COVID-19: Recommended Preventative Practices and FAQs for Faith-based and Community Leaders

PLEASE NOTE: The following recommended preventative practices and answers are in response to common questions we have received. They are based on what is currently known about the Novel Coronavirus Disease 2019 (COVID-19). Should you have questions that are not listed below, please contact the Partnership Center at partnerships@hhs.gov or 202-260-6501. We will do our best to respond in a timely fashion and will continue to update this document as further questions and information come to our attention.

Primary Resources

- For updates on the Novel Coronavirus Disease 2019 (COVID-19), refer to the Centers for Disease Control and Prevention’s (CDC’s) dedicated website. Also available in Spanish.
- For local information and for recommendations on community actions designed to limit exposure to COVID-19, check with your state and local public health authorities.
- For guidance and instruction on specific prevention activities related to your community’s tradition and practices, refer to your national and regional denominations.

The Role of Faith-based and Community Leaders

Faith-based and community leaders continue to be valuable sources of comfort and support for their members and communities during times of distress, including the growing presence of COVID-19 in different parts of the country. As such, these leaders have the unique ability to address potential concerns, fears, and anxieties regarding COVID-19. Additionally, by reiterating simple hygienic precautions and practices, these leaders can broadly promote helpful information, managing fear and stigma, and restoring a sense of calm into the lives of those in their care.

Such leaders are also poised — through their acts of service and community relationships — to reach vulnerable populations with essential information and assistance. These acts of service are an essential part of the safety net for the vulnerable in their communities.
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Recommended Preventative Actions

1. **Follow CDC Recommendations**
   The best way to prevent illness is to avoid being exposed to this virus. Currently, no vaccine exists to prevent COVID-19. Communities are encouraged to follow CDC recommendations to help prevent the spread of respiratory diseases — including the flu:
   - **Stay home when you are sick**, except to get medical care.
   - **Cover your coughs** and sneezes with a tissue and then throw the tissue in the trash.
   - **Wash your hands often with soap and water for at least 20 seconds** — especially after going to the bathroom; before eating; and 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**.
   - **Avoid touching your face** with unwashed hands, especially your eyes, nose, or mouth.
   - **Thoroughly and repeatedly clean high-contact surfaces** and objects.
   - **Review your process for planning events**, programs, and services. Identify actions to take if you need to temporarily postpone or cancel events, programs, and services.
   - **Identify space in your facility** to separate individuals who may become sick and cannot leave immediately.
   - **Stop any stigma related to COVID-19** by knowing the facts and by sharing them with others in your community.

2. **Follow Guidance for Prevention and Preparedness Activities**
   - Review the CDC’s “[Interim Guidance: Get Your Community- and Faith-Based Organizations Ready for Coronavirus Disease 2019 (COVID-19)].”
   - Check with your state and local health authorities. Public health officials may recommend community actions designed to limit exposure to COVID-19, depending on the risk of an outbreak or the severity of an outbreak.
   - Visit the CDC, HHS, and Partnership Center social media sites for the latest information and access to downloadable signage for your facilities.
     - Twitter | CDC: @CDCgov; HHS: @HHSgov; and CFOI: @PartnersforGood
     - Facebook | CDC: @CDCgov; HHS: @HHSgov; and CFOI: @HHSPartnershipCenter
     - Instagram | CDC: @CDCgov and HHS: @HHSgov
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- Additional and more specific recommendations may be found on the websites of various national denominations, faith groups, and community service organizations, such as:
  - Ensure community contact lists are up-to-date and that ‘calling trees’ — or other practices to account for individuals who may be living alone, elderly, and vulnerable — are in place;
  - Consider how your organization can use technology to make the service or event available online. Consider partnering with other communities with existing technological capacity;
  - Consider how community and liturgical practices can be adapted to minimize hand contact (e.g., see FAQs below regarding greetings and objects the community collectively handles);
  - Plan ways to continue essential services if onsite operations are scaled back temporarily. Provide web- and mobile-based communications and services, if possible. Increase the use of email, conference calls, video conferencing, and web-based seminars;
  - Make sanitizing products available;
  - Consider suspending the use of religious rituals and traditions (e.g., draining baptismal fonts, holy water stations, and vessels used for ritual washing), if present;
  - Conduct care visits by phone or virtually, especially if the individuals are in quarantine, isolation, or are taking precautions by staying at home;
  - Acknowledge this as a time of heightened stress and anxiety for the community, and respond with practices appropriate to your organization’s mission or faith tradition, like prayer;
  - Minimize panic and stigma by educating communities, preparing for disruptions in service, and taking thoughtful preventative measures; and
  - Establish the routine cleaning of sanctuaries, food service areas, and other communal spaces.

3. Make Plans that Prepare and Protect Your Community and Those Whom You Serve

- Review regularly your national and regional communications for guidance and instruction on specific prevention activities relative to your community.
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- Here’s a suggested planning outline:
  - **FIRST: Make Plans to Stay Connected.**
    - Ensure community contact lists are up-to-date and that ‘calling trees’ — or other practices to account for individuals who may be living alone, elderly, and vulnerable — are in place;
    - Ensure there is a clear process for communicating the “connection plan” to the community; and
    - Think about what would be necessary to stay connected to the community virtually (e.g., worship gatherings and community groups).
  - **SECOND: Make Plans to Provide Ongoing Care and Services.**
    - Ask what plans are in place to care for community members, especially in cases where individuals live alone or are in quarantine or isolation. For example, leaders could make plans to call families during the week should the community be confined to their homes;
    - Prepare for leadership coverage in case staff become ill;
    - Protect workers who clean and maintain religious facilities and fellowship centers from exposure to the virus and other workplace hazards, such as disinfectants used for cleaning, and train them on how to do their jobs safely, use any necessary personal protective equipment (e.g., gloves), etc. Consider recommendations from the Occupational Safety and Health Administration and CDC’s cleaning/disinfection guidance;
    - Pay special attention to nursery and childcare facilities. Ensure children's areas (including toys) are thoroughly cleaned and disinfected before and after use; and
    - Make plans to live-stream your service or other events, if appropriate.
  - **THIRD: Make Plans to Maintain Operational Continuity, Support Staff, and Those Whom You Serve.**
    - Consider any necessary preparations to handle the business and operations of the community;
    - Consider strategies to address the ongoing financial needs of staff: employee payroll, tele-work accommodations, etc. Especially consider staff who depend on hourly wages and may lack health insurance;
    - Keep food pantries well stocked and include cleaning and sanitizing products; and
    - Learn how to conduct small and large meetings by electronic means. Consider how to continue relationships and classroom activities, such as mentoring or ESL classes.
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FOURTH: Make Plans to Partner.
- Consider how the resources of your community can assist with the special needs of the vulnerable and/or isolated populations by collaborating with service agencies in your area. As an example, a faith community could establish a collaboration with a local school to support students who rely on the school meals program if the school closes;
- Communities with more advanced technological assets (teleconferencing, established systems to live-stream events, etc.) may partner with other entities to help stay connected; and
- Consider how your community might partner with local public health officials in providing the most up-to-date information and guidance.

Frequently Asked Questions

- **What Are the Signs and Symptoms of COVID-19?**
  - Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed COVID-19 cases. The following symptoms may appear 2–14 days after exposure:
    - Fever
    - Cough
    - Shortness of breath

- **Should We Have a Gathering at All? How Close Does an Infection Need to Be to Our Community to Consider Cancelling Our Gathering?**
  - Check with your state and local health authorities frequently for the latest information. Public health officials may ask you to modify, postpone, or cancel events if it is necessary to limit exposure to COVID-19. Also, consider ways to connect with vulnerable members of your community in ways that protect them from exposure to other people.
  - Review “Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission.”
  - Use the CDC’s Guidance on Mass Gatherings as a guide for reviewing your community’s calendar and to make decisions on which events may need to be canceled and by when.
  - Track efforts by the federal government, the following websites have been launched:
    - English: www.USA.gov/Coronavirus
    - Spanish: https://gobierno.USA.gov/Coronavirus
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- **Should We Greet One Another as Usual? Shaking Hands, Kissing Cheeks, etc.?**
  - Identify how your community may greet one another in ways that reduce any potential spread of viruses, including COVID-19. For example, provide direction to those gathered to replace hugs with elbow touches. Consider recommending that members not hug or touch one another, but offer hand signals like a peace sign or the American Sign Language sign for “I Love You.”
  - Greeters at all gatherings should be especially aware and refrain from offering handshakes. As one community noted, “Greeters can model hospitality with their words and their smiles.”

- **What Should I Tell People Who Are Concerned?**
  - Reassure them that your faith- or community-based organization, as well as local, state, and national authorities, is taking all necessary precautions to ensure their health and safety. Your response can soothe concerns and create an atmosphere of calm. The best way to prevent illness is to practice routine and common sense hygiene practices. These everyday practices also help to prevent the spread of respiratory diseases, including the flu:
    - **Stay home when you are sick**, except to get medical care.
    - **Cover your coughs and sneezes with a tissue** and then throw the used tissue in the trash.
    - **Wash your hands often with soap and water for at least 20 seconds**, especially after going to the bathroom; before eating; and 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**.
    - **Avoid touching your face with unwashed hands**, especially your eyes, nose, or mouth.
    - **Clean high-contact surfaces and objects thoroughly and repeatedly**.
  - Leaders may find it helpful to review the guidance provided by the CDC in its “Interim Guidance: Get Your Community- and Faith-Based Organizations Ready for Coronavirus Disease 2019 (COVID-19).”
  - Check with your state and local health authorities to learn if your community has experienced a COVID-19 outbreak.

- **How Can We Advise the Elderly, Those with Special Health Considerations, Their Caregivers, and Other High-Risk Populations?**
  - Provide special consideration in communicating risk to vulnerable populations in your community, including older adults and others with access and/or functional needs. Assign, or encourage those whom you serve to seek out, a “buddy” who will check in on and help care for them, should they get sick.
  - Make plans to stay connected.
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- Ensure community contact lists are up-to-date and that ‘calling trees’ — or other practices to account for individuals who may be living alone, elderly, and vulnerable — are in place.
- Convey ways they can stay connected via virtual worship, gatherings, and staff and leadership meetings.
- Ensure there are clear means to communicate any “connection plans” with them.

**What Should I Do if Someone at a Community Gathering Says They Are Feeling Sick?**
- Identify space in your facility or event to separate people who may become sick and may not be able to leave immediately.
- Designate a separate bathroom for those who are feeling sick. Develop a safe plan for cleaning the room regularly.
- Isolate the individual immediately from staff and participants.
- Assist the person in CALLING AHEAD to their health care professional if they have a fever and symptoms of respiratory illness, such as cough or difficulty breathing. Tell them to avoid taking public transportation, ride-shares, and taxis.
- People with confirmed COVID-19, with a loved one in the home with a confirmed case, or those experiencing symptoms should remain under home isolation. The decision to discontinue home isolation precautions should be made on a case-by-case basis, in consultation with health care providers and state and local health departments.

**Is Information About COVID-19 Available In Spanish?**

**Does the Virus Live on Surfaces (e.g., Books or Shared Offering Plates)?**
- It may be possible to be exposed to COVID-19 by touching a surface or object that has the virus on it and then touching your mouth, nose, or eyes; however, this is not thought to be the main way the virus spreads. Review the CDC’s “How COVID-19 Spreads.”
- Clean frequently touched surfaces and objects several times daily (e.g., tables, countertops, light switches, doorknobs, cabinet handles, smart phones, and keyboards) using an appropriate cleaner to minimize the event of a COVID-19 outbreak in your community. For disinfection, most common EPA-registered household disinfectants should be effective. A list
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of products that are EPA-approved for use against the virus that causes COVID-19 is available [here](#). Follow the manufacturer’s instructions for all cleaning and disinfection products.

- If an object is frequently touched, for example as a part of religious observance, it should be cleaned, as appropriate within the religious tradition, after each use.
- If surfaces are dirty, they should be cleaned using a detergent and water prior to disinfection.
- Consider ways your community can reduce the number of objects the community collectively handles.
  - For example, consider no longer passing offering plates down the row; instead, place the offering plate on stands and ask people to leave their offering. Remind those who oversee and administer offerings, or similar items and elements, to wash their hands after administration or use.
  - Organizations may also consider removing shared books and encouraging people to bring their own.

**What Type of Items Should We Have in Our Emergency Preparedness Kit?**

- Consider having supplies on hand, such as hand sanitizer that contains at least 60% alcohol, extra tissues, and trash baskets.
- Refer to the CDC’s [“Preventing COVID-19 Spread in Communities”](#) for additional information about supplies and materials.