



The
Association of
Reform Jewish Educators
Since 1955

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Dear ARJE members,

The document that follows offers some guidance regarding what to consider as you think about reopening. These guidelines have been prepared as a joint document with our partners at the URJ, CCAR, ACC, ECE-RJ, NATA, USCJ, RA, NAASE, and Reconstructing Judaism. In addition, public health and communal safety experts have been consulted.

The document is not intended to offer a clear or defined pathway to reopening. Rather, it is meant to help inform and provide guidance for the conversations that might take place in your communities. Every congregation is different. As below,

Every congregation faces a different situation and must tailor its decision-making according to applicable guidelines and congregational and Jewish values. These include but are not limited to national/local/state/provincial authorities; nature of physical plant including size of rooms, layout and availability of HVAC and ventilation; the extent to which clergy, staff, and volunteers are not constrained in ability to return by health or living situation; resources available to maintain the building, among other factors.

Of particular note about this document—it is a *living* document, and the Reopening Task Force will continue to update it as circumstances and recommendations change.

With all good wishes for health and safety,

Dr. Kathy Schwartz, RJE
President

Rabbi Stan Schickler, RJE
Executive Director

Guide to the Considerations about Re-opening Synagogue Buildings

Published by a working group of
the Reform, Conservative, and Reconstructionist Movements
Version 1- 6/19/2020



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6/19/2020

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As national, state, and local health authorities begin to allow additional activities in certain communities, congregational leaders will begin to consider the process of re-opening. We understand that economic and communal pressure, the loneliness and isolation of congregations, and the desire to “get back to normal” bias leaders in favor of re-opening. As articulated in the rabbinic statements linked to below, Jewish values obligate us to consider broader implications of our actions, including the risk to the lives of our clergy, seminary students, employees, volunteers, our congregants, and those who would come in contact with them.

These re-opening tools are not meant to create the basis for re-opening but rather give you some guidelines to help consider whether you should. At every step of the way, you must consider the risks of something going wrong and the implication that your decisions might be responsible for that.

These re-opening tools are meant to be used as templates for your individual decision-making process.

- The guidance from the Secure Community Network provides a wealth of information and recommendations that can help shape your approach and your decisions. You can find it all of their re-opening guidance, including the Comprehensive Resumption of Operations and Reopening Guidance Document at <https://securecommunitynetwork.org/resumption-of-operations-and-organizational-reopening-working-group>
- The decision tree tool is based on those produced by the Center for Disease Control on May 14, 2020 and is tailored to congregations.
- The phased re-opening template is a generic version based on several examples that we have seen from congregations.
- The specific guidance on singing is a compilation from the best sources available at this time.
- Additional guidance will become available over time, including more specific guidance on ritual practices.

As we repeat on every page of this document, every congregation faces a different situation and must tailor its decision making according to applicable guidelines and congregational and Jewish values. These include but are not limited to national/local/state/provincial authorities; nature of physical plant including size of rooms, layout and availability of HVAC and ventilation; the extent to which clergy, staff, and volunteers are not constrained in ability to return by health or living situation; resources available to maintain the building, among other factors. .

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Every congregation should take into consideration the following principles.

- (1) Having a plan for re-opening does not imply that you need to re-open, nor are the existence of these tools and endorsement of re-opening. You may create your plan and still decide that it is not the right time to re-open for a variety of reasons.
- (2) Start with a discussion of the Jewish values that should guide your thinking. All of the major movement rabbinic associations have created statements and you can find them at the links below:

Central Conference of American Rabbis/Union for Reform Judaism Guidelines on Values-Based Decision Making: Returning to in-person gatherings during the Covid-19 Pandemic

<https://www.ccarnet.org/ccar-urj-guidelines-on-values-based-decision-making-returning-to-in-person-gatherings-covid-19/>

Reconstructing Judaism/Reconstructionist Rabbinical Association Statement on Re-Opening

<https://www.reconstructingjudaism.org/news/reopening-our-institutions>

Reconstructing Judaism: Jewish Values and Coronavirus

<https://www.reconstructingjudaism.org/center-jewish-ethics/coronavirus>

Rabbinical Assembly: Jewish Values Regarding Physical Reopening of Our Institutions

<https://www.rabbinicalassembly.org/sites/default/files/2020-04/COVIDvaluesstatementApril2020logo.pdf>

Orthodox Union and Rabbinical Council of America Guidance to Shuls and Communities on Re-Opening

https://www.ou.org/assets/OU-Guidance-To-Shuls-And-Communities-5-8-2020_F-1.pdf

- (3) We strongly recommend that personal situations of clergy, seminary students, staff, and volunteers are taken into consideration as you make re-opening decisions. There may be confidential health matters that they are living with that keeps them from returning to the building. You must comply with labor and health practices that allow for employees to stay home without having to disclose what their condition is.
- (4) As you plan for reopening, you should also plan for how to move backwards or close down again. Your local public health situation may change and your synagogue may need to alter reopening plans.
- (5) Reopening should not be a rushed process. If you reopen too quickly, you could accidentally expose congregants, staff, and volunteers. It is OK to bias towards being conservative given that people's lives are at risk. Consult with your insurance company or local counsel to determine legal risk.

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- (6) Reopening should happen in phases and for certain building uses but not others. The materials below provide for creating phased and partial reopening.
- (7) Form a task force to make decisions on reopening so that you can bring the right resources to the decision. Work in sacred partnership, understanding that different people from a variety of background (lay/clergy, race, gender, disability, etc;) bring different views and experiences that should be heard, but that it should be clear who has ultimate authority for the decision.
- (8) Be sure to check with your local, state/provincial health department on all decisions, and consult with the local public-school systems, especially when making decisions that involve youth.

Because local conditions vary, the decision to stay closed or to open is still yours. The use of these tools does not imply endorsement by the Working Group.

This document will continue to be updated as conditions change and more becomes known about Covid-19.

June 18, 2020

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Re-Opening Decision Tree

As national, state, and local health authorities begin to allow additional activities in certain communities, congregational leaders will begin to consider the process of re-opening. We understand that economic and communal pressure, the loneliness and isolation of congregations, and the desire to “get back to normal” bias leaders in favor of re-opening. As articulated in the rabbinic statements linked above, Jewish values obligate us to consider broader implications of our actions, including the risk to the lives of our clergy, seminary students, employees, volunteers, our congregants, and those who would come in them.

These re-opening tools are not meant to create the basis for re-opening but rather give you some guidelines to help consider whether you should. At every step of the way, you must consider the risks of something going wrong and the implication that your decisions might be responsible for that.

This decision tree is based on one published by the Centers for Disease Control on May 14, 2020 and has been tailored for use by congregations. It must be tailored for each individual congregation.

You can use the decision tree to consider opening your building for specific cases or for multiple cases. For example, it likely will be possible to open as a workspace for clergy and staff before opening for Shabbat services. Here are a sample set of cases for you to consider:

- Workspace for individual clergy, staff, seminary students, and volunteers
- Workspace for internal meetings
- Committee, task force, volunteer meetings
- Pastoral care
- Small lifecycle ceremonies
- Streaming worship or other events without participants present
- Worship and larger lifecycle ceremonies
- Children’s programming
- Youth programming
- Family programming
- Adult programming

For any individual use, start with Step 1 of the decision tree. If you can answer all of the questions in Step 1 with a “yes,” move on to Step 2. Continue until you have answered the questions in all three steps with a “yes.” As a final step, do another values check. If you are still confident that you can open safely and in a way that is consistent with your values, you can consider opening for the purpose you analyzed.

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The decision tree will be updated as conditions change.

Decision tree Step 1: Are we legally able to open for this use, and is it consistent with our values?

Questions to consider:

- ☐ Will reopening be consistent with applicable national, state/provincial, and local orders and any applicable licensing guidelines?
- ☐ Are we ready to protect employees and participants who are at higher risk for severe illness or who live with people at higher risk by providing for them to stay home without breaking confidentiality? Are we able to provide options for those who commute on public transportation, or those with children whose childcare or school options are not available, or who cannot return to the building for other reasons? Will we provide employees with paid leave if they cannot work due to Covid-19 restrictions, acknowledging that not everyone can work from home?
- ☐ Is opening consistent with our congregation's values and Jewish values?

If any of these are answered no, STOP and wait until you can answer yes to all.

If all are yes, move on to Decision tree Step 2.

Decision tree Step 2: Once open, will we be able to operate safely?

- ☐ Has our facility been fully prepared?
- ☐ Can we promote healthy hygiene practices such as handwashing and wearing masks, including for disabled people and people in wheelchairs?
- ☐ Are we able to clean and disinfect the building per recommendations?
- ☐ Do we have a plan for safely providing restrooms and cleaning them on a regular basis?
- ☐ Are we able to provide ventilation safely?
- ☐ Can we encourage social distancing through physical barriers, changing layouts of workspaces and gathering spaces, revised traffic flows, closing or limiting access to communal spaces, staggering work hours, and limiting large events per local, state, provincial guidelines?
- ☐ Are we clear about what we will do about shared ritual objects?
- ☐ Do we have a plan for allowing usual use of supplies, kitchen, common work areas, handling of any food?
- ☐ Do we have a plan for limiting attendance, if necessary?
- ☐ Can we train all employees, volunteers, contractors, and participants on protocols?

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- ☐ Can we create communications and place signage to enforce new traffic flows and procedures?
- ☐ Will we track attendance according to local health rules in order to do contact tracing?
- ☐ If someone contracts Covid-19 within 14 days of being in our building, how will we communicate with others who were there at the same time, with members and staff at large, including maintaining confidentiality and providing pastoral care?
- ☐ Do we have enough cleaning supplies and personal protective equipment to re-open and will we provide that to employees?
- ☐ Are we clear about what personal protective equipment we will provide and what we expect employees, volunteers, and attendees to bring?
- ☐ Can we afford the additional expense or lost revenue of reopening, if any?
- ☐ Have we made decisions about how to balance our security needs with our health needs?

If any of these are answered no, STOP and wait until you can answer yes to all.

If all are yes, move on to Decision tree Step 3.

Decision tree Step 3: Is ongoing monitoring in place to ensure that we maintain a healthy environment once open?

- ☐ Will we regularly monitor state and local guidelines?
- ☐ As national, state/provincial, and local guidelines change, are we flexible enough to change our plans as needed?
- ☐ Can we implement procedures to check for signs and symptoms of employees, volunteers, and participants upon arrival, including asking them to leave if they have signs or symptoms?
- ☐ Can we ensure that anyone who is or becomes sick will leave the building?
- ☐ Do we have a plan in place to replace a sick employee or volunteer, if necessary?
- ☐ Do we have a plan in place to communicate expectations with anyone entering the building?
- ☐ Have we included training for bias for those who are monitoring compliance with policies, including bias against people of color who *are* wearing masks?
- ☐ Are we clear about who will enforce policies for someone who is not following guidelines or if someone becomes belligerent?
- ☐ Will we allow for any exceptions to our policies, and who will decide and enforce?
- ☐ Will we provide an online option for people who are not able to return to the building because of restrictions due to Covid-19?
- ☐ Will we continually monitor our inventory of cleaning supplies and personal protective equipment and restock when necessary?
- ☐ Will we be able to regularly clean the facility in accordance with local, state, provincial guidelines?

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- ☐ Will we be able to regularly communicate changes to policy with anyone entering the building?
- ☐ Do our personnel policies allow for flexible/paid leave or remote working even once we open because not everyone will be able to be in the building?
- ☐ Will we continually review, update, and communicate changes to health and safety actions?
- ☐ Are we able to quickly close down again if needed? Do you have a plan to do that, if necessary?

If any of these are answered no, STOP and wait until you can answer yes to all.

If all are yes:

1. Consider the risk of something going wrong. Are you prepared to be on the front page of your local newspaper or on social media with that error? Is your plan so strong and implementation expected to be so good, that you could be in the press for the excellence of your work?
2. Have you consulted with your insurance agent and are you able to accept liability, if any, if you open too soon?
3. Check congregation values and Jewish values again.

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Phased Re-Opening Plan

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This phased re-opening plan is a tool to guide you in thinking about re-opening. It should be used in tandem with other guidance from your national, state/provincial, and local health authorities, and other tools.

The tool is broken into phases, but the use of the term phases is NOT meant to coincide with phases that your local health authorities are using. These are phases that any congregation could use, no matter where they are.

While this tool helps you to establish a timeline and set of criteria for re-opening, it is not an endorsement of re-opening. Each congregation will need to make that decision by itself based on its particular situation.

Sections: This is a sample of the sections you should have in your re-opening plan. You may add phases or guidance in each phase per your local conditions

Preliminary Sections

1. Statement of values – use your own values statement or use statement from your movement:

Central Conference of American Rabbis/Union for Reform Judaism Guidelines on Values-Based Decision Making: Returning to in-person gatherings during the Covid-19 Pandemic
<https://www.ccarnet.org/ccar-urj-guidelines-on-values-based-decision-making-returning-to-in-person-gatherings-covid-19/>

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<https://www.reconstructingjudaism.org/news/reopening-our-institutions>

Reconstructing Judaism: Jewish Values and Coronavirus
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Rabbinical Assembly: Jewish Values Regarding Physical Reopening of Our Institutions
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Orthodox Union and Rabbinical Council of America Guidance to Shuls and Communities on Re-Opening
https://www.ou.org/assets/OU-Guidance-To-Shuls-And-Communities-5-8-2020_F-1.pdf

2. Intention to follow local, state (province), and national health guidelines – make a clear statement that shows you are following the law and health department guidance
3. Process for developing this plan, for updating the plan, and for monitoring compliance – be clear about how it was done, who was involved, and how it will be updated as understanding of the virus continues to develop
4. Social distancing protocols (sample)
 - a. Stay 10 feet away from others whether praying, walking, working, or otherwise engaged
 - b. Avoid conversations and tasks that require close face-to-face contact with others when possible.
 - c. Avoid all contact with others whenever possible (e.g., handshakes, hugs).
 - d. Avoid touching surfaces that may have been touched by others when possible.
 - e. Distance themselves from anyone who appears to be sick.
 - f. Follow designated traffic flow patterns, including avoid gathering when entering and exiting the facility and only entering and exiting via designated areas.
 - g. Follow any posted signage regarding COVID-19 social distancing practices.
 - h. Disinfect any surfaces touched with wipes, if possible.
 - i. Avoid touching their face.
 - j. Avoid nonessential gatherings.
 - k. Limit the number of individuals in common areas at all times.
 - l. Avoid using common areas.

Phases of Re-Opening

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1. Closure – no building use except for maintenance, cleaning, and security check
 - a. Until congregations are allowed to open by local, state/province, and national health authorities and we are prepared to do what it takes to operate safely, we will remain closed
 - b. All functions should be performed remotely
 - c. Only necessary maintenance, cleaning, and security checks should be done

2. Phase One – very limited re-opening for office and outdoor gathering, if practical
 - a. List the health authority conditions that must be met in order to move to Phase One – for example, four consecutive weeks of declining cases in our county according to our county health department
 - b. List the policy for tracking attendees and notifying attendees if a participant has become sick
 - c. List overall procedures – use of face masks, social distancing, etc.
 - d. List the building uses that will be permitted, for example
 - i. Single family limited attendance *b'nai mitzvah* and weddings can take place
 - ii. Limited attendance outdoor events can take place
 - iii. No meetings or appointments
 - iv. Clergy and staff may work from the building if their offices can be kept closed and they wear masks outside their offices. Designate an approval person to track who is in the building each day
 - e. No food services
 - f. No shared ritual objects
 - g. Designate rules for use of restrooms
 - h. Also designate what clergy and staff can or cannot do in other spaces – no *shiva minyanim*, hospital, or home visits
 - i. Alternative arrangements available for clergy, staff, and volunteers who have risk factors and cannot perform duties

3. Phase Two – limited programming with attendance restrictions and social distancing
 - a. List the health authority conditions that must be met in order to move to Phase Two, acknowledging that it might be required to move back to Phase One. For example, after four consecutive weeks of declining cases, an additional two consecutive weeks of declining cases
 - b. List the policy for tracking attendees and notifying attendees if a participant has become sick
 - c. List overall procedures – use of face masks, social distancing, etc.

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- d. List the building uses that will be permitted
 - i. Limited attendance programming with masks and social distancing
 - ii. Larger attendance, but still with limits, outdoor events with masks and social distancing
 - iii. Meetings and appointments with distancing, ventilation, and cleaning. Designate an approval person to track who is in the building each day
 - e. No food service
 - f. No shared ritual objects
 - g. Designate rules for use of restroom
 - h. Designate what clergy and staff can or cannot do in other spaces – no *shiva minyanim*, hospital, or home visits
 - i. Alternative arrangements available for clergy, staff, and volunteers who have risk factors and cannot perform duties
4. Phase Three – full programming with minor restrictions
- a. List the health authority conditions that must be met in order to move to Phase Three, acknowledging that it might be required to move back to Phase Two. For example, an additional two weeks of declining cases in our county past the six weeks that got us to Phase Two, significant treatment options widely available, etc;
 - b. List the policy for tracking attendees and notifying attendees if a participant has become sick
 - c. List overall procedures – use of face masks, social distancing, etc;
 - d. Programs will run with attendance limits, social distancing, and masks depending upon size and room usage
 - e. Food service based on health department recommendations
 - f. Limited use of shared ritual objects based on health department recommendations
 - g. Designate rules for use of restroom
 - h. Designate what clergy and staff can or cannot do in other spaces – *shiva minyanim* if limited attendance, hospital visits, home visits
 - i. Alternative arrangements available for clergy, staff, and volunteers who have risk factors and cannot perform duties
5. Phase Four – no restrictions
- a. Health authority conditions would include herd immunity, widespread availability and compliance with vaccination, or significant treatment options, and in accordance with CDC guidelines.
 - b. No restrictions on programming

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Examples of actual congregation plans can be accessed through your movement.

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Guide for Decision-Making about Singing: To Sing or Not to Sing in a Time of COVID-19

Prepared by Cantor Steven Weiss

Immediate Past-President of the American Conference of Cantors

(In consultation with Cantor Claire Franco, President of the American Conference of Cantors, Marla Bentley, President of the Guild of Temple Musicians and Cantor Rosalie Will, Director of Worship for the Union for Reform Judaism)

There is risk associated with everything that we do. Congregational professionals and lay leaders need to assess the potential risk of in person communal worship – focusing parts of worship that are of a higher risk. When making decisions regarding worship, lay leaders and professionals MUST use their own state, and local regulations. The following guidance regarding singing and music are general recommendations. Please consult with your local boards of health for specific guidelines for your location.

Please note that we are not providing medical or legal advice. We are presenting information in a way to generate conversation and encourage additional research as you make decisions for your congregation.

“Let everything that breathes praise God.... Hallelujah” -psalm 150

As synagogues of all sizes and types consider resuming worship in public spaces, professional and lay leaders must weigh the risks associated with singing and playing certain types of instruments in a confined space. Music is integral to Jewish worship and it is difficult to imagine prayer without it. David played in the time that the Temple stood. So, even in this challenging time must find a way to include music in our synagogue experiences.

What do we know about the Covid-19 virus?

The information presented below is based on the current understanding of how Covid-19 spreads:

- The virus spreads mainly person to person
- Between people who are closer than 6 feet
- Through respiratory droplets when an infected person coughs, sneezes talks or sings
- Droplets land in mouths or noses of people in close proximity
- Contact with surfaces where droplets have “landed”

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The following are things to consider when planning for worship inside a sanctuary:

Solo and Choral Singing

While information about the potential spread of COVID-19 is still incomplete, medical, scientific, and public health experts agree that:

- Speaking produces about 10x more aerosols and singing about 60x more than breathing which produces only a small number of aerosols.
- Volume matters. The number of aerosols generated when public speaking or singing is impacted by how loud the speech or singing is. The louder the speaking or singing, the more aerosols are produced and the further they appear to travel. There are additional studies that suggest that the aerosols produced can stay suspended in the air for long periods of time.
- Face coverings, while required, may not completely prevent spread of the virus by the person speaking or singing.
- Recognizing that there is deep emotional pain associated with the loss of choral singing, until such a time as better treatments or a vaccine is available for the treatment of COVID-19, all experts agree that **choral singing in indoor spaces should not occur**. The level of risk associated with placing choir members in close vicinity with the number of aerosols being released is too high a risk for congregations to bear.
- Singing with masks should also be avoided. Studies have shown that it can be hazardous to someone with heart or breathing conditions like (asthma/COPD). But even for healthy people, singing with a mask can cause dizziness or headaches.

Communal Singing

Communal singing (by the congregation) is equally important in Jewish worship. The role of the *Kahal* (community) cannot be underestimated and yet, at the same time, the risks are just as great as that of organized choir singing. **Communal in-person singing should be discouraged**. If services are occurring outdoors and significant social distancing can be achieved, the risk of transmission is lessened but not eliminated.

What about humming?

The impact of humming is not yet fully known. It is likely that loud humming may have the same effect as choral singing. However, soft humming with a face covering might be an acceptable risk.

Every congregation faces a different situation and must tailor its decision making according to applicable guidelines and congregational and Jewish values. These include but are not limited to national/local/state/provincial authorities; nature of physical plant including size of rooms, layout and availability of HVAC and ventilation; the extent to which clergy, staff, and volunteers are not constrained in ability to return by health or living situation; resources available to maintain the building, among other factors.
6/19/2020



“Singing together in congregations is a practice that we love dearly and are eager to promote, but loving our neighbor is job one here and so the fine for fasting from this wonderful practice may be longer than any of us would like.”

Rev. John Witvliet – expert on Worship

Can a Cantor or Soloist sing safely with an accompanist in the same room at the same time?

While there is still risk associated with any type of indoor singing, there are steps one can take to mitigate the risk.

- Have the accompanist wear a form fitting (N95 or other type) of mask
- Place the Cantor/Soloist in a well-ventilated room. If it is possible to open doors and windows to add ventilation, that would be optimal
- Consider placing the accompanist as far away from the Cantor/Soloist as possible
- As soon as the singing is completed all parties should leave the room

Can there be any other individuals in the room?

The answer to that questions depends on the size of the room that you are in. If you are in a small chapel and it is not possible to have at least 20-30 feet in all directions separating the cantor/soloist from the Rabbi or other service leader, then it should NOT be done. If the room is large and a significant amount of space can be created between the person who is singing and others, then it may be possible. Again, if the other parties in the room wear masks and other protective devices are used such as plexiglass shields, this can further decrease the risk. Consult with local officials for specific guidelines of what you can do to mitigate risk in your space.

What about the blowing of the Shofar for the upcoming High Holidays?

The call of the Shofar is a high point of Rosh Hashanah worship. Like singing, studies suggest that the use of wind instruments can create aerosols nearly 100x the aerosols of just breathing. So, too for the blowing of the Shofar. So, how can it be done safely?

- Consider placing the Shofar blower in an outdoor space
- If you congregation’s interpretation of *halacha* allows, pre-record the Shofar being blown in the sanctuary and use the recording during worship

What can we do about music?

(URJ Congregations)

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Each congregation will determine the delivery of their worship services. If your worship is virtual, you may consider using prepared liturgical pieces of music created by members of the American Conference of Cantors and Guild of Temple Musicians which will be released for use by the community. These liturgical pieces will provide choices of major rubrics of the High Holy Day services and will be available during the summer

Virtual choirs are exceedingly difficult, and time consuming to put together and should only be considered if the time, ability and financial considerations allow.

Should your congregation determine that in person worship is safe, you should follow your local and state guidelines when planning those services. We have included additional resources below.

Articles and Resources:

<https://millennialpastor.ca/2020/05/26/so-your-church-is-opening-up-after-covid-19-closures-it-wont-be-what-you-are-hoping-for/>

https://www.nytimes.com/2020/06/09/arts/music/choirs-singing-coronavirus-safe.html?referringSource=articleShare&fbclid=IwAR30AF4hfikt4J9a2QTkeGx_GcbSnSCykX5c79VCAx73ikh-Gq37hDzDxCM

<https://focus.masseyeandear.org/is-singing-in-a-choir-safe-during-covid-19-a-voice-expert-explains-the-risk/>

<https://www.theatlantic.com/health/archive/2020/06/choir-practice-during-pandemic/612868/>

<https://www.inquirer.com/arts/choir-coronavirus-covid-19-cdc-report-philadelphia-mother-bethel-the-crossing-reaction-20200517.html>

<https://www.emoryhealthcare.org/centers-programs/voice-center/covid-updates-choral-singers.pdf>

<https://www.oca.org/reflections/misc-authors/what-covid-19-means-for-singing-in-church>

CDC Studies:

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e6.htm>

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