



COVID-19 Guidance for Places of Worship

V3.2 17th November 2021

Version	Date	Updates
3.2	17/11/2021	Update to household close contact
3.1	12/11/2021	Updates to definition of singing groups, links to HSE PCR test
3.0	09/11/2021	Review of full document
2.10	16/09/2021	Updated symptom list
2.9	06/09/2021	Added updated symptom list Update in relation to vaccination Updated links to gov.ie
2.8	21/06/2021	Title change to place of worship Addition of more inclusive language Updates to singing/music during worship Update in relation to vaccination Review text in relation to high risk and very high-risk individuals
2.7	28/04/2021	Added in updated recommendation that use of face coverings should be replaced with surgical face masks for certain cohorts within the general public.
2.6	05/03/2021	Removed the term 'vulnerable' when used in a clinical context and replaced with 'high risk' and 'very high risk' as appropriate
2.5	12/01/2021	Addendum for religious services during the holiday season (Christmas) reference removed
2.4	10/12/2020	Added information on soloist singing during worship

2.3	07/12/2020	Clarified type of wind-blown instruments allowed during services
2.2	04/12/2020	Added advice on appropriate building ventilation Added advice on dual-use of settings Added advice on cleaning Updated government road map text Updated information on funeral services Updated information on singing, choirs and musical instruments during services Updated information on wearing of cloth face coverings Included information on risks in indoor congregated settings Addendum developed regarding religious services over the holiday season
2.1	09/07/2020	Added caution: not to use alcohol-based sanitiser near heat or a naked flame
2.0	06/07/2020	Updated to reflect government road map Updated IPC recommendations
1.5	05/03/2020	Amended to reflect cases notified in Ireland
1.4	04/03/2020	Added symptoms
1.2	27/02/2020	Areas affected link updated to HPSC list

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Preface

This document outlines the measures that should now be adopted in order to enable faith and religious services to take place indoors in a safe manner. [Current Government Guidelines](#) [1] must be adhered to for all religious services, rites, ceremonies and related celebrations. This guidance document should be read and interpreted in conjunction with the Irish Government COVID-19 [“Resilience and Recovery 2020-2021: Plan for Living with COVID-19”](#) [2] risk management strategy and the [“General Advice on preventing spread of COVID-19 and other respiratory illness”](#) [3].

Summary of key points

The gathering together of people indoors, especially in crowded, poorly-ventilated settings, has been associated with a higher risk of COVID-19 infection. Despite the successful rollout of the COVID-19 vaccination programme in Ireland, there is still an ongoing risk of COVID-19. This is because vaccination offers a high level of protection against severe disease and the need for hospitalisation but it does not offer complete protection against infection. Precautions to prevent introduction and spread of the virus in indoor settings are therefore still required even in the context of community vaccination. Religious services and weddings can now proceed without capacity limits but with all other protective measures remaining in place. These protective measures will help reduce the risk of spreading and contracting COVID-19 and other infectious diseases [3]. These include the following:

- Get vaccinated. Vaccination offers the best protection for you, your family and for others against severe disease
- Stay at home and do not attend a service if you have symptoms of an infectious illness including COVID-19
- Get tested if advised to do so and self-isolate if required. This still applies after you have been fully vaccinated.
- Clean your hands thoroughly and regularly
- Wearing a face covering/mask is recommended in places of worship
- Meeting outdoors is safest. However, when indoors, optimise physical distancing and make sure the place is well ventilated, either through natural ventilation (i.e. opening windows and external doors, taking account of weather and comfort) or by mechanical means (e.g. central air-conditioning unit)

Key elements in organising and planning safe services

- Allow sufficient time for cleaning of contact surfaces before each service.
- Congregants are advised not to gather immediately outside the door before or after the service.
- [Alcohol-based hand rub](#) [4,5,6] should be provided for use at entry, exit and other appropriate points within the space. Tissues and bins should be provided for safe disposal. Hand-washing facilities, including soap dispensers and disposable towels, should be well maintained.
- All hard surfaces that are frequently touched, such as door handles, hand rails, seats, and taps should be cleaned regularly with a household detergent. Touching of surfaces should be minimised.
- It is recommended that congregants continue to wear cloth face coverings or masks during indoor services and ceremonies. A mask provides better protection than a visor, which should not be used unless there are specific problems with using the face mask. Please note the use of surgical masks rather than face cloth coverings is now recommended to be worn by people who are in [high risk](#) and [very high risk cohorts](#) when in confined community spaces [7,8]. Further guidance on the use of face coverings for the general public can be found [here](#) [9,10,11].
- Faith and religious leaders do not need not to wear a cloth face covering if they are fully vaccinated and can optimise physical distancing from any participant and the area is adequately ventilated
- Groups of singers (i.e. choirs and musical ensembles) may perform following implementation of any mitigation actions identified by risk assessment.
- Singing in groups indoors (i.e. choirs and musical ensembles) should be limited in line with the capacity of the space, given appropriate social distancing requirements (both from other singers, the choir master, the congregation or other individuals in the setting). Additional mitigation measures advised include checking for symptoms before starting, face coverings should be worn where this is practicable, instrument covers, smaller choirs, performing outside, shorter rehearsals, avoiding contact with others, regularly cleaning commonly touched surfaces, hand hygiene and ensuring adequate ventilation [12].

- **Members of the congregation** should avoid singing, shouting, chanting and raising of voices, as this may increase the risk of airborne transmission of the virus; if possible, encourage the use of microphones or similar equipment to minimise voice volume.
- Pianos, pipe organs, and other forms of musical instruments (e.g. string, percussion, woodwind) not associated with additional risk are allowed during the service if adopting appropriate public health measures as outlined above [13,14].
- For religious gatherings that require performance of ablutions before prayer, people should be asked to perform ablutions at home rather than at the place of worship if this is possible.

Purpose of this guidance

This guidance document provides advice for faith and religious leaders and organisers for places of worship, and provides information for those attending services about preventing the spread of COVID-19. This guidance applies to congregational settings and places of worship including churches, synagogues, mosques and temples. The measures below are aimed at minimising the risk of COVID-19. Some aspects of the guidance are specific to certain denominations but the guidance in general is intended to be relevant to all faith and religious groups.

Information on COVID-19 Pandemic

COVID-19 is an illness, identified in late 2019, caused by a virus called SARS-CoV-2. We are still learning about how easily the virus spreads from person to person and how to control it, so it is important to make sure you are using the most up to date guidance available [here](#) [3].

We must all do everything we can to prevent the spread of the disease in the community. It can take up to 14 days for symptoms of COVID-19 to show. Infection can spread from people before they get symptoms. Some people with infection develop no symptoms, or have symptoms that are so mild that they take little notice of them, but they can still spread infection.

At the beginning of the COVID-19 pandemic, the primary way to prevent the spread of the virus was by implementing a series of non-pharmaceutical interventions (NPIs), such as physical distancing, wearing of a face covering and frequent hand hygiene. However, effective vaccines against COVID-19 are now available and a robust vaccination programme has been implemented in Ireland. This is an additional and important intervention to prevent severe disease and to limit the spread of the virus.

As we are now at a different stage of managing and controlling the COVID-19 pandemic in Ireland the resumption of certain activities, is now occurring. However, it should be acknowledged that while the vaccination programme continues there is still an ongoing risk of COVID-19 and community transmission. Precautions to prevent introduction and spread of the virus in indoor places of worship are still required even in the context of community vaccination. Although the COVID-19 vaccine has been proven to reduce the risk of spread of COVID-19 and reduce the risk of severe disease or hospitalisation, it does

not prevent all infection. Additionally, there is now some concern that the vaccine may be less effective against some virus variants. For this reason, to help manage that risk, existing recommended infection prevention and control measures should remain in place.

Please visit [HSE website](#) for a list of symptoms [15].

How COVID-19 virus is spread

The virus is spread mainly through the air from the nose and mouth of a person with infection. For example, when the infected person coughs, sneezes, talks, sings, shouts or laughs. There is evidence that COVID-19 outbreaks are more commonly associated with crowded indoor spaces, and that poor ventilation may increase the risk of transmission in such settings by facilitating the spread of liquid respiratory particles over longer distances [16]. Further information can be found [here](#).

Surfaces and objects can be contaminated when liquid respiratory particles from an infected person fall onto them. You can therefore, also get infected if you touch - with your hands – a contaminated surface or object (for example a table top or a religious item) and then you touch your mouth, nose or eyes without having washed or sanitised your hands thoroughly.

[The Health Information and Quality Authority \(HIQA\)](#) has identified situations where COVID-19 is more likely to spread from one person to another. These include prolonged exposure indoors, having high numbers present or crowding, and poor ventilation [17]. Spread is also more likely if cloth face coverings or masks are not being used properly, and if those present are singing or shouting [13,14,18].

General recommendations for all

These measures will also help to prevent the spread of other viruses including influenza

Reducing the spread of infection – Faith and Religious leaders and congregation

Good hand hygiene, respiratory hygiene, optimising social distancing and good ventilation are important to reduce the spread of COVID-19. People who have symptoms of COVID-19 **should not** attend religious services until they have received medical advice that it is safe to do so even if they are fully vaccinated.

Close Contacts

All close contacts will be contacted by public health and will be advised to follow appropriate measures. This advice will vary depending on multiple factors including vaccination status, previous infection, whether you have symptoms or not and whether you have been identified as a household close contact of a confirmed case [19]. Please see [here](#) for further information.

The following sections provides general advice on the importance of **hand hygiene, respiratory hygiene and mask use in all settings**.

Hand hygiene

[Clean your hands](#) regularly [6]. Wash your hands with soap and water when hands are visibly dirty. If your hands are not visibly dirty, wash with soap and water or use an [alcohol-based hand rub](#) [4,5].

You should clean your hands:

- Before eating or drinking
- after coughing or sneezing
- after using the toilet
- when hands are dirty
- after using public transport
- when you get home

Respiratory hygiene & mask use

Cover your mouth and nose with a clean tissue when you cough or sneeze and then promptly dispose of the tissue in a bin and wash your hands. If you don't have a tissue, cough or sneeze into the bend of your elbow and not into your hands.

[Posters](#) on preventing spread of infection are available on the HPSC website [20].

The Government recommends that people wear cloth face coverings or masks at all times when indoors for example in places of worship (see [here](#)) [11].

A cloth face covering or mask provides better protection than a visor, which should not be used unless there are specific problems with using the cloth face coverings or masks. The use of surgical masks rather than face cloth coverings is now recommended to be worn by people who are in [high risk](#) and [very high risk cohorts](#) when in confined community spaces [7,8].

Further guidance on the use of face coverings for the general public can be found [here](#) [9,10].

Actions for those who develop symptoms during the service

Congregants who develop symptoms of COVID-19 regardless of vaccination status should leave the service immediately and book a COVID-19 test. Information is available on [restricting movements](#) on the HSE website [21]

If you **feel unwell with symptoms of possible COVID-19** (regardless of vaccination status) you should:

- **Isolate yourself** i.e. stay separate from other people
- Book a test [online](#)

If your symptoms persist, please contact your GP.

Actions for congregational settings where faith and religious services take place

COVID-19 is easily spread between people, especially in indoor/crowded and poorly ventilated settings, and we need to exercise caution to limit the spread of the virus. Religious services and weddings can now proceed without capacity limits but with all other protective measures remaining in place. This guidance applies to congregational settings and places of worship including churches, synagogues, mosques and temples. The measures below are aimed at minimising the risk of COVID-19.

- Always adhere to [Current Government Guidelines](#).
- Religious leaders and members of the congregation should not attend services if they are ill with symptoms of COVID-19 or other respiratory tract infections, even if they are fully vaccinated.
- Have a plan for dealing with faith and religious leaders or members of the congregation who become ill with symptoms of COVID-19 during a service, including isolating them from other people and seeking medical advice without delay (e.g. phone a GP). Have contact numbers for emergency services readily available.
- Allow sufficient time for cleaning contact surfaces before the next service begins.
- Ensure adequate ventilation of any indoor spaces, either through natural ventilation (i.e. opening windows and external doors) taking account of weather and comfort or mechanical means (e.g. central air-conditioning unit). Further information on [building ventilation](#) is available [16].

- Public Health signage should be displayed at entrances to places of religious worship taking care not to cause obstruction or delay for those entering or leaving.
- In so far as possible (may vary with weather) keep entrance doors propped in an open position for arrival and departure to minimise the need for people to touch the door handles, or have doors that can be pushed open with the shoulder. Members of the congregation are advised to avoid gathering immediately outside the door. Congregants need to maintain social distance before they arrive at the place of worship and also when they leave. Physical interaction during religious services, including hand shaking or standing in direct contact, should be avoided.
- [Alcohol-based hand rub](#) should be provided. These should be placed outside of the place of worship for use prior to entry and after exit, and at appropriate points within the space where the religious service is held.
 - Any spillage of alcohol-based hand rub should be cleaned up immediately to prevent falls.
 - Alcohol based hand rubs should not be used near heat or a naked flame.
- Toilet and hand washing facilities need to be regularly cleaned, supplied with liquid soap, and have a working hand dryer or paper towel dispenser.
- Communal items, such as religious books, or leaflets, should be removed. Members of the congregation should be invited to bring their own religious reading material or prayer mats if required to avoid sharing of items.
- Ensure all hard surfaces that are frequently touched, such as door handles, hand rails, taps and seats are cleaned regularly with a household detergent. Touching of surfaces should be minimised. See below for more detail.
- Collection boxes should not be passed amongst members of the congregation.
- Because COVID-19 spreads easily between people, holy water fonts should not be used. Members of the congregation should be reminded not to touch or kiss objects/icons or symbols.
- Candle lighting and the use of confessional boxes by the public can proceed with appropriate public health measures in place.
- Members of the congregation should be told how the distribution of Communion is going to be managed and of the potential risk so that they can make an informed choice. Communion should be distributed into the hands and NOT onto the tongue of congregants. The host

should be placed in the hand of the recipient in such a way as to avoid hand contact. Use of communal vessels is suspended. All infection, prevention and control measures must be in place including face masks/coverings, social distancing and hand hygiene.

Cleaning of the congregational setting

For general cleaning and disinfection of communal areas and frequently touched items, please refer to Work Safely Protocol, Cleaning and Disinfection [here](#) [22]. Further information on cleaning in non-healthcare settings potentially contaminated with SARS-CoV-2 is available from the European Centre for Disease Prevention and Control ([ECDC](#)) [23] and from the [UK Health Security Agency](#) [24].

- Frequently touched surfaces, particularly in public spaces, should be cleaned regularly (at least daily and if possible more frequently). Examples of these surfaces are door handles, pews, armrests, hand rails, table tops, light switches, etc.
- If participants in a service (e.g. leader and readers) are using a rostrum or pulpit, surfaces that are touched (e.g. microphone on/off switches) should be cleaned between use by different persons.
- The use of a neutral / normal household detergent for the cleaning of surfaces in general premises (i.e. not for premises where a possible, probable or confirmed case of COVID-19 has been) should be sufficient.
- Cleaning staff should wear rubber gloves when performing cleaning activities. They should wash the gloves while still wearing them, then wash their hands after they take them off.
- Hand hygiene should be performed after removing gloves, aprons and other protection used while cleaning.
- Waste material produced during the cleaning should be placed in the general rubbish bin.
- Toilet facilities at the place of worship need to be regularly cleaned. Pay attention to all frequently touched surfaces; a working hand dryer or a dispenser with paper towel; keep the window open to ensure adequate ventilation, and have a packet of disposable wipes available for use by individuals who wish to use them to wipe down surfaces when using the facilities.
- Carpeted areas should be vacuumed weekly or daily, depending on footfall. Ideally a vacuum with a high efficiency particulate air (HEPA) filter should be used. Carpeted areas should undergo steam or shampoo cleaning annually.
- Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids, can be cleaned thoroughly as normal.

Choirs, music groups and singing activities

Performance and practice by choirs and musical ensembles has been associated with increased spread of COVID-19 [25]. The adoption of standard mitigation measures to reduce disease transmission risk during communal singing activities are advised (e.g. social distancing, use of face covering, hand hygiene, routine cleaning and disinfection of surfaces). Evidence indicates that where the incidence of SARS-CoV-2 circulating in the community is low, then both indoor and outdoor singing-related activities pose a very low risk, particularly if the mitigation strategies highlighted below are implemented [18, 25]. However, this should be regularly reviewed in light of the potential for the emergence of vaccine-escaping or more transmissible variants of SARS-CoV-2 [25].

Singing activities should only take place if deemed appropriate following risk assessment. The risk of disease transmission during singing events is dependent on

- (i) the type of event
- (ii) the space in which the activity is taking place
- (iii) the levels of COVID-19 circulating in the general population
- (iv) levels of vaccination and use of NPI measures

The following mitigation measures are advised where appropriate [25]:

- It is advised that singing takes place only in larger well-ventilated spaces, or outdoors.
- Face coverings should be worn where this is practicable. [Singers' masks](#) are available which are designed to hold the material away from the nose and mouth allowing normal vowel production and projection.
- Performances or rehearsals are for limited periods of time at a reduced level of loudness, using microphones for amplification if available.
- Singing in groups (i.e. choirs and musical ensembles) indoors should be limited in line with the capacity of the space, given appropriate social distancing requirements (both from other singers, the choir master, the congregation or other individuals in the setting).
- **Members of the congregation** should avoid singing, shouting, chanting and raising of voices, as this may increase the risk of airborne transmission of the virus; if possible, encourage the use of microphones or similar equipment to minimise voice volume.

- Singers as part of the choir and/or musical ensemble should be spaced at least 2 metres apart in all directions.
- It is advised that audience, gatherings, observers and teachers are also spaced at least 2 metres from the singers or musicians.
- The orientation of performers should avoid face-to-face positioning.
- All personnel should avoid sharing of written materials, microphones, sheet music, stands, books etc.,
- Due consideration should also be given to reducing transmission risk within the venue (hand hygiene, regular cleaning and disinfection of surfaces) and associated secondary activities (e.g. travelling to the venue, public toilets, socialising before, during and after the event).

It is also important to note that the advice for safer singing may reduce, but does not eliminate risk

Funeral services

There is an increased risk of transmission of COVID-19 where families and communities come together following the death of a loved one, from any cause. Whilst recognising the importance of these rituals and gatherings, it is strongly advised that the actions detailed are taken to reduce the spread of infection. Please see [here](#) for further information [26].

Family members, mourners, religious leaders, and funeral staff (e.g. funeral director, hearse attendant, etc) should not attend a funeral if they have COVID-19, or if they have symptoms of COVID-19, are awaiting a COVID-19 test result, or have been told by public health to restrict movements. This includes close contact with the deceased if the cause of death is COVID-19 related.

- Funeral services can take place with full capacity, protective measures must be in place.
- Members of the congregation should avoid singing, shouting, chanting and raising of voices, as this may increase the risk of airborne transmission of the virus; if possible, encourage the use of microphones or similar equipment to minimise voice volume.
- Families and mourners organising and attending funerals should pay particular attention to the directions of funeral directors for the safe organisation and conduct of the funeral service in line with appropriate public health and [government guidance](#).
- The funeral director, if unvaccinated, should undertake a risk assessment and adhere to all relevant public health guidance in relation to contact with the deceased and their family.
- Any physical interactions including shaking of hands and hugging should be discouraged.
- Optimise social distancing throughout all aspects of the service
- Cloth face coverings or masks should be worn for all indoor services by all present. A mask provides better protection than a visor, which should not be used unless there are specific problems with using the face mask. It is recommended that a surgical face mask be worn by those in [high risk](#) and [very high risk](#) cohorts. Further information is available [here](#).
- Signing of Books of Condolences should be suspended due to the risk of spread of infection. Alternatives include issuing condolences through social media, online websites, text or by letter.
- Carrying the coffin poses a particular concern because it requires 4 to 6 people to stand close to each other. Mourners should be aware of this risk and take protective measures such as mask wearing and hand hygiene.
- Guards of Honour must observe social distancing requirements.
- Those gathering at the graveside should optimise social distancing and wear face coverings/masks.

- Funeral parlours and places of repose, including family homes, are advised to follow appropriate public health measures

Arrangements for parochial activities/social religious gatherings

Parochial activities/social religious gatherings at places of worship should follow Government general guidance on social gatherings. If permitted, these gatherings should use sensible practices and follow guidance on hand hygiene, respiratory hygiene and the wearing of face coverings. The organisers should ensure the facilities used have reasonable ventilation and ensure there is no overcrowding. Posters/notices formally stating any guidance or changes in practice should be clearly displayed.

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