

COVID-19 Guidance for Places of Worship

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Version	Date	Updates
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

These guidelines have been updated to reflect the evolving situation in relation to the COVID-19 pandemic and the impact of the vaccination programme in Ireland. 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](#) must be adhered to for all religious services, rites, ceremonies and related celebrations. This includes the total number of worshippers allowed to congregate, dependent on the current level of restrictions. 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](#)” risk management strategy.

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.
- The COVID-19 vaccination programme is well advanced in Ireland, however, there is still an ongoing risk of COVID-19 especially due to the emergence of new variants. Precautions to prevent introduction and spread of the virus in indoor settings are therefore still required even in the context of community vaccination
- Key elements in organising and planning safe services:
 - Follow government guidelines regarding how many people can attend a service within the current requirements of social distancing. Please see gov.ie for further information.
 - Ensure adequate ventilation of any indoor spaces, either through natural ventilation (i.e. opening windows and external doors) or by mechanical means (e.g. central air-conditioning unit).
 - Advise all congregants not to attend service if experiencing symptoms of COVID-19 and have a plan for dealing with faith and religious leaders or members of the congregation who become ill during the service.
 - Allow sufficient time for cleaning and to ventilate the area before the next service begins.

- Explain clearly how the service will be conducted and what is expected of all members of the congregation when attending.
- Stagger entry and exit of the venue to allow for social distancing measures. Ensure congregants do not gather immediately outside the door before or after the service. Appoint stewards who can help congregants to maintain social distance
- Provide [Alcohol-based hand rub](#) for use at entry, exit and other appropriate points within the space. Provide tissues and bins for safe disposal. Ensure hand-washing facilities, including soap dispensers and disposable towels, are well maintained.
- Ensure all hard surfaces that are frequently touched, such as door handles, hand rails, taps and pews are cleaned regularly with a household detergent. Touching of surfaces should be minimised.
- Ensure social distancing of a minimum 2 metres (in all directions) is maintained between all individuals/pods during all services/gatherings. For example, a Pod may be a household or family group. Mark off the seating arrangements, where possible.
- Service leaders are not responsible for confirming vaccination status of attendees, however, it is important they advise unvaccinated individuals who are at increased risk of severe illness from COVID-19 due to age or ill-health that they can participate via radio or webcam where available
- Congregants should 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](#) and older age groups when in confined community spaces. Further guidance on the use of face coverings for the general public can be found [here](#).
- Faith and religious leaders do not need not to wear a cloth face covering if they are fully vaccinated and they can maintain 2 metres physical distance from any participant and the area is adequately ventilated

- Small groups of singers may perform following implementation of any mitigation actions identified by risk assessment
- Singing in groups 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) and requirements for adequate ventilation
- Wind or brass instruments, i.e. musical instruments that are physically blown into should not be used
- Pianos, pipe organs, and these and other forms of musical instruments (e.g. string, percussion) are allowed during the service if adopting appropriate public health measures
- 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](#).

We all must 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 is underway in Ireland. This is an additional and important intervention to prevent 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.

Symptoms:

The most common symptoms of COVID-19 are

- Fever
- Dry cough
- Fatigue

Other symptoms that are less common and may affect some patients include:

- Loss of taste or smell,
- Nasal congestion,
- Conjunctivitis (also known as red eyes)
- Sore throat,
- Headache,
- Muscle or joint pain,
- Different types of skin rash,
- Nausea or vomiting,
- Diarrhea,
- Chills or dizziness.

Symptoms of severe COVID-19 disease may include shortness of breath, loss of appetite, confusion, persistent pain or pressure in the chest, high temperature (above 38 °C).

You may not have all of these symptoms. Symptoms present differently in different age groups and with different variants of the virus. Some symptoms may also be confused with common cold, flu or hay-fever.

If you have any new symptoms, even if mild, self-isolate and [arrange and test for COVID-19](#). You can do this by either phoning your GP, looking online or going to a testing centre.

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 droplets over longer distances. (See [here](#))

Surfaces and objects can be contaminated when droplets from an infected person fall onto them. You can therefore, also get infected if you touch - with your hands – a surface or object (for example a table top or a religious item) contaminated with virus, 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 being indoors, having high numbers present or crowding, and poor ventilation. Spread is also more likely if cloth face coverings or masks are not being used properly, and if those present are singing or shouting.

General recommendations for all

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

Everyone should practice good hand hygiene and respiratory hygiene as well as social distancing to reduce the spread of disease, including 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 or not.

People who do not have [symptoms](#), are fully vaccinated and/or have had previous proven COVID-19 infection in the past 9 months need not restrict movements if they are deemed a close contact*. Therefore, it is still possible in these situations for you to attend religious ceremonies.

*Please note there are certain scenarios where those performing contact tracing may advise differently. This is due to different variants of concern of COVID-19. It is important to always follow public health advice.

Hand hygiene

[Clean your hands](#) regularly. 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](#).

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

See HSE guidance at: <https://www.hse.ie/handhygiene>

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. <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/posters/>

The Government recommends that people wear cloth face coverings or masks at all times when indoors for example in places of worship (see [here](#)). 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](#) and older age groups when in confined community spaces. Further guidance on the use of face coverings for the general public can be found [here](#).

See the Health Protection Surveillance Centre website for [posters](#) and guidance on the use of cloth [face coverings](#) and masks by the general public.

Actions for those who develop symptoms during the service

If members of the congregation, faith and religious leaders, or others involved in services feel ill and may have COVID-19, even if their symptoms are mild, they should stay at home and follow this advice: This rule applies regardless of the vaccination status of the individual.

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
- **Phone your GP without delay.** If you do not have a GP, phone the Emergency Services on 999 or 112 and ask for the National Ambulance Service. Tell your GP or Emergency Services about your symptoms.

It is important that you **PHONE** your GP first and talk to them, rather than arriving at the GP surgery without contacting them, so that you do not put staff or other patients at risk of infection.

Information on when and how to [self-isolate](https://www.2.hse.ie) is available on the HSE website: <https://www.2.hse.ie>

Please see [here](#) for further information. Information is available on restricting movements on the HSE website: <https://www.2.hse.ie>

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. 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](#). This includes the total number of worshippers allowed to congregate, dependent on the current level of restrictions.
- A risk assessment should be carried out for each premises to determine how many people can attend within the remits of [Current Government Guidelines](#). It is important to always ensure there is adequate ventilation and to identify high risk points in the building, e.g. narrow entrance/exits. The number permitted to attend should be clearly displayed at each entrance.

- Remind religious leaders and members of the congregation not to attend services if they are ill with symptoms of COVID-19, even if they are fully vaccinated.
- Appoint a COVID-19 Officer
- 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 or Emergency Services). Have contact numbers for emergency services readily available.
- Explain clearly how the service will be conducted and what is expected of all members of the congregation when attending a service.
- Allow sufficient time for cleaning and to ventilate the area before the next service begins.
- Advise unvaccinated individuals who are at increased risk of severe illness from COVID-19 due to age or ill-health that they can participate via radio or webcam where available
- 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.
- Where possible, separate points of entrance and exit should be identified and clearly marked to allow for one-way traffic.
- 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.
- Staggering the entering and exiting of the venue should be considered to allow for social distancing measures. Members of the congregation should be asked to ensure that they do not gather immediately outside the door. Congregants need to maintain social distance before they arrive at the place of worship and also when they leave. They should stay well clear of the door to facilitate others leaving the building. They should not congregate in advance of, or after the service. Stewards should be available to assist to ensure compliance with this measure.

- [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 facilities need to be regularly cleaned, supplied with liquid soap, and have a working hand dryer or paper towel dispenser.
- Ensure social distancing of 2 metres is maintained during all services/gatherings, including by those leading or contributing to the performance of religious rites.
- Seating /standing places/places for mats should be arranged or marked off to maintain social distancing of 2 metres in all directions. Members of the same household can sit closer together but 2 metre social distancing must be otherwise be observed.
- Physical guides such as signs or markings on the floor should be used to ensure persons attending are aware of the distance required to maintain social distancing
- Faith and religious leader do not need not to wear a cloth face covering if they are fully vaccinated and they can maintain 2 metres physical distance from any participant and the area is adequately ventilated
- Ensure adequate ventilation of any indoor spaces, either through natural ventilation (i.e. opening windows and external doors) or mechanical means (e.g. central air-conditioning unit). Further information on [building ventilation](#) is available at <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/educationguidance/>
- 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 if required.
- For gatherings that use prayer mats or similar items, members of the congregation should be asked to bring their own prayer mats to avoid sharing of items.
- 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.

- Tissues should be provided. At the same time, people should be strongly encouraged to bring their own tissues to services. Provide bins for safe disposal of tissues.
- Ensure hand-washing facilities, including soap dispensers and disposable towels, are well maintained.
- Ensure all hard surfaces that are frequently touched, such as door handles, hand rails, taps and pews 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.
- Members of a congregation should be advised that there is a risk of infection if they share a private vehicle with members of another household., Members should ideally share the transport with the same family each time. Occupants of the vehicle should maintain distance as much as possible, for example by sitting in the back passenger seat. They should follow guidance for public transport and wear a cloth face covering or mask. Keep windows of the vehicle open to allow for ventilation, subject to weather conditions and personal comfort. The vehicle should be cleaned between journeys using standard cleaning products, particularly areas of high usage, for example the door handles.

Cleaning of the congregational setting

For general cleaning and disinfection:

- Frequently touched surfaces, particularly in public spaces, should be cleaned as often as possible (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.
- All those working indoors cleaning the place of worship should wear cloth face coverings or masks.
- The cleaning material (cloths, mops, etc.) should be properly cleaned in warm water and detergent at the end of every cleaning session.
- Hand hygiene should be performed using soap and water for 20 seconds, and 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; ensure that liquid soap rather than a bar of soap is available; 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.
- If a symptomatic individual attended a service at a place of worship, the cleaning regime as set out in [Prevention and Control guidance for Early Learning and Care and School Age Childcare settings during the COVID-19 Pandemic](#) guidance should be followed.

Physical interaction during religious services

Physical interaction during religious services, including hand shaking or standing in direct contact, should be avoided.

Choirs, music groups and other liturgical music

Performance and practice by choirs and musical ensembles has been associated with spread of COVID-19 due to the increased expulsion of droplets associated with singing and wind-blown musical instruments that are played by mouth, e.g. clarinet, trumpet, etc. Therefore, singing indoors in a religious setting, should be limited due to the increased risk of COVID-19 transmission to people present at the service.

Singing should only be done as part of an essential act of worship, and only if deemed appropriate following risk assessment.

As vaccination reduces the risk of transmission of COVID-19 this should be considered when risk assessing whether choirs, music groups and other liturgical music can perform in a place of worship.

Risk Assessment

COVID Officers may allow some introduction of singing indoors **if appropriate**:

1. after thorough risk assessment and
2. implementation of preventative measures based on this risk assessment and aligned to current COVID-19 guidelines.

Any person with (i) symptoms of COVID-19 or (ii) is unvaccinated/has not had proven previous COVID-19 infection in the past 9 months and has been in contact with anyone who has symptoms of COVID-19 should not attend service or participate in choirs, music groups and other liturgical music

The issues that should be considered in this risk assessment include:

- Whether it is a performance or rehearsal event - it may be feasible to hold them in other locations or virtually
- Whether it is indoors or outdoors setting
- The numbers of singers involved (smaller numbers have lower risk of transmission)
- The time period of the singing performance or rehearsal (shorter time period has lower risk of transmission)
- The vaccination status of the singers and of other individuals
- The accompanying instruments (risk from non-wind instruments is lower than from wind instruments)
- Singing in groups 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)
- The wearing of face masks
- The Provision of effective levels of ventilation and capacity to enhance ventilation is required
- Environmental factors - such as effectiveness of cleaning, capacity for hygiene facilities (e.g. facilities for washing and disinfecting of hands)

Advice for Soloists, Choirs and Music Groups

Small groups of singers can perform following implementation of any mitigation actions identified by risk assessment (see above). The number of people in a small group depends on a number of factors including layout and size of building. Singers should use a fixed group/pod system to reduce contacts. These groups should remain consistent and rehearse and perform together whilst generally maintaining physical distancing among themselves.

In order to sing **without** a face covering, the singers/pods should be physically located behind a plexiglass screen as far away as possible (more than 2 metres in all directions) from the congregation and other individuals, including the musical accompanist and the celebrant. Extended physical

distancing (more than 3 metres) should be considered if possible. Any screen used should be cleaned regularly.

If singing from an organ loft or elevated platform, it is essential that the area is large enough to allow a minimum of 2 metres distance in all directions between the singer/s and the organist. Extended physical distancing (more than 3 metres) and plexiglass should be considered if possible. If the loft is situated above the congregants, singers/pods should be placed behind a plexiglass screen so that the risk of droplet transmission from singers over the edge of the loft and onto the congregation below is minimised.

Music sheets, stands or microphones should only be used by the individual singing and not shared during the performance. These items and any surfaces that are touched during the performance should be cleaned between use if used by different persons. The singers and organist should be placed back to back, or side to side, rather than facing each other.

Indoor congregational singing should be avoided due to the increased risk of COVID-19 transmission to other people present at the service. Therefore, it is important that the congregation is made aware that they should not sing along with the singers or other instrumental music.

Playing musical instruments that are physically blown by mouth (e.g. wind and brass instruments) should also be avoided. Pipe organs, however, can be played as long as all the appropriate public health measures are in place. In addition, adequate and appropriate ventilation measures must be in place before, during and after the instrumental music is played as part of the religious service. Further information on building ventilation is available at [here](#).

Playing other instrumental music (e.g. string, percussion) is possible. The COVID Officer should undertake a risk assessment (as above) before the musicians/ musical group practices and performs during the service. A COVID Officer should oversee strict adherence by musicians and all present to

social distance, cloth face coverings or masks and hand hygiene measures, and to raise awareness of the potential risk to members, in particular for members who are at increased risk of severe illness from COVID-19.

Fonts for holy water

Because COVID-19 spreads easily between people, holy water fonts should not be used. Members of the congregation should be reminded not to touch empty fonts. Posters should be displayed to alert people not to touch the fonts due to the risk of spread of infection, or the fonts should be covered with an appropriate cloth to prevent touching.

Touching or kissing objects/icons/symbols

Members of the congregation should be reminded not to touch or kiss objects/icons or symbols. Posters should be displayed to alert people not to touch or kiss these items due to the risk of spread of infection, or these items should be covered with an appropriate cloth to prevent touching.

Ritual objects used as part of a religious service should only be touched by one celebrant, while following strict adherence to hand hygiene. All objects should be regularly cleaned and disinfected, especially prior to and after use during the religious service.

Sharing items /equipment

Members of the congregation should be reminded not to share items such as beads, mats, or materials used for ablutions or candle lighting.

Candle lighting by the public should be suspended and display stands removed or cordoned off.

Shared water sources for the purpose of rituals should be suspended (e.g. for ritual communal washing). Members of congregations should be instructed to use individual sources of water that are

disposed of appropriately, with regular disinfection of any objects or containers used to bring water to ritual locations.

Sacrament of reconciliation

The use of confined spaces such as confessional boxes should be suspended and spaces closed off. Any alternative arrangement must be compliant with social distancing requirements.

Holy Communion

- 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.
- Those who are distributing Communion should wear a protective cloth face covering or mask, and not a visor. It is recommended that those who are [high risk, very high risk](#) and older age groups should wear a surgical face mask rather than a cloth face covering. Further information is available [here](#).

A mask provides better protection than a visor, which should not be used unless there are specific problems with using the face mask. They could in addition stand behind a screen that protects their face when distributing Communion.

- Everyone distributing Communion should wash their hands or [use alcohol-based hand gel](#) both before and after distributing Communion. Alcohol based hand rub should be available close to those distributing Communion to facilitate re-sanitising of the hands if necessary during the distribution.
- Those receiving Communion should perform hand hygiene before receiving. Alcohol based hand rub should be available at appropriate places to allow for use prior to, or while approaching to receive, Communion. Members of the congregation can be encouraged to bring their own hand gels.
- Social distancing should be maintained while approaching and returning from receiving Communion. A one-way system should be used, where possible.

- Alternatively, where more appropriate to a particular setting, Communion can be distributed to members of the congregation remaining in their seats and maintaining social distance while priests or ministers make their way through the congregation.
- Communion should be distributed into the hands and NOT onto the tongue. The host should be placed in the hand of the recipient in such a way as to avoid hand contact. Priests and Ministers should be trained in the technique of placing the host in the recipient's hand in a manner that avoids hand contact. Communicants should be told how the Communion host will be delivered.
- The elements of Communion can also be placed in individual disposable cups or containers and left separated on a tray or table for collection. Communicants could then approach and pick up an individual container for themselves while making sure not to touch any other hosts. The disposable cups or containers should be placed in a designated receptacle afterwards.
- Use of communal vessels should be suspended. For example, during Holy Communion in Christian religious services only one celebrant should drink from a chalice. No one else should drink from that particular chalice – this includes other priests, ministers of the Eucharist and members of the congregation.
- Concelebration should be suspended.

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 in the following section are taken to reduce the spread of infection.

- 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 if they are a close contact. This includes close contact with the deceased if the cause of death is COVID-19 related. There are certain situations where a close contact who

has been vaccinated or have had previous proven COVID-19 infection during the past 9 months do not need to restrict movements, see [here](#) for further information.

- Try to facilitate remote participation in the service, for example, via live-streaming.
- 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.
- If a person at increased risk of severe illness from COVID-19 is attending the funeral, other mourners should be made aware of this, and asked to respect the person's need to avoid close contact.
- 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.
- All aspects of the service should be compliant with the 2 metre distance requirement including paying of respects.
- 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, as well as older age groups. 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.
- In order to minimise the risk of large groups gathering, arrangements should not be advertised in papers and online (The funeral notice can be placed but the arrangements should not appear). Families can advise relatives privately of the funeral arrangements. See below for suggested wording:

- 'A private funeral will take place due to government advice regarding public gatherings. Those who would have liked to attend the funeral, but who due to current restrictions cannot, please leave a personal message in the section below 'Condolences'.'
 - In the papers, a similar message can be written with reference to www.rip.ie or the religious organisation's website to offer the family condolences.
- Carrying the coffin poses a particular concern because it requires 4 to 6 people to stand close to each other. As per the government's current advice, mourners should be discouraged from carrying the coffin to maintain social distancing.
 - Guards of Honour must observe social distancing requirements.
 - Those gathering at the graveside must observe social distancing. Consideration should be given to keeping graveside private to families and close friends.
 - Funeral parlours and places of repose, including family homes, must adhere to controlled access and social distancing requirements.
 - Hand hygiene should be performed after any contact with the deceased.

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.

Dual use of religious facilities

Where religious facilities are being used for non-religious purposes outside of normal religious operating times (e.g. community hall for day-care, support groups for those recovering from addiction), the Government guidelines relevant to the activity in question should be consulted to determine what additional measures to those mentioned above should be implemented. The setting

should be thoroughly cleaned and adequately ventilated between uses, either by natural means (i.e. open windows) or mechanical (e.g. non-recirculating central air conditioning unit).

Further information on COVID-19

Further information on COVID-19 is available from the following links:

- HSE-HPSC: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/>
- HSE: <https://www2.hse.ie/coronavirus/>
- Irish Government Website: www.gov.ie
- Department of Health: <https://www.gov.ie/en/news/7e0924-latest-updates-on-covid-19-coronavirus/>
- Return to Work Safely Protocol: <https://www.gov.ie/en/publication/bb7fd-work-safely-protocol/>
- Symptoms of coronavirus: <https://www2.hse.ie/conditions/coronavirus/symptoms.html>
- Posters on prevention of spread of coronavirus: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/posters/>
- How to wash your hands: <https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html>
- Hand Hygiene poster: <https://www.who.int/gpsc/tools/GPSC-HandRub-Wash.pdf>
- How to use alcohol hand rub poster: <https://www.hse.ie/eng/about/who/healthwellbeing/infectcont/sth/resources/alcoholhandrubposter.pdf>
- Use of face masks by the general public: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/useoffacemasksbythegeneralpublic/Guidance%20on%20use%20of%20face%20masks%20by%20general%20public.pdf>
- Efficacy of masks versus visors in non-healthcare settings: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/employersemployeesguidance/Current%20evidence%20on%20the%20use%20of%20face%20coverings.pdf>

- Non-healthcare building ventilation: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/employersemployeesguidance/Guidance%20on%20non%20HCbuilding%20ventilation%20during%20COVID-19.pdf>
- Environmental cleaning in non-healthcare facilities: <https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings>
- Self-isolation at home: <https://www2.hse.ie/conditions/coronavirus/self-isolation/how-to-self-isolate.html>

Groups at higher risk from COVID-19:

<https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html>

- COVID-19 Guidance for older people and others at risk of severe disease on reducing risk of COVID-19 infection: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/residentialcarefacilities/Guidance%20For%20Older%20People%20and%20Others-Reducing%20COVID-19%20Exposure%20Risk.pdf>