

**Flu Season  
Disease Prevention & Practices  
For Worshiping Communities**

**Episcopal Diocese of Michigan  
October 2009 (updated January 2014)**

*The H1N1 strain of influenza is in our midst (again). Public health officials continue to strongly encourage everyone to be prepared for this and other forms of influenza (the flu). We encourage all congregations and communities of faith to develop a plan in light of this, and are reissuing this update to both encourage and remind.*

*If you have not already, you may want to bring together a group of people at your parish to begin discussing what might be best for your parishioners. There may be some steps you might want to put into place now, additional steps you may want to implement under more advanced circumstances.*

*The guidance contained in this document is not a directive from the Diocese but simply a list of suggestions for accommodations you may wish to consider.*

*Blessings & peace,  
The Right Reverend Wendell N. Gibbs, Jr., Bishop of Michigan*

*Following a general overview, this resource will speak first to issues involving worship, particularly the administration of Holy Communion, and then with some considerations regarding pastoral visitation; large gatherings and staff practices.*

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**General Overview**

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***First, we strongly encourage getting both the seasonal flu vaccine. (As of this update the currently available flu vaccines include H1N1 in the compounding) This is especially true if 1) you fall into any of the special risk categories (some of which are pregnant women, children 6 month to 24 years old, those with chronic respiratory or heart conditions) and 2) you regularly visit in health care facilities, childcare/school settings, are a caregiver yourself, or live with anyone who is vulnerable to flu.***

***Check with your doctor or local health department for specific information on "special risk" factors and vaccine availability.***

*The H1N1 virus is challenging because there are particular parts of the general population that still have little to no developed immunity to this particular strain of the influenza virus. It is because of this lesser immunity that getting the virus can seem easier than getting other strains of the flu virus. The H1N1 virus is actually not a very hearty virus when left on surfaces. Special cleaners are not needed, as most any "germ fighting" cleaner will effectively kill it when used appropriately.*

*Whether it is the H1N1 flu or other seasonal forms that emerge during the fall/winter/spring "flu season," special attention to cleaning surfaces such as door knobs, handles, and release bars, keyboards (especially on shared computers and*

electronic devices); telephones, handrails, elevator buttons and similar items is warranted on at least a daily basis.

Tissues such be readily available. Wash hands often. If using soap and water sing the "ABC" song all the way through as guide about how long to wash. You may also use alcohol-type hand-sanitizer or wipes.

Post reminders about hand washing in all lavatories, washrooms, kitchens, light switches, and other similar facilities. **And, don't forget the nursery!**

If you are sneezing, coughing, or otherwise showing signs of illness there are some things that should be done.

- Cough or sneeze into a handkerchief, tissue, or your upper sleeve; do not cough or sneeze into your hands.
- If you are sneezing, or showing other signs of illness and you are running a fever, generally considered to be 100 degrees or above, you should stay home from work, and even from worship. The current medical information generally agrees that if you have flu-like symptoms with such a fever medical treatment from a doctor within the first 48 hours is advised as some anti-viral medications may be helpful if started early.
- Stay home until your fever has been "normal" for at least 24 hours without taking any fever-reducing medication, such as aspirin, ibuprofen, etc.

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### **Worship Considerations**

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There are no known requests for public health officials to investigate any outbreaks of infectious diseases allegedly linked to the use of a common communion cup. However, communicants with low resistance to infection (i.e. cancer patients, those on immunosuppressant therapy, those with certain chronic diseases, etc.) should probably refrain from use of the common cup for their own protection.

*Should it become necessary to cancel church services due to a public health crisis, it would be wise to have a phone call list and protocol in place so that any particularly vulnerable parishioners can be checked on as needed. Also, please let the Diocesan Offices know, as we are concerned about the welfare of all congregations and communities.*

### **Preparations**

Cleansing the hands: The clergy, EMs, and anyone else handling the elements or serving instruments (e.g. Alter Guild, etc.), should thoroughly wash their hands or clean them with an alcohol based hand sanitizer in advance. Clergy and EMs should re-clean their hands just prior to setting the table and distributing communion.

The ritual of the washing of the clergy's hands at the offertory could be more than symbolic. The lavabo basin could be large, contain some liquid soap in addition to an adequate quantity of water, warm water for rinsing, and a proper towel could be provided so that a thorough hand washing can occur.

A through 30-second hand wash will eliminate 95% of all germs (see additional attached guidance on hand washing and use of hand sanitizer).

Use of wafers rather than a loaf of bread: It may be best to use individual wafers that are only handled by people who have just washed their hands / used hand sanitizer rather than use a loaf of bread where many individuals handle it / break off a piece. Or if a loaf of bread is used only the minister should handle it / break off pieces.

Consider alternate ways to handle the collection plate rather than passing it along causing many people to touch it.

### **Concerning the Passing of the Peace**

Hands are a prime way to pass along germs! You may wish to suspend physically exchanging the sign of the peace by shaking hands, hugging, or kissing. Greeting each other with a smile and a nod or a wave are good alternatives. We are especially fond of the Benedictine practice of using a simple bow of the head and bidding of peace.

For congregations that have a practice of holding hands during the Lord's Prayer are at the time of the dismissal, it may be best to consider discontinuing the practice for a while, at least during flu season. An alternative consideration might be to reach out to each other, but not quite touch hands.

### **Concerning Eucharist**

Use of the common cup: In no case can exposure to a single virus or bacterium result in infection. For each disease there is a minimum number of the agent - generally in the millions - which must be transmitted from person to person before infection can occur. Our immunity against a few stray bacteria or viruses is immense!

There is a theoretical risk of transmitting infectious diseases by using a common communion cup, but the risk is very low. Experimental evidence shows that wiping the chalice with a clean linen cloth reduces the bacterial count by up to 90 percent. Use of appropriate safeguards can further diminish the risk:

- Sharing the communion cup should be avoided if a person has an active respiratory infection, or moist or open sores on their lips.
- Always wipe the interior and exterior rim between communicants
- Use a fresh part of the purificator each time; use care in rotating the cloth to a clean area after each person sips, using more than one purificator as needed
- Rotating the cup between communicants
- Use of a clean cloth for each service, limiting the handling of the chalice during communion to only the minister – do not hand it to the person receiving communion as it increases hand-to-hand contact.
- Clergy and Eucharistic Ministers (EMs) should also be careful to tip the chalice slowly to prevent excess backwash.
- It is best to use wine that has at least 12% alcohol content as alcohol is a disinfectant. Chalices should be washed with hot soapy water and rinsed with scalding hot water following each Eucharistic service.

Intinction: The most desirable to do this is with what is called an intinction paten. This is a paten with a shallow bowl in the middle which hold consecrated wine. Don't laugh, but it is sort of like the dip plates often set out at parties with crackers around

the side and a place for the dip in the middle. The person administering the intinction paten picks up a host, intincts it and places it directly on the lips, tongue, or hands, of the person receiving. Sadly, there are not too many of these around. But you may be able to develop some similar method of "personal intinction by the presiding minister"

**Allowing each communicant to self-intinct should be avoided at all times. Just one event of a person putting fingers in contact with the wine can put more germs into a chalice than dozens of people "sipping" from it – with proper wiping in-between.**

You may wish to have a separate station for intinction only.

Receiving only the bread: It is the position of the Episcopal Church, and all sacramental Christian traditions, that God is fully present in both of the communion elements, therefore, it is acceptable for parishioners to receive only the bread. They should rest assured they will still receive the full grace of the Sacrament. Communicants should cross their hands over their chest as a sign to the chalice bearer to pass them by.

Instructions to parishioners: Clergy should periodically instruct the people "If you have the flu, a cold, or a cold sore, please don't drink from the cup or dip the wafer into it." This could be done either through the bulletin or verbally at regular intervals.

### ***Concerning Consumption of Wine Remaining in the Common Cup***

It is not necessary for the priest or deacon to consume any remaining consecrated wine in the common cup nor is it necessary to rinse the cup with water and consume its contents as part of the service. A chalice containing remaining consecrated wine may be covered and immediately removed to the sacristy or carefully set aside and taken care of after the service.

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### ***Pastoral Visitation***

First, please use common sense. If you are sick don't go! If you have a sick person in your home, you should strongly consider not serving as a pastoral or Eucharistic visitor until you are sure you are not infected or carrying the infection. Remember the 24 hours without fever and fever-reducer guideline.

- Place individually wrapped hand sanitizer towelettes in home communion kits; or use small squeeze or spray bottles of hand sanitizer. Placing a disposable mask or two in the kit may be useful as well.
- Check with all hospitals and other healthcare facilities in advance regarding visitation policies that may be in place during the current health situation. Check with them often as policies and protocols can change very quickly.

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### ***Large Gatherings***

- Place large pump bottles of hand sanitizer in appropriate and accessible places in the narthex and encourage parishioners to use some upon entering the church.

- Have a box of disposable masks available for those who may wish to use them.
- Remind people to wash hands often.
- Minimize shaking of hands, but continue to offer gracious hospitality.
- If an outbreak of flu, especially H1N1 is heavy in your area, consider rescheduling the event.
- Clean the facility well both before and after the event.

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### ***Staff Practices***

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- Promote good health practices such as stress reduction, getting adequate sleep, eating a healthy diet – especially lots of fruits and vegetables.
- Drink lots of water!
- Promote hand washing – hand washing – hand washing – especially before and after eating, using the rest room, blowing your nose, etc.
- Review, and if needed revise, sick-time policies as they related to duration, etc. It will benefit no one for a staff member to rushed back to work only to bring an active infection with them.
- Consider work-from-home possibilities, if practicable – when a staff member has a sick child or family member at home, especially if there is a confirmed H1N1 diagnosis.

#### *To learn more check out these web sites:*

- Your local health department
- Your state Department of Health
- Centers for Disease Control and Prevention: <http://cdc.gov>
- National Episcopal Health Ministries also has resources concerning pandemic flu/disaster preparedness: [www.episcopalhealthministries.org](http://www.episcopalhealthministries.org).