## NOW WHAT?

# **Considerations for Gathering Safely**

Synagogue Council of Massachusetts
June 22, 2021



## Issues We Will Address:

- How to think about risks
- Concepts which affect High Holiday programming with Covid19 considerations
- Factors that should impact our decision making
- Review of types of Covid19 transmission and protections
- Discuss special populations (elderly, immune compromised, kids, unvaccinated)
- Food





### We will NOT address:

- Technical issues regarding on-line or hybrid services
- How to balance conflicting desires/needs within your congregation
- Strategies to help people who are risk averse to believe that coming to Shul is worth the risk
- (But Share with each other in the CHAT)



### The Questions You Submitted

- Vaccinations
- Children
- Masking
- Feeling Included/Managing Expectations
- The Big Picture
- Gathering for Food
- Congregational Singing
- · The Building and the Physical Space
- · Multi-access and Technology



If you believe your applicable daily case rate is < 1/100,000 population:

## Bruce recommends it reasonable to CONSIDER

- •No ritual hand-shaking
- •Request masks of those unvaccinated
- •Sanitizer easily available
- •Distancing available for those who wish



If you believe your applicable daily case rate is > 2/100,000 population:

- •Assure adequate ventilation
- •Masks for everyone
- •Distance (4 feet) (with personal options to ignore or do 6 feet)
- •No Torah procession
- •No food



#### Risks – Known and Unknown

- A Special Offer
- Oxygen in Medicine
- Measels
  - Mortality 1/500
  - Annual case rate of 0.35/100,000
  - Annual Mortality rate = 0.0007/100,000
  - Daily case rate is 0.001/100,000



#### Covid19-Vaccinations

- Reduce risk of passing disease to others by 90% (85%?)
- · Reduce risk of getting sick by 97%
- Reduce risk of death by 99.97%

#### **But What Was Your Risk to Start?**



## Annual Risks of dying per 100,000 Pre-pandemic in Massachusetts

- All causes: 675/100,000
- Cancer 140/100,000
- Heart disease 127/100,000
- Accidental injury death 53/100,000
- All infectious diseases combined 28/100,000
- Motor vehicle collision 4.8/100,000
- Playing football 2/100,000



## Covid19 Mortality Risk

- Current Mortality Covid19 in MA about 3/day= 1000/year = 14/100,000
- Vaccinated person about 1.1/100,000
- Unvaccinated person that is about 25/100,000



# Mortality risk of NOT coming to shul?

## Unknown

. (...but NOT ZERO!)

#### Factors that determine our behaviors -

- Concern for Public Health Systems
- Avoid Outbreak (Publicity)
- Concern for Others (passing virus to community)
- Concern for Safety (selves and our members)
- Psychological Change
- Will our Services be Attractive?
- Are we Meeting Community Needs
- Others? (share in the chat)



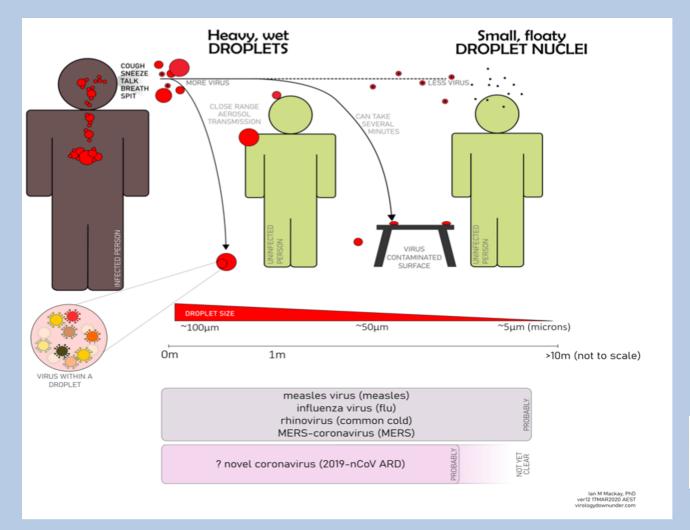
# Factors that Should Affect our Decision Making -

- Our specific population disease rates?
- · Our specific population immunization rates?
- Our specific population psychology of change and risk?
- · Our specific population needs?
- · Will outside populations visiting require we adjust our decision making?
- Are cases trending up or down?
- Others?



### What is Known About COVID-19?

Disease is caused by virus (SARS-CoV-2) Virus is spread by respiratory droplets





## How do we protect ourselves and others?

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Ventilation (Small droplet – very small percentage of transmissions)
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Masks (Large Droplet – Most transmission)

Distance (Large droplet – Most transmission)

Sanitizer (Contact – small percentage of transmission)

More about ventilation......



## Curt



## Strategies to address population needs and psychology of change -

- On-line option (Hybrid or Separate)
- On line streaming vs on-line participation
- On site option with minimal or no restrictions
- On site option with distancing, masks

- ? Publish your own vaccination rates?
- · ? Multiple venues?
- ? Plan for a range of possibilities?



## Other Things to consider

- Medical privacy HIPAA/Contact tracing does not apply....but do you have congregational ethics or privacy or administrative issues you want to consider about gathering info?
- Vaccine Policies I advise to not have any policies (
   except maybe requesting info if vaccinated or not)
- Children unvaccinated but low risk for both spread and disease. Include them. Treat them like unvaccinated adults. (But consider the unwarranted fear of children by adults)
- Vaccinated elderly poor masking compliance
- Total Numbers No longer an issue. No Maximum

## Immune compromised folks

- Advice –
- Provide on-line programming
- Let them make their own decisions.



### Masks

Problems with a mask optional policy –

 How do you handle honors with close interactions? Perhaps should be masked for approaching the Bimah. Then can unmask if necessary once everyone is distanced.

## Singing

- Complicated. High risk if poor ventilation and Covid19 rates not low. I would permit it unless Poor ventilation. C02 monitoring can help. HEPA filters can help.
- If you are requiring masks for all, I would say vaccinated people singing facing the congregation unmasked distanced by 10 feet is relatively safe



## Plexiglass

 Useful only to protect someone who will interact in one place with multiple people at less than 6 feet (ticket taker, for example).

#### **Variants**

- So far, vaccines cover all variants and development of vaccine resistant variants soon is highly unlikely.
- Variants will increasingly become risky for those unvaccinated but are unlikely to increase in time to impact HIGH HOLIDAY risk this season.



### Covid19 rates

- Go to your local town DPH website OR
- https://www.mass.gov/info-details/covid-19-responsereporting#covid-19-interactive-data-dashboard-

Pick CITY and TOWN along the left side.

Click on "DATA BY CITY AND TOWN"

For indicator choose the "14 Day average daily incidence rate"

For the county unclick whatever is clicked and click your county

Click "Apply" at the bottom

See the rates for every town in your county.



## Rates per 100,000 population

Massachusetts as a whole 0.9

- County ranges:
- Barnstable, Berkshire, Franklin 0.6
- Suffolk, Bristol 2.3

- · Caveat ---
- For low population towns, a single family infected can markedly sway the numbers. Consider looking at your neighboring towns as well to see if they are similar. Consider looking at the county. Then consider if you think your synagogue population is likely significantly higher risk or lower risk than the general population.

If you believe your applicable daily case rate is < 1/100,000 population:

## Bruce recommends it reasonable to CONSIDER

- •No ritual hand-shaking
- •Request masks of those unvaccinated
- •Sanitizer easily available
- •Distancing available for those who wish
- •Otherwise normal interactions.



If you believe your applicable daily case rate is < 2/100,000 population but NOT < 1/100,000

- •Assure adequate ventilation
- •Masks for everyone
- •Reasonable to NOT distance( with personal options to distance)
- •No Torah procession
- •Sanitize after touching shared ritual objects
- •Food sitting down only. No self serve.

If you believe your applicable daily case rate is > 2/100,000 population:

- •Assure adequate ventilation
- •Masks for everyone
- •Distance (4 feet) (with personal options to ignore or do 6 feet)
- •No Torah procession
- •No food



If you believe your applicable daily case rate is > 7/100,000 population:

- •Assure adequate ventilation
- •Masks for everyone
- •Distance (6 feet) including any Bimah /Torah interactions.
- •No Torah procession
- •No food



## Questions?



