled these recommendations in consultation with those who have been trusted advisors, as well as from research from reliable, well-credentialed sources. These include those with credentials in:

- Public health, medical practice and medical school faculty
- Lab science and infectious disease research
- Epidemiology, immunocytochemistry and pharmaceuticals
- Employment and nonprofit law
- Church leadership at the judicatory level
- Local parish clergy

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1. We recommend prioritizing life and health of neighbor in all ministry decisions as a Gospel witness.

2. Concurrent values include creativity (holy experiments), urgency and care in meeting human needs, and attending to diversity and accessibility.

3. Norms of these recommendations include taking seriously the church’s role as community leader, and trusting in the resilience of the church.

4. Churches should take a two-step approach to gathering, tracking the following data:

   **FIRST, watch vaccination rates.** When more than 50% of the population has been vaccinated, we can expect that it will begin to have an impact on viral transmission (although “herd immunity” will not likely be fully reached until vaccination rates exceed 75%).

   **THEN, track COVID cases per 100,000 population and the rates of positive tests.** Our safer threshold for gathering is when cases are less than 5 per 100,000 population and positive tests less than 10%. Safest would be even lower.

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<th>UNSAFE TO GATHER</th>
<th>MAKE IT SAFER</th>
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<td>Vaccination rates &lt;50%</td>
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5. Some of the most important things churches can be doing until it is safer to gather in person is to encourage people to be vaccinated, debunk myths about vaccinations and vaccines, and encourage continued protective behaviors.

6. When you begin gathering in physical space again, plan on event modifications, mitigations and protective behaviors until COVID in the community is very low. Expect these modifications to continue for a significant amount of time, perhaps this calendar year or longer. See full text of this document for information about phased plans, mitigating especially risky behavior, and healthy decision-making.

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<tr>
<th>UNSAFE</th>
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<td>Unmasked</td>
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<td>• Sign-in / attendance list</td>
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<td>• All of the “make it safer” plus no or minimized singing</td>
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<td>• Hybrid, phased plan</td>
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<td>• Wait 1 month+ between phases</td>
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<td>• Fallback plan for outbreaks</td>
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Prioritize protecting the life and health of your neighbor
Let yourself continue to be provoked into holy experiments
Follow the call to love and good deeds urgently and care-fully
Prioritizing accessibility honors the diversity and one-ness of Christ's church
Take seriously the church’s role as community leader
Believe in the resilience of the church

The church has been in exile, or in the wilderness, according to whichever metaphor you have chosen for this COVIDtide. There is much that we do not know, and some that we are coming to learn. What we know as a spiritual truth, is that God does not abandon God’s people in wilderness places. God is not restricted to a building or geographical location. God is on the move; God travels with us as we learn and grow. God helps us learn what is essential, and what is dispensible, as what we have known is cast aside and what is coming to be is slowly revealed.

However the church gathers, for business, worship, learning or care, the Holy One is already present. We make our most faithful choices when we invite God into our conversations on a regular basis, and spend a good quantity of time listening.

Churches have been given great freedom within public health guidance. We are mostly able to make choices about gathering people together for religious activities which do not necessarily align with restrictions placed upon other types of businesses or organizations. There are many competing goods at work. We must attend to the questions of spiritual, mental and emotional health of parishioners as well as physical health as we consider the risk of viral transmission in the community.

We have a full range of options to consider, from gathering in physical space with our most familiar range of activities, to gathering in virtual space, taking a sabbatical from some activities, or a hybrid of these. We must make these more than business decisions; they are matters for spiritual engagement and for careful discernment. Human bodies and souls bear the weight of our decisions.

You were called to freedom, brothers and sisters; only don’t let this freedom be an opportunity to indulge your selfish impulses, but serve each other through love. All the Law has been fulfilled in a single statement: Love your neighbor as yourself. But if you bite and devour each other, be careful that you don’t get eaten up by each other!

…the fruit of the Spirit is love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control. There is no law against things like this. Those who belong to Christ Jesus have crucified self with its passions and desires.

*Galatians 5:13-15, 22-24 (CEB)*
As we evaluate ministry choices during the COVID pandemic, Wisconsin Council of Churches recommendations lean always to those most protective of the life and health of neighbors – those we know and those we do not yet know.

With this freedom to meet, it is perilously easy to focus on meeting our own needs and desires. Do we miss the affirmation of a crowd? The reassurance of predictable flows through a bank account? The swelling of the heart as the assembly unites in song? These are griefs and losses to be recognized, but not to control our lives. Our longing to gather with beloved community in physical space combines with anxiety over the financial well-being or sustainability of the church. In our moments of greatest worry, we wonder whether people will forget the habit of coming to this building the longer we remain physically dispersed. Watching the activity of neighboring churches and businesses who choose differently raises the anxiety level even higher.

These systemic stressors can lead us to seek rationales to meet in person, whether it is to reduce conflict, demonstrate faithfulness, project normalcy or maintain viability. However, an overly hasty re-opening can place parishioners, staff and the community at greater risk of disease, disability and death - violating the Law of love. As Christians, we re-define freedom according to the Cross; following Jesus, mercy and selfless love become the priority as we relinquish our own priorities.

Letting the Spirit lead us in careful discernment, we can watch for what we know to be its fruit. Love, joy, peace, patience, kindness, goodness, faithfulness, gentleness and self-control will be the marks of how we care for one another as we continue to live with the effects of the pandemic. We must constantly ask the questions: how can we be joyful, peaceful, patient, kind and good… here and now? What is most faithful, given the conditions we are living with? How can we be gentle with one another and ourselves? How can we exercise self-control for the good of all?

And let us consider how to provoke one another to love and good deeds, not neglecting to meet together, as is the habit of some, but encouraging one another, and all the more as you see the Day approaching.

Hebrews 10:24-25 (NRSV)

We have been provoked into holy experiments by the necessity of these times. The people of Christ’s church continue to meet together – in a greater diversity of ways than before. While the doors of our buildings have been mostly closed for safety’s sake, we have stepped beyond the boundaries of our physical sanctuaries to pray and gather in other places. We do not neglect to meet! We have met in parking lots, in parks, porches, backyards and in homes, as conditions warranted. In times when it is riskier to gather in person, the church comes together on videoconference and social media, by telephone and car caravan, as well as in our hearts.
Christians have had the opportunity to visit church with friends; nurture ecumenical connections and explore the wideness of Christianity; all without traveling. Time and space have become more flexible, allowing us to grow in faith by attending multiple types of services, or view our home church’s worship even if geography, work or family obligations cause a conflict.

**Love calls us to good deeds, and to care-full ways of making them happen.** Our ministries must take place with great caution; maintaining physical distance, hand-washing and wearing a face mask are all caring acts. Even so, we continue. Food pantries make deliveries, community meal are taken to-go, we distribute face masks, chalk hopeful messages on sidewalks and light colorful windows to offer hope to the neighborhood. Educators put together seasonal resources to drop off at homes; ministers of care make telephone calls to members of the community who may be more alone than others, to offer a word of encouragement. Clergy seek out new ways to deliver the old, old story, and to provide the comforting rites and rituals of the church. Great flexibility in how we serve and interact with fellow parishioners, church staff, clergy, and neighboring churches is a manifestation of the love we are called to by Christ.

**Love calls us to prioritize accessibility.** In what ways can we ensure that the church’s ministries are available to the greatest number of God’s people? Before the pandemic stretched us, there were those left out by the physical inaccessibility of buildings, problematic schedules, a bias toward written resources, or other concerns. New ministry patterns have opened up new possibilities for some who have struggled. As we move toward a more open ministry with physical gatherings once again possible, a commitment to hybrid practices can ensure loved ones newly made welcome are not left behind. We must include in our embrace those who struggle to access technology, and those who need it to stay connected. We can continue to learn from one another about the diversity of Christ’s church. The practices which have nourished our siblings in the wilderness may be ones which can help the church continue to flourish in the time to come.

*The church’s one foundation is Jesus Christ, our Lord;*  
we are a new creation by water and the Word.  
*From heav’n he came and taught us what perfect love can be;*  
through life and death he sought us, and rose to set us free.

*The church in ev’ry nation is one through all the earth;*  
our charter of salvation, one God, one faith, one birth;  
one name together blessing, one holy food we share,  
to one hope ever pressing, at one in work and prayer.

*Still, schisms, tribulation, and hatred fuel our war;*  
we wait the consummation of peace forevermore.  
The saints their watch are keeping; their cry goes up, “How long?”  
And soon the night of weeping shall be the morn of song.

*Yet we on earth have union with God, the Three in One,*  
and mystic, sweet communion with those whose rest is won.  
*Oh, happy ones and holy! God, give us grace that we,*  
like them, the meek and lowly, may live eternally.

*The Church’s One Foundation (Text: Samuel J. Stone)*
We believe in the role of the church as a community leader. We can model best practices in health and community care. We are a new creation, and can live our common life in counter-cultural ways. Our power relations and economics need not be those of the society around us. Through our witness, we can demonstrate what it means to give up privilege for the sake of one’s neighbors, what it means to ensure that no one in the community goes hungry, without medicine or housing in times of economic distress. We can demonstrate what it means to ensure no one is left out or alone, even when physical isolation is a dimension of care. We can be beacons of the truth, offering clarity and compassion in a time beset with conflicting information, harsh words and community-wide trauma.

We believe in the resilience of the church. This extended crisis has stretched our endurance and our imaginations. As we grieve so many livelihoods lost and lives forever changed, as we wait for the promised reunion, we are not alone. Faithful people the world over wait and pray along with us. The saints keep watch. We have adapted with great strength and great speed.

In due time, we will be praying and singing and holding sacred space in physical place again; breaking bread at church suppers and celebrating at font and table with regularity. We have been equipped with all we need to see us through that day. We will hold our plans loosely and wait. The church will persevere. Nothing on earth can separate us from the love of God which is in Christ Jesus. Thanks be to God.

### WHEN CAN WE RETURN TO CHURCH (PHYSICALLY)?

The approval of multiple vaccines for use in the United States, and the beginning of distribution, has given many of us hope that the COVID-19 pandemic is loosening its hold, and we will soon be able to gather in physical space once again in significant numbers. We must temper our hope with the recognition that our timeline depends upon human-organized systems (vaccination distribution) and behavior (vaccination rates and continued protective choices to reduce disease transmission).

We can hasten the days of gathering together safely by following the latest public health guidance, encouraging our members and communities to receive approved vaccines; and maintaining the expectation of individual and community COVID protections until the majority of the population is vaccinated and the rates of viral transmission begin to decline substantially.

Based upon our research and consultations, we recommend that worshiping communities and faith-based organizations take a two-step approach, tracking the following data to evaluate when it is safer to gather:

- **FIRST**, watch vaccination rates. When more than 50% of the population has been vaccinated, we can expect that it will begin to have an impact on viral transmission (although significant “herd immunity,” and its associated large drop in viral transmission, will likely not be fully reached until vaccination rates exceed 75%).

- **THEN**, begin watching two data points: COVID cases per 100,000 population and the rates of positive testing. These should begin to decline.
Until the rate of COVID spread in our communities declines substantially, it will be wisest to continue with our lowest-touch methods of ministry: recordings, livestream/broadcast, print materials, video/telephone meetings, working from home, etc.

The chart below offers our recommendations for each step.

- If you choose the most cautious option, wait for vaccination rates of 70-85%, watch for COVID cases to be less than 1/100K, and watch for COVID test reporting to be less than 5% positive.
- If your community takes a less cautious stance, you may choose to evaluate gathering activities when vaccination rates are slightly lower, and viral transmission slightly higher. There will always be a risk; you are choosing a higher risk for yourself, church staff, parishioners and the community at large if you choose to gather when COVID is circulating more broadly in the community.

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<td>- Cases&lt;1/100K</td>
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<tr>
<td>- Positive Tests &gt;10%</td>
<td>- Positive Tests&lt;10%</td>
<td>- Positive Tests&lt;5%</td>
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We will track this data for the State of Wisconsin and post it on our website at least twice monthly. Links to track statewide or county-wide data can be found in the appendix.

**HOW SHALL WE RETURN TO CHURCH?**

What we know about the novel coronavirus has expanded dramatically since it first changed our way of life in the United States. Careful study of the transmission of COVID via surfaces and the air, protective equipment, treatment and prevention has given us good data. This knowledge allows us to create ministry plans which mitigate risks as we gradually resume gatherings in physical space.

**A reminder: we do not recommend pursuing any “return to church” plan until vaccination rates are well over 50% and viral transmission in the community is very low. Please see “When Can We Return to Church (Physically)?” if you have not already read it.**

No plan we choose will be definitively safe. While COVID19 exists among us, there will be a risk, particularly to the most medically vulnerable. This will continue for some time. We don’t believe it will be possible to live out the hope, “we won’t go back until everyone can go back” in a reasonable time frame. Instead, we urge you to choose a combination of the best mitigations you can agree upon as a community, and the most vital hybrid ministry options you can muster, in order to be an inclusive body of faith.
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<td>Unmasked</td>
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<tr>
<td>No distancing</td>
<td>• Low-touch environment</td>
<td>• Wait at least 1 month between phases</td>
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<tr>
<td>Full capacity</td>
<td>• Outdoors or increased air exchange</td>
<td>• Fallback plan for outbreaks</td>
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<tr>
<td>Assembly singing</td>
<td>• Shortened time of service</td>
<td>• Communication plan</td>
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<td>Eating together</td>
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<td></td>
<td>• Focus on sanitizing high-touch surfaces</td>
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<td>• Sign-in with sanitized pens, track attendance</td>
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**What we know is and will be unsafe for a long time to come**, is gathering at full capacity without distance between households, without face coverings, singing as an assembly of God’s people, and eating together. Making the choice to step back in all at once is the most dangerous way to resume ministry in physical place, and we do not recommend it. We urge faith communities to step carefully from a closed building to a partially open one. Hybrid ministry and a gradual, phased return is faithful stewardship of resources which have been built up over the course of the pandemic.

**Don’t assume that vaccination itself confers blanket safety to the community.** Even the most effective vaccines are not 100% effective, and a 95% effectiveness rating means that 1-in-20 vaccine recipients will remain susceptible to developing symptomatic infection even after completing the vaccine series. Moreover, there is good reason to believe that a larger than 1-in-20 proportion of vaccine recipients will still be capable of developing asymptomatic infection and therefore being infectious to others. That is why we recommend waiting until we see both widespread vaccine uptake and dramatic reduction in viral transmission in our communities.

**To resume ministry in physical spaces in a safer way,** we can add several mitigations. Most critically: we recommend making face masks mandatory, and having someone who is not the pastor responsible for ensuring people adhere to this. You may want to budget and plan for a supply on hand. Communicate clearly to the congregation to stay home if they feel at all “off,” if they know they have been exposed, or if they are waiting for COVID test results. Use less than the full capacity of your space and increase physical distance between household groups (6-10 feet is recommended).

Don’t assume that you have distancing covered by blocking off pews. You will need to think about ways to hold distancing outside the sanctuary – outside the door, in entryways, by coat racks, near and in restrooms. Make sure you have a sign-in so you can track attendance in case there is a need to trace contacts.

We know that viral spread is affected by the amount of time we are together in an enclosed space. Shorten the length of events to 30 minutes or less if possible. Consider meeting outdoors; or if you cannot, increase the air exchange in your building with open windows and doors, or modifications to your HVAC system (fans are not recommended). Create a low-touch environment by pre-positioning bulletins or communion elements, emptying fonts, modifying the passing of the peace, and eliminating greeting lines. If sung music is essential, have it offered by worship leaders only (masked if possible, and well-distanced from others).
When cleaning the building, regular cleaning is generally sufficient, although a focus on sanitizing high-touch surfaces is recommended.

**Our gold standard for the safest return to physical space** includes all of these “make it safer” recommendations, with the modification of no or minimized singing by worship leaders (for example, a soloist or cantor instead of multiple singers). The addition of phasing, fallback plans, strong communication and team responsibility for decision-making increase the strength of this method. The creation of a group which includes and empowers clergy, key staff and laity can set up a healthy process. You might consider having this group be comprised of members outside of the church council and include people with medical, education, and communications expertise. See the next section on “Making Healthy Decisions” for more information about phasing and fallback plans in case of outbreaks.

**“But what about?” Some of the Riskiest Activities**

The guidance on singing and eating together has not changed. These are some of the riskiest behaviors when it comes to spreading COVID and our typical church practices are unfortunately excellent vehicles for spreading illness.

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<th>UNSAFE</th>
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<tr>
<td>Singing</td>
<td>Unmasked assembly</td>
<td>Masked, 6-10 foot distance, outdoors, leader instead of assembly</td>
<td>One of the last things to reintroduce</td>
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<tr>
<td>Eating meals together</td>
<td>Indoors, Buffet</td>
<td>Distribute outdoors, pre-assembled, to-go</td>
<td>Pre-packaged food Home delivery Alternative activities</td>
</tr>
<tr>
<td>Eucharist</td>
<td>Unmasked, Tearing bread, Common cup, passed elements</td>
<td>Distanced lines, masks until receiving Celebrant/minister sanitizes before, with any contact, after Host or pre-cut bread, individual cups in place</td>
<td>Pre-packaged elements pre-positioned in pews Spiritual Communion</td>
</tr>
<tr>
<td>Home &amp; Care Facility Visits</td>
<td>Unmasked</td>
<td>Mask and face shield, sanitize hands, Limit 1/day, change clothes after visit</td>
<td>Telephone, video, front porch visits, mail</td>
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**Singing as a congregation should be one of the last things we plan to re-introduce to our gatherings.**

Church meals – including funeral luncheons – also continue to be places where disease is too easily spread at this time, and we do not recommend hosting or attending them. As a ministry to those who are hungry among us, we can modify our options to distribute meals to go until it is safe to host people in a building again.

As for the Lord’s Supper, we recognize there is a wide range of sacramental practice and urge you to undertake the safest version which is faithful within your tradition and meets your spiritual needs. At times of high viral transmission, we urge churches and faith-based organizations to lean towards the safest methods outlined above.
Many detailed policy questions seem like they require consultation with an expert. Should we require waivers of liability? vaccinations? test results? How do we handle employees working from home for so long?

- **Overall**, whatever COVID policy or practice you establish, be clear and consistent.
- **Liability Waivers**: At this point in time, unless your judicatory or insurance agent requires that program participants sign a COVID liability waiver, that’s not an action we’re recommending churches focus on in their return to ministry in physical place. We do believe it would be wise to post a sign near your entry indicating that you are taking all thoughtful precautions, but there’s no guarantee of safety from COVID-19 on the premises.
- **Building Use Policies**: We do recommend that you require building users to adhere to the same COVID policies and procedures the church does, including masking, distancing, capacity and attendance lists.
- **Vaccinations**: The EEOC has affirmed that employers may require vaccination of employees; dependent on job characteristics, and with legal exceptions. The resources section of this document references the EEOC website and an article by the Society for Human Resources Management on the topic.

  We highly recommend vaccination but do not have a position on requiring it of staff. We don’t believe churches will be in a position to require or expect vaccination of program participants or parishioners before their return to events in physical space; that does not mean we cannot enthusiastically encourage it and educate/advocate for high participation in vaccination.

  The reality that less than 100% of employees and parishioners will be vaccinated lends extra weight to the other public health recommendations of masking, physical distancing and avoiding the riskiest activities until viral transmission is low in the community.

- **Test results**: We have had several questions regarding employees with COVID exposures who sought out testing. Depending on the employee’s job characteristics, you may be able to require COVID test results from them. If you are facing such an issue, you should consult the local health department in the jurisdiction where the person lives for current guidance, and an employment attorney.

- **Place of Work**: There is much to be gained by being a flexible employer, especially during a global crisis. How can we reassess what work looks like at this time? For the sake of community health, continuity of operations, and staff health, this is an area in which churches can explore multiple options. What reasonable accommodation can the church make to allow clergy and staff to work from alternate locations, while still promoting the mission and fulfilling the essential functions of the role?
MAKING HEALTHY DECISIONS AS A COMMUNITY

We know that more church conflicts arise and progress because lack of agreement over how a decision is being made than what decision is made. We believe that the following principles can help your “Returning to Church” task force with some of the critical steps along the way.

1. **Commit to a guiding authority for your decisions:** Some churches have chosen the WCC’s guidance; others are using their regional church body’s recommendations or need to abide by public health restrictions. Some are researching statistics on their own and making evaluations internally. Others have created an agreement with multiple churches in their area to proceed together. Whichever authority you are using to make your gathering decisions: choose and publicize this commitment so people understand the resources you are using.

2. **Choose a risk level or “risk budget”:** Will your community choose “safest,” or “safer”? Will you choose one level with specific modifications or occasional reasoned departures? Are there ministries which are riskier that you want to prioritize in your community, even if it means you need to de-emphasize others? Identify which and why. Making this determination up front rather than considering situations on a case by case basis can reduce stress on the leadership and clear up confusion within the church.

3. **Pick a statistical source and stick with it:** There are minor variations between even the most reliable sources due to reporting timelines and the specifics of what they track. This does not make the data from any of these sites any less reliable. However, you will want to choose a site and use it regularly so your data is consistent. Don’t jump around between tracking sites (for example, WI-DHS, Harvard Global Health, CDC, NY Times) from week to week trying to find better or different numbers; you run the risk of missing trends in the data. Agree as a team which source(s) you’ll use.

   In our consultations with churches, the Wisconsin Council of Churches regularly pulls data from WI-DHS, globalepidemics.org, and the Georgia Tech COVID Risk Calculator. You’ll find links to these and other reliable sources in the appendix.

4. **Establish a phasing plan:** At what point will you open up a little bit more? What does “a little bit more” look like for you – recording or streaming worship from the church building? Moving from parking lot to church lawn? Moving from outdoors to indoors? Increasing the number of people in attendance? Having the church staff work on site again?

   We offer below a very basic version which you could use as a model to begin building out your own plan. You would want to insert numeric limits based on the size of your worship or program space and your own particular activities.
Sample phasing plan (simple)

<table>
<thead>
<tr>
<th>When COVID numbers look like…</th>
<th>We'll…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccinations &lt;70% of population</td>
<td>Encourage vaccination</td>
</tr>
<tr>
<td>Vaccinations &gt;70% of population AND About 25 cases/100K</td>
<td>Record worship in the sanctuary with 3 people again</td>
</tr>
<tr>
<td>Vaccinations &gt;70% of population AND About 10 cases/100K</td>
<td>Re-evaluate phasing plan</td>
</tr>
<tr>
<td>Vaccinations &gt;70% of population AND About 5 cases/100K</td>
<td>Re-open the office for visitors (masks &amp; distancing required)</td>
</tr>
<tr>
<td>Vaccinations &gt;70% of population AND &lt;1 cases/100K</td>
<td>Organize limited-attendance events (size?)</td>
</tr>
</tbody>
</table>

Every month afterward | Increase the number of people allowed in attendance as long as viral transmission stays below 1 case/100K and we have no outbreaks

5. **Hold each phase for at least 4 weeks:** Public health experts remind us that it’s best to keep in mind the incubation cycle of viruses when we change our behavior. There is a lag between our interactions and when we see their impact. Four weeks is two incubation cycles of COVID-19. If our increased interactions are resulting in greater spread, it will more likely be evident at the four-week mark. If there are increased cases or a significant outbreak, then it would be a signal to pull back on your plan. If there is no increase, it would be a positive sign that you could continue or possibly consider a slight loosening of restrictions. That might look like allowing more people to gather, having slightly longer gatherings, increasing the use of your space, etc.

6. **Have a fallback plan:** A good “Returning to Church” plan also needs a fallback plan for when human behavior and COVID numbers don’t cooperate. What will you do if people refuse to mask or distance as you return to physical space? What will you do if (when) community COVID spread increases? Be ready to step back in measured ways. Just as when you re-opened, hold a fallback plan for four weeks to watch for a change in viral spread in the community. Until the numbers level off and begin dropping, it’s important to reduce person to person interactions. When the numbers begin dropping again, you could consider resuming your plan.

7. **Have an outbreak plan:** Be ready in case of an outbreak in the church, whether among parishioners or staff. With the increased prevalence of COVID, it is only a matter of time until there is a case of COVID in your faith community, if you haven’t already seen cases already. When you are gathering in person, you need to be prepared to deal with potential and actual exposures. You may be anxious and find it difficult to think when you receive the call that someone who attended church was COVID positive or may have been exposed and is being tested. It can be helpful to have a communications template ready to go. The appendix includes a link to a toolkit prepared by the Wisconsin Department of Health Services specifically for faith communities.
Here’s a list of the most important action steps when you have learned that someone in your faith community has a positive COVID test result. You may wish to put this in a place where it can be easily found in a crisis.

<table>
<thead>
<tr>
<th>What to do when someone who attended church was COVID positive and it’s hard to think</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Express care and concern. Respond pastorally; see if the person or their household have immediate needs.</td>
</tr>
<tr>
<td>□ Find out which events they joined physically in the past 2 weeks. Look up the attendance list.</td>
</tr>
<tr>
<td>□ Contact the local health department and notify them of the exposure.</td>
</tr>
<tr>
<td>□ Reach out to persons who were at those events and notify them they should quarantine at home for the time being, call their local health department and their doctor for further evaluation and instruction, and find out from their health department or doctor if or when they should get tested.</td>
</tr>
</tbody>
</table>

Sample script: “Someone who was at <church event> with you on <date> tested positive for COVID-19. We are actively working with the [insert county/city] Health Department to quickly identify, notify, and quarantine anyone who may have come into close contact with them and who may be at risk of getting sick. We are also cleaning and disinfecting to control the spread of illness. We urge you to stay home and contact your doctor and your health department for further evaluation and instruction.”

NOTE: You can share event information to help people assess their risk — but do not divulge the name of the person who is COVID positive. In a small church, this may indirectly identify the person, but you should still avoid sharing the name. You can notify by phone, email or mail depending on the size of the event.

□ Notify local church leaders and judicatory leaders.

□ Make arrangements to cancel church events for the next two weeks and ask your local health department for additional organizational guidance.

□ Use a communications template to reach out to the whole church with general information.

□ Arrange for the church to be thoroughly cleaned before re-entry.

8. **Learn and Use Depolarizing Skills:** We are all living through a time of trauma, having leapt from crisis to crisis, whether our attention is dominated by the recurrent surges of COVID, the enduring brokenness of racism and white supremacy, economic distress, or political violence. Wisconsin is one of the most polarized states in the nation. The response to the COVID pandemic has been politicized. And we are weary. Our mental health and our spirits are frayed from a year of physical distancing and dis-ease. When you put these realities together, maintaining a commitment to healthy interactions and communication is extraordinarily challenging.

We urge you to remember the simple phrase, “Count higher than two.” Our most intractable arguments come down to binaries: “either”, “or else.” Can we borrow from the parabolic thinking and storytelling of Jesus, when faced with a difficult, no-one-wins situation, and find another way?

9. **Model Holy Imagination:** Our society is being remade by this coronavirus and concurrent crises. While we have a great deal of nostalgia for the church we knew before we departed our buildings due to COVID, that is now a different reality. Few of our problem-solving skills and models from “before” will suit us in the common life that is emerging from this time. Healthy decisions in this time will require a great deal of courage to step into the unknown – and also a willingness to hold nonessentials loosely.
Some Reliable Data Sources

**DHS COVID Data**
- Summary Statistics [https://www.dhs.wisconsin.gov/covid-19/data.htm#summary](https://www.dhs.wisconsin.gov/covid-19/data.htm#summary)
- Vaccine Data [https://www.dhs.wisconsin.gov/covid-19/vaccine-data.htm](https://www.dhs.wisconsin.gov/covid-19/vaccine-data.htm)
- Hospital Capabilities [https://www.dhs.wisconsin.gov/covid-19/hosp-data.htm#capabilities](https://www.dhs.wisconsin.gov/covid-19/hosp-data.htm#capabilities)

**NY Times COVID Data Summary**

**Pandemics Explained: COVID Risk Levels**
- Dashboard [https://globalepidemics.org/key-metrics-for-covid-suppression/](https://globalepidemics.org/key-metrics-for-covid-suppression/)

**CDC**

**Georgia Tech COVID Risk Calculator**
- Event Risk Assessment Planning Tool [https://covid19risk.biosci.gatech.edu/](https://covid19risk.biosci.gatech.edu/)

Some Reliable and Helpful Information Sources


**Friendly Neighbor Epidemiologist** [https://emily-smith.net/covid-19-posts/](https://emily-smith.net/covid-19-posts/)

**Center for Infectious Disease Research & Policy (CIDRAP)** [https://www.cidrap.umn.edu/covid-19](https://www.cidrap.umn.edu/covid-19)

**Osterholm Update** [https://www.cidrap.umn.edu/covid-19/podcasts-webinars](https://www.cidrap.umn.edu/covid-19/podcasts-webinars)


Seven Habits of Highly Depolarizing People https://www.the-american-interest.com/2016/02/17/the-seven-habits-of-highly-depolarizing-people/

Spiritual Leaders in WI COVID Toolkit (includes model letters for exposures/outbreaks) https://www.wichurches.org/2020/10/20/spiritual-leaders-covid-toolkit/

WCC COVID Resources Index https://www.wichurches.org/2020/03/11/coronavirus/

WCC Returning to Church Page https://www.wichurches.org/2020/04/23/returning-to-church/

Webinars and Videos

Doing Theology in Pandemics Virtual Conference https://doingtheologyinpanpandemics.org/


Vaccine Panel Discussion (Mt. Zion Baptist Church) https://fb.watch/2ZQEkTLYv2/


WCC Youtube Channel https://www.youtube.com/wisconsincouncilofchurches

WCC COVID Video Playlist – our own webinars and others https://youtube.com/playlist?list=PLIj3ygl_K23W8D5YNiW8A6A4-229mut-S

This document was developed by Wisconsin Council of Churches staff with input from religious leaders, local church pastors, public health experts and emergency management officials. We are particularly grateful for the insights of Dr. Geof Swain, MD, MPH, founding director of the WI Center for Health Equity; Attorney Sarah Kissel of Scholz Nonprofit Law LLC; and Lisa Allgood, immunocytochemist and Executive Presbyter of the Cincinnati Presbytery. This is not a formal policy statement of the Council. We are neither attorneys nor physicians. We recommend that you consult your ecclesiastical authorities for final guidance. Released 1/14/2021.