

Archdiocese of Denver



Policies Relating to Planning for Pandemic Influenza and Emergency Preparedness

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Abbreviations:

BCL	Bishops' Committee on the Liturgy (of the USCCB)
c. or cc.	Canon(s) from the Codex Iuris Canonici (Code of Canon Law)
CDC	Centers for Disease Control and Prevention
COOP	Continuity of Operations
DHS	Department of Homeland Security
EMHC	Extraordinary Minister of Holy Communion
FEMA	Federal Emergency Management Agency
GIRM	General Instruction of the Roman Missal
HHS	Department of Health and Human Services
ICS	Incident Command System
CDPH	Colorado Department of Public Health
NIMS	National Incident Management System
OCF	Order of Christian Funerals
RCIA	Rite of Christian Initiation of Adults
USCCB	United States Conference of Catholic Bishops
WHO	World Health Organization
NACPA	National Association of Church Personnel Administrators

POLICIES RELATING TO PLANNING FOR PANDEMIC INFLUENZA

PART ONE: GENERAL INTRODUCTION

1. General Introduction - Planning for Pandemic Influenza

We live in an increasingly interconnected world: what affects a community in one part of our globe affects all of us. This observation is especially true in regards to infectious diseases. The availability of relatively easy world travel has made the possibility of world-wide spread of infectious diseases a significant possibility.

Among the infectious diseases that pose a particular risk is influenza (flu). Due to its ability to mutate and spread easily, it has been the source of three major pandemics in the 20th century. There is increasing concern that we are approaching the conditions necessary for another world-wide pandemic. The recent outbreak of the H1N1 swine flu underscored the potential of a global pandemic and gave some hint to the impact of a pandemic on society. It is therefore incumbent upon all of us to plan and prepare for the possibility of an influenza pandemic.

In implementing these policies and planning for influenza pandemic, an important distinction is to be kept in mind between the actual spread of an influenza virus, on one hand, and the severity of the virus itself, on the other. The World Health Organization is concerned with the global spread of the virus; the Center for Disease Control and local health authorities are concerned both with its spread and with its severity.

It is important to note that planning which takes place in response to the threat of pandemic influenza will benefit overall emergency preparedness. It is hoped that by attending to the issues raised by this document our parishes and schools, our ordained, religious, and lay ministers, and all the faithful of the Archdiocese of Denver will be better prepared for a natural or human caused disaster. *Accordingly, it cannot be stressed enough how important it is that all parishes, schools, and other communities develop their own committees, plans, and procedures for implementing these policies and responding to a pandemic or disaster.*

This document addresses the implications that pandemic influenza would have on the life of parishes and schools in the archdiocese. Worship, pastoral care, and educational and formational programs would all be affected in the event of a pandemic. In promulgating this document, it should be stressed that two extremes are to be avoided: *apathy* and *panic*. Rather, we urge the exercise of the virtue of *prudence*. Prudence does not require certainty; no one can, for example, guarantee that we will experience pandemic influenza at any particular time. Prudence does require that a realistic assessment of the situation be made and reasonable preparations are undertaken. It is this measured approach which characterizes this document.

The information used to prepare this document was obtained from various sources, including the World Health Organization, the U.S. Centers for Disease Control and Prevention, the U.S. Department of Health and Human Services, the U.S. Department of Homeland Security, and the Colorado Department of Public Health. In addition, documents prepared by the United States Conference of Catholic Bishops and especially, the Archdiocese of Denver, whose own policy, with its permission, have been reworked into the present document.

This policy was prepared by the Archdiocese of Denver Pandemic Planning Group, whose original members included Msgr. Edward Buelt (Chair), Deacon Joseph Babish, Jeanette DeMelo, Dr. Milt Hammerly, Father John Lager, O.F.M. Cap, Ralph Lowder, Rosemary Nelson, Deacon Chuck Parker, Lloyd Swint, Sr. Elizabeth Youngs, and Teri Sortor (Diocese of Colorado Springs). The assistance of these individuals and agencies is gratefully acknowledged. Following the outbreak of H1N1 influenza in 2009, the policy was amended by the Pandemic Planning Group, whose membership, in addition to those persons already listed, included Jim Kreger, John Miller, and Chuck Sullivan.

Appendix A offers a number of websites that can be accessed for more information.

Finally, it must be acknowledged that during a pandemic, medical and other life-sustaining resources may be limited. In particular, resources such as adult and pediatric hospital beds, intensive care unit beds, ventilators, prescription and non prescription medicines, food and fuel could be in short supply in many areas.

The archdiocese calls on all healthcare providers and suppliers of life-sustaining goods and services to provide equal access to life-sustaining resources while promoting the good health of all in the community. In particular, the archdiocese is an advocate for those people whose social condition puts them at the margins of our society and makes them particularly vulnerable to discrimination.

2. Influenza

Policy – I.1

Those in positions of leadership in the Church have the responsibility to become and remain well-informed regarding possible risks to their communities, including pandemic influenza. The archbishop may mandate attendance at specific information sessions, the publication of specific policies, or the enactment of specific programs in response to the risk or presence of pandemic influenza.

Access to timely and accurate information is crucial in planning and preparing for the possibility of an influenza pandemic. The following definitions will be used:

Seasonal (or common) flu is a respiratory illness that can be transmitted person to person. Most people have some immunity, and a vaccine is available.

Pandemic flu is a virulent strain of human influenza that becomes very widespread and can ultimately affect the entire world. Because there is little natural immunity, the disease can spread easily from person to person. The H1N1 swine flu outbreak of 2009 is an example of the potential for a pandemic of influenza from heretofore unknown viruses. Fortunately, despite the rapid worldwide spread of H1N1, to date the severity of illness has been relatively mild in most cases and the mortality rate has been low.

Avian (or bird) flu is caused by influenza viruses that occur naturally among wild birds. The H5N1 variant is deadly to domestic fowl and can be transmitted from birds to humans. There is no human immunity and no vaccine is available as of late. Although the mortality rate is high with H5N1, the virus has thankfully not yet mutated to a form that is easily transmissible from person to person.

Procedures

More information on the Influenza virus and pandemic flu is included in Appendix B. A table summarizing the U.S. government's suggested preparation for pandemic influenza is found in Appendix C.

3. Pandemic Classification Schemes.

Policy – I.2

Church leaders are to be familiar with both systems of nomenclature. Archdiocese of Denver policies and practices will use the Federal Response Stages/Center for Disease Control (CDC) as their guide.

In order to provide for a common nomenclature and exchange of information among local, national, and international agencies, the World Health Organization (WHO) has devised a six-phase classification system in regards to the spread (not severity) of influenza. Although the CDC closely monitors WHO pandemic phases, their recommendations for the USA are based on six Federal Response stages.

Federal Response Stages	WHO Phases / Definitions
<i>Interpandemic Period</i>	
Stage 0 New domestic animal outbreak in at-risk country.	Phase 1 No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low.
	Phase 2 No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza subtype poses a substantial risk of human disease.
<i>Pandemic Alert Period</i>	
Stage 0 New domestic animal outbreak in at-risk country.	Phase 3 Human infection(s) with a new subtype but no human-to-human spread or at most rare instances of spread to a close contact.
Stage 1 Suspected human outbreak overseas [human-to-human transmission].	
Stage 2 Confirmed human outbreak overseas.	Phase 4 Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting the virus is not well adapted to humans.
	Phase 5 Larger cluster(s) but human-to-human spread is still localized, suggesting that the virus is becoming increasingly better adapted to humans but may not yet be fully transmissible (substantial pandemic risk).
<i>Pandemic Period</i>	
Stage 3 Widespread human outbreaks in multiple locations overseas	Phase 6 Pandemic phase: increased and sustained transmission in the general population.
Stage 4 First human case in North America.	
Stage 5 Spread throughout United States.	
Stage 6 Recovery and preparation for subsequent waves.	Post-Pandemic Period Return to the Interpandemic Period (Phase 1).

4. FEMA Incident Command System Nomenclature.

Policy – I.3.

The Archdiocese of Denver, as well as each deanery, parish, and school is to form a committee to review existing preparedness for pandemic influenza, make appropriate changes to existing plans, and help ensure that archdiocesan policies in this regard are being enacted. In order to foster inter-agency communication, the ICS (Incident Command System) nomenclature will be used.

Response to all crises requires a clear chain of command between all responders. The ICS is based on the premise that every crisis has certain major elements requiring clear lines of command and control. FEMA is a good source for information on and training in the ICS. According to the ICS, a number of critical functions must be attended to in a crisis. A single individual may take on more than one role. See Appendix A for ICS information.

Incident Commander: Sets the incident objectives, strategies, and priorities and has overall responsibility at the incident or event. This position may be assumed by the pastor, principal, DRE, youth minister, or qualified parishioner—though it may be an emergency responder.

Public Information Officer: Serves as the conduit for information to internal and external stakeholders, including the media or other organizations seeking information directly from the incident or event.

Personnel Resources Officer: Coordinates the allocation and assignment of priestly and diaconal personnel.

Safety Officer: Monitors safety conditions and develops measures for assuring the safety of all assigned personnel.

Liaison Officer: Serves as the primary contact for supporting agencies assisting at an incident.

Operations Section Chief: Conducts tactical operations to carry out the plan. Develops the tactical objectives and organization, and directs all tactical resources. This includes care to the individuals (e.g., students, staff) present during a crisis, being attentive to their physical, medical, psychological, and spiritual needs.

Planning Section Chief: Prepares and documents the Incident Action Plan to accomplish the objectives, collects and evaluates information, maintains resource status, and maintains documentation for incident records.

Logistics Section Chief: Provides support, resources, and all other services needed to meet the operational objectives such as food, water, bathroom facilities, and transportation.

Finance/Administration Section Chief: Monitors costs related to the incident. Provides accounting, procurement, time recording, and cost analyses.

Procedures.

- a. Archdiocesan leadership will form a committee to assess current preparedness for pandemic influenza and assist to enact needed and mandated changes to existing plans. This committee should include those knowledgeable in public health and related areas, as well as the directors of the various offices and ministries that would be affected in case of a pandemic. This

committee shall meet at least annually and as often as necessary to review archdiocesan policies, assess archdiocesan preparedness, and respond to pandemic influenza or an emergency as necessary.

- b. Parish leadership will form a committee to assess current preparedness for pandemic influenza and assist in enacting needed and mandated changes to existing plans. This committee should include those knowledgeable in public health and related areas, as well as representatives of the various ministries that would be affected in case of a pandemic. Doctors, nurses, and other medical professionals should be members of this committee.
- c. School committees should likewise include all relevant stakeholders (e.g., lead emergency response agency, administrators, pastor, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). These committees are to be aware of any particular legal requirements or government directives relevant to preparations for a possible pandemic.
- d. The deanery committee should consist of the pastors of the deanery, and serves to coordinate activity within the deanery as well as to foster communication between the deanery and archdiocese.
- e. Plans generated locally will use the ICS nomenclature when describing critical functions and personnel. The use of a common nomenclature will assist greatly when communicating with governmental and outside agencies and organizations responding to a crisis.
- f. After their constitution and the completion of their initial work, these committees should meet at least annually to review and update their planning as needed.

5. Strategic Planning.

Policy – I.4.

The Archdiocese of Denver planning will address the key issues identified by the Department of Homeland Security in the document, *Implementation Plan for the National Strategy for Pandemic Influenza*, as listed below:

Strategic planning for pandemic influenza must attend to certain core issues, as identified in Chapter 9 of the U.S. Government’s Implementation Plan for the National Strategy for Pandemic Influenza.

Procedures.

The following issues will be attended to by all archdiocesan entities in their preparations for the possible outbreak of pandemic influenza.

- a. Identify Essential Functions: Identify functions that enable organizations to provide vital services.
- b. Establish Delegation of Authority: Identify the authority to make key decisions in a continuity of operations (COOP) situation.

- c. Establish Orders of Succession: Ensure that people know who has authority and responsibility if the leadership is incapacitated or unavailable in a COOP situation.
- d. Establish Clear Lines of Communication: Ensure communication protocols between members of working groups and between various agencies and offices, for example, between archdiocesan agencies and offices and deaneries, parishes, schools, and other ministry centers.
- e. Identify Alternate Operating Facilities: Prepare for the possibility of an unannounced relocation of essential functions and personnel.
- f. Identify Interoperable and Effective Communications: Identify the availability and redundancy of critical communication systems to support connectivity of internal organizations, external organizations and the public.
- g. Maintain Critical Records and Databases: Identify, protect, and ensure the ready availability of electronic and hardcopy documents, references, records, and information systems needed to support essential functions.
- h. Sustain Human Resources: Develop, update, exercise, and be able to implement comprehensive plans to protect human resources.
- i. Provide Testing, Training and Exercises: Assess, demonstrate and improve the ability to execute plans and programs during an emergency.
- j. Devolution of Control and Direction: Plan for the need to transfer authority and responsibility for essential functions from an organization’s primary operating staff and facilities to other staff and facilities.
- k. Reconstitution: Plan for the resumption of normal operations.

6. Reporting.

Policy – I.5.

Parishes and deaneries are to report their progress in complying with these policies to the planning section chief. In addition, parishes and deaneries will report their experiences during a pandemic to the planning section chief.

Good communication between the archdiocese and the parishes is essential in preparing for and responding to a major disaster, such as an outbreak of pandemic influenza.

Procedures.

The Archdiocese of Denver will develop and distribute planning and reporting forms that each parish, school, and deanery will use to report their preparedness to the archdiocese. (See Appendix D).

- a. The “Combined Planning and Reporting Form” and “Archdiocesan Entity Status Report Form” shall be filled out by each parish/schools 30 days after the promulgation of this document, and annually thereafter. The forms are to be returned by parishes to the

chancellor and by schools to the Superintendent of Catholic Schools. Copies are sent internally to the Director of Communication.

- b. The “Archdiocesan Entity Status Report Form” will again be filled out as changes in the Federal Response Stages are declared and (once Stage 5 is reached) to report weekly the number of pandemic influenza cases and deaths in addition to significant changes in operation. The form is to be returned to the vicar general, who will send a copy to the superintendent of schools and director of communications.
- c. The “Combined Planning and Reporting Form” will be reviewed regularly with the superintendent of schools at meetings of principals.
- d. The two forms will be filled out at any other time at the request of the archbishop or vicar general.
- e. The “Post-Pandemic Reporting Form” is to be completed and submitted to the vicar general within 10 business days of Stage 6 having been declared. The vicar general will send copies to the superintendent of schools and the director of communications.

7. Catholic Pastoral Center

1. Identify Essential Functions

- a. To maintain apostolic communion with the Holy See and the College of Bishops around the world;
- b. To oversee all ministries in the archdiocese, and serve as a resource for those who minister in the name of the archdiocese;
- c. To exercise stewardship over archdiocesan resources, human and material;
- d. To maintain the records of the archdiocese;
- e. To provide for the adjudication of legal cases in accord with canon law;
- f. To maintain effective communication within the archdiocese, and between the archdiocese and outside entities (such as the Holy See, the USCCB, and other dioceses of the province);
- g. To advocate for justice and work for charity, in keeping with Catholic social teaching.

2. Establish Delegation of Authority

- a. In the event of a COOP incident, ordinary powers are retained:
 - i. The archbishop retains ordinary authority over all aspects of archdiocesan life, in accord with canon law (c. 381; see also Appendix II - 1983 code references to the archbishop).
 - ii. The vicar general continues to exercise his ordinary powers (c. 479).
- b. Duties according to NIMS devolve as follows:
 - i. Incident Commander: the moderator of the curia.
 - ii. Public Information Officer: director of communications.
 - iii. Safety Officer: [to be determined].
 - iv. Liaison Officer: [to be determined].
 - v. Operations Section Chief: chancellor.
 - vi. Planning Section Chief: vicar general.
 - vii. Logistics Section Chief: maintenance supervisor.
 - viii. Finance and Administration Section Chief: chief financial officer.

3. Establish Orders of Succession

a. Archbishop

- i. The succession of diocesan bishops is governed by canon law.
- ii. In the event that the archbishop becomes ill and cannot function, he may delegate his “reserved” powers to the vicar general, in accord with c. 134. Regardless, the vicar general continues to exercise his ordinary powers (c.479)
- iii. In the event that the archbishop is impeded (c. 412), then an interim archdiocesan administrator is determined in accord with c. 413, that is, either according to a list having been drawn up by the archbishop and kept by the chancellor or, in the absence of such a list, by selection by the college of consultors.¹ The college is convened by the senior consultor in terms of ordination. The interim archdiocesan leader enjoys powers equivalent to an archdiocesan administrator (cc.427-429).
- iv. In the event of the death of the archbishop, the See is considered vacant (c. 416). The governance of the archdiocese and the election of an archdiocesan administrator are governed by cc. 417-430. It belongs to the college of consultors in solidum to govern the archdiocese (enjoying the powers of a vicar general) and, within eight days, elect an archdiocesan administrator. The college is convened by the senior consultor in terms of ordination. With the death of the archbishop, the offices of vicar general and episcopal vicar cease. The offices of chancellor, judicial vicar, and finance officer do not.

b. Vicar General

- i. The powers of the vicar general are mentioned in c. 479. The vicar general enjoys all ordinary executive power over the archdiocese, except for those instances that the archbishop has reserved to himself.
- ii. In the event of the death or incapacity of the vicar general, the archbishop is to appoint a replacement, even temporarily (c. 477).

c. Chancellor

- i. The duties and powers of the chancellor are listed in c. 482 and in the specific job description for this archdiocese. The chancellor is primarily responsible for recording and safeguarding the acts of the curia.
- ii. In the event of the death or incapacity of the chancellor, the archbishop is to appoint a replacement, even temporarily (c. 482)

d. Judicial Vicar

- i. The duties and powers of the judicial vicar are listed in cc. 1420-1422. The judicial vicar is charged with judging cases with ordinary power.
- ii. In the event of the death or incapacity of the judicial vicar, the Archbishop is to appoint a replacement, even temporarily (c. 1420)

e. The Chief Financial Officer of the Archdiocese

- i. The duties and powers of the archdiocesan finance officer are listed in c/ 494 and in the specific job description for the archdiocese.

¹Norms for elections are covered in c. 119 and cc. 165-178. Elections require the presence of the consultors, which in the event of a pandemic may prove difficult or even impossible. In the case of a vacant See, if the college is delayed for meeting beyond eight days, it falls to the senior suffragan of the province to choose the administrator (c. 421). In cases of impediment, the senior suffragan is to be consulted before any action is taken.

ii. In the event of the death or incapacity of the archdiocesan finance officer, the archbishop is to appoint a replacement, even temporarily (c. 482).

f. Directors and Staff

- i. The specific responsibilities of each director and staff member are listed in all relevant canons and in the job descriptions of each position. Directors have oversight responsibilities in their respective departments.
- ii. Persons in each position shall identify at least one substitute person from among current employees able to perform the essential functions of that position, in accord with the table below. The specific list of names will be maintained by the vicar general.

4. Identify Alternate Operating Facilities

- a. The first option will be for all those who are able to work from home
- b. If physical relocation of staff is necessary, the following sites will be used (as needed):
 - i. to be decided
 - ii. to be decided
 - iii. to be decided
 - iv. to be decided

5. Identify Interoperable and Effective Communications

In anticipation of an incident, the director of communications and director of technology will be notified to ensure adequate modes of communication are available.

6. Maintain Critical Records and Databases

In anticipation of an incident, the chancellor and archivist will review the security of all critical records and databases.

7. Sustain Human Resources

- a. During CDC Stages 0-4: usual policies apply.
- b. During CDC Stages 5-6: the following adaptations are made:
 - i. Employee ill: follow existing archdiocesan policy.
 - ii. Family ill: may continue to work at home. If unable or choose not to work at home, use sick leave, then accrued vacation leave, then a living wage (as defined by regional NACPA) and health insurance continuance for one month will be offered if possible. After all resources are used, family and medical leave may be used.
 - iii. Voluntary employee quarantine at home, travel restrictions by government authorities, archdiocesan offices closed: continue to work at home. If unable to work at home, use accrued vacation leave, then sick leave, then a living wage (as defined by regional NACPA) and health insurance continuance for one month will be offered if possible.

8. Provide Ongoing Education, Training and Information

- a. The archdiocese will assist parishes and schools with training and with conducting mock drills.
- b. The archdiocese will cooperate with public health officials if asked to participate in mock drills.

9. Devolution of Control and Direction

- a. In the event of the sudden and complete destruction of the Catholic Pastoral Center and loss of all or most of the Catholic Pastoral Center staff, excluding the archbishop, the archbishop will gather with the college of consultors and any remaining Catholic Pastoral Center staff to reconstitute the Catholic Pastoral Center. The meeting will take place at the

cathedral. If the cathedral is also unavailable, the meeting will take place at the [to be decided].

- b. In the event of the sudden and complete destruction of the Catholic Pastoral Center and loss of all or most of the Catholic Pastoral Center staff, including the archbishop, the college of consultors will convene as mentioned in 3.a. above, and will notify the senior suffragan and the apostolic nuncio of the events that have transpired. The meeting will take place at the cathedral. If the cathedral is also unavailable, the meeting will take place at the [to be decided].
- c. In the event that all the members of the college of consultors are also deceased, the dean senior in terms of ordination will gather the deans and consult with the senior suffragan, or, if he is not available, with the apostolic nuncio.
- d. In the event that the deans are also deceased, the priest senior in terms of ordination in the archdiocese will consult with the senior suffragan, or, if he is not available, with the apostolic nuncio.

10. Reconstitution

- a. Input from each parish and school will be reviewed (See Appendix D).
- b. Archdiocesan, deanery, parish, and school responses will be evaluated and policies updated.
- c. Post-incident staffing at the Catholic Pastoral Center will be reviewed. Hiring is planned as needed.

Summary

A summary of the Archdiocese's policies regarding the Catholic Pastoral Center's preparation for and response to pandemic influenza can be found in Appendix E.

8. Liturgical-Sacramental-Pastoral

Liturgy

The liturgy stands at the center of our lives as Catholics. Certainly, in times of crisis, we would expect an increased turn to the Church's rites as people seek comfort, hope, and a sense of meaning in the midst of suffering. At the same time, it must be admitted that the very actions that are central to our identity may, in themselves, assist in spreading pandemic influenza. Gathering as a community, touch, and the sharing of common articles can all be instrumental in spreading the flu.

In this light, it is important to recall c. 223, §2: "In view of the common good, ecclesiastical authority can direct the exercise of rights which are proper to the Christian faithful." In other words, individual rights can be subsumed to the common good in case of need. The adjustments in liturgical and pastoral practice called for in this document reflect the canon's call that all the faithful, in exercising their rights, must also "take into account the common good of the Church, the rights of others, and their duties toward others" (c. 223, §1).

Thought should be given to the possibility of using televised or simulcast liturgies as a way to better include the homebound.

Preaching and Praying

To preach and offer public prayer during an event like a pandemic is a daunting responsibility. In no way can we "prescribe" exactly what words ought to be said. However, we would like to offer the following for your consideration:

First, we preach and pray out of our own experiences—and we have all experienced loss. It is natural to expect that our past experiences of grief will affect what we say when we are

called to minister to those who grieve. Grief is never “resolved”—but our experiences of loss become part of us. This work of integration can take time and effort; and, unfortunately, many of us choose to bury these issues and never process them constructively. Failing to do so, our own disintegrated grief can negatively impact our ability to minister. Therefore, as a first step, it would be helpful in preparing for a pandemic to review our own histories of loss and to be intentional about integrating those losses into our lives. All are encouraged to seek professional assistance if needed. See Appendix F for resources. Second, we also preach and pray out of our theology. When it comes to questions of death and suffering, what is it that we believe about the final things (eschatology) and about the reality of evil (theodicy). Careful reflection and discussion of these matters may be another helpful preparation before a pandemic. Some beneficial texts are listed in Appendix F.

These two suggestions may seem abstract or remote. However, allow us to suggest that taking a careful look at these questions or issues will not only benefit you in the case of a community-wide disaster such as a pandemic, but it will positively impact your ability to minister in the much more common situations of grief that you encounter in your ministry.

Finally, it is probably important to comment (at least in a general way) on what ought—and ought not—to be said: First, suffering is real; that reality ought to be acknowledged and not minimized. The lament psalms and the spirituals born of the African-American experience, for example, do that very well. Second, those suffering are looking for comfort and hope—not an explanation or theodicy lesson. When we stand with those who suffer, we stand before mystery—a mystery that, in the end, can only be lived out in the shadow of the Cross.

We in no way can speak for God, or blame God as a cause of suffering—either as punishment or testing or for our benefit. The God of life does not will death, or the destruction of what God has made. Likewise, we cannot say that something did—or did not—happen because of our prayers.

For example, as we have seen in recent times, there are those who will use natural and human-made disasters to scapegoat those whom they see as ungodly. We have heard of individuals who have taken “credit” for saving their communities through prayer. Such language is both contrary to the nature of God and grossly presumptuous on the part of the speaker. Words must be used with care: even to ask God to “spare” us may imply that God is the source of the pandemic or crisis. While it may be true that in our suffering we can grow spiritually, such an approach to suffering cannot be forced. It must be remembered that claiming that good may come from suffering is not the same as claiming that suffering is sent for our “good.” Implicit in the latter is the belief that (a) we know with complete certainty how and why God acts, and (b) that God is the source of suffering (evil). If a sufferer is to find “good” in their experiences that is a grace—and certainly cannot be imposed. Standing at the Cross, we find a God who is filled with “com-*passion*”; a God who “suffers-with” us. It is this God, revealed in the paschal mystery of Christ Jesus, that we are called to preach—by word and deed—especially in the face of suffering.

Pastoral Care of the Sick

The obligation to care for the sick, the dying, and the bereaved seriously binds all clerics. Canon 213 states that “[t]he Christian faithful have a right to [receive assistance from the sacred pastors out of the spiritual goods of the Church, especially the word of God and the sacraments.]”

At the same time, it is to be acknowledged that fulfilling this serious obligation does itself put the cleric at risk for influenza and its complications, including death. It is also to be noted that in no current government plans are clerics or lay volunteers serving the sick mentioned on the list to receive vaccines or anti-viral medications.

As noted in the summary to “Pastoral planning for a flu pandemic” of the Archdiocese of Lancaster, England, “[i]f all the clergy attempt to run parishes and provide pastoral care among those with ‘flu, there is a high probability of two things happening: 1) All the clergy will become

sick; 2) The clergy—either during the incubation period or not showing symptoms—will infect members of their community.”

Therefore, as outlined in this policy, it would be prudent for each deanery to plan on naming at least 2 priests and, if available, at least 2 deacons to care for the sick in the event of a pandemic. Caring for the sick and dying, the dead and bereaved, would be their *only* duties. Other clerics in the deanery would cover the usual pastoral duties of these dedicated clerics.

Lay persons could certainly partner with clerics in exercising this ministry. However, while the clergy have an obligation (see c. 1003, §2) to assist the sick and dying, it would be strictly voluntary for the laity to put themselves and their families at risk by offering to assist in the care of those suffering from pandemic flu.

It should be noted that not every person has the gifts or disposition to care for the sick while putting themselves at risk. Therefore, in accepting volunteers for such a ministry requires discernment. To assist in such discernment, it may be helpful to ask potential volunteers—cleric or lay—to describe themselves as “willing to accept the risk,” “willing to accept the risk if others are not available,” or “unable or unwilling to accept the risk.”

Care of the Poor

It is likely that the poor will be among the hardest hit should a pandemic develop. For example, living on a limited income allows little buffer to use for stockpiling necessities. Therefore, in their planning, parishes, schools, and all archdiocesan entities ought to ask the question: How will we respond to those in material need in the midst of a pandemic?

Thought should be given to developing larger stockpiles of food, toiletries, and over-the-counter medicines that can be accessed by those-in-need, and even to providing housing for the poor who are ill and without other resources.

In addition, thought should be given on how to assist those who live alone and those who are single parents. While no one wishes to contemplate such things, there may be an increase in the number of orphans after a pandemic, and planning should take their care and welfare into consideration.

Summary

A summary of the archdiocese’s policies regarding liturgy and pastoral care in regards to preparing for and responding to pandemic influenza can be found in Appendix G.

9. Schools

Local schools/parishes play an integral role in protecting the health and safety of their staff, students and their families. This document is designed to provide guidance to schools concerning pandemic influenza. It is important that you periodically (at least quarterly) review this material and the Crisis Management Plan to maintain familiarity and for any updates. These documents should be review by school advisory council/faith formation committees yearly. It is also required that this plan be reviewed with all of your staff each fall and that they have a copy of what pertains to their area of ministry.

A school plan to respond to pandemic influenza is required by the State of Colorado. This document is intended to assist schools meet that requirement.

The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed a checklist to assist parishes and schools in developing and/or improving plans to prepare for and respond to an influenza pandemic; we have built on that checklist—and that document is available on the archdiocesan website (see Appendix D).

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency

plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities <http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf>).

We thank you for the time and effort that you will expend on this matter. It will have a positive impact on our students, families, staff, and entire community.

No matter the crisis situation, the following three principles must always be observed:

1. Your safety and the safety of our children is the highest priority.
2. Remain calm and reassure the children.
3. Follow the policies and procedures, but in all cases use common sense.

Please note that the policies regarding liturgical practices in PART TWO and PART THREE below apply to liturgies in school and faith formation programs as well.

A summary of the archdiocese's policies regarding schools and faith formation programs in regards to preparing for and responding to pandemic influenza can be found in Appendix H.

POLICIES RELATING TO PLANNING FOR PANDEMIC INFLUENZA PART TWO: PROTOCOLS BY PHASE/STAGE

1. U.S. Stage 0 / WHO Phases 1-2

Policy – II.1.

Archdiocesan, parish, and school leadership are to review existing policies, and begin planning. Special attention is to be given to issues of hygiene and to reminding individuals that those who are ill (with fever or other flu-like symptoms) should stay home.

At this stage, no new influenza virus subtypes have been detected in humans, but are circulating in animals. The focus of this stage is on planning and on reinforcing proper hygienic practices.

General Procedures:

- a. Archdiocesan, parish, and school leadership review existing policies dealing with infection control and archdiocesan, parish, and/or school preparations for a possible pandemic. It may be helpful to form a specific committee (including health professionals, such as parish nurses, physicians, pharmacists, etc.) to do this work, or may be the same committee called for in #4, *FEMA Incident Command System Nomenclature*, above. Necessary changes are made to local policies and practices, incorporating the items identified in #5, *Summary of Strategic Planning*, above.
- b. Parishes, schools, and archdiocesan offices should post signs in washrooms reminding individuals of proper hand washing techniques and of “cough-etiquette” (how to minimize spread of infection). See Appendix I. In addition, other means (e.g. bulletin articles or inserts, newsletters, e-mails) are to be used to remind individuals of proper hygiene and its importance. Example bulletin information and signage is found in Appendix J.
- c. Parishes/schools and archdiocesan offices are to have bottles of alcohol-based hand sanitizer (minimum of 62% alcohol; kills 99.9% of most common germs) available for staff and students. For example, these may be placed in office, and classrooms. See Appendix I.
- d. All are to be reminded that if they are ill (with fever or flu-like symptoms), they ought to stay home. In addition, ear thermometers with deposable specula could be made available to all parishioners.
- e. Those taking communion to the sick, visiting the homebound, or caring for a sick individual at a school, parish, or office, are reminded to wash their hands both before and after visits. For example, ministers to the sick may choose to carry a small bottle of alcohol-based hand sanitizer with them.
- f. As part of planning for the possibility of a pandemic, or other disaster, parishes must take into consideration what they would do in the absence of a priest—not only administratively, but also liturgically. Likewise, parishes must take into consideration what they would do in the absence of the program administrator, teachers, catechists, or support staff.
- g. Parishes and schools are to review their current housekeeping practices. If not already doing so, parishes/schools are to ensure that door handles and flat surfaces in all common areas (water fountains, lunchroom, restrooms, classrooms, gym, etc.) are washed each day (schools: several times each day) the space is used with an appropriate disinfectant.

- h. Parishes and schools should review their current communication practices, and find ways to improve on communications within the parish. For example, websites could be established and/or upgraded.
- i. The liturgical practices called for below (Specific Procedures: Liturgical-Pastoral) are to be followed in all school chapels as well as parish churches.
- j. Parishes should begin the process of securing all the necessary supplies it will require to implement this plan in each and all of its subsequent phases. Waiting to secure supplies at a later stage may prove fruitless due to increased demand.

Specific Procedures: Catholic Pastoral Center.

- a. The standing committee to prepare policies for the archdiocese, parishes, and schools regarding planning for pandemic influenza is convened.
 - i. The director of communications will establish appropriate means of communication that will be used to keep the archdiocese and Catholic Pastoral Center staff informed.
 - ii. The superintendent of schools will review and prepare policies relevant to schools.
 - iii. The director of liturgy will review current liturgical practices and prepare norms to be enacted in preparation for and in the event of an outbreak of pandemic influenza.
 - iv. The chief financial officer will be charged with preparing personnel and fiscal policies that would go in effect in the event of a pandemic.
- b. The safety officer is charged with preparing the Catholic Pastoral Center building itself for pandemic influenza

Specific Procedures: Liturgical-Sacramental-Pastoral.

- a. All ministers of Holy Communion, ordinary and extraordinary, are to be reminded of the importance of proper hand washing before and after distributing communion, and of proper technique to be used in distributing communion. This may be done in formation sessions or by written memo.
 - i. The person responsible for preparing the gifts before Mass is to be reminded to carefully wash his or her hands prior to touching the hosts and pouring the wine. If ill, a substitute should be found.
 - ii. Parishes are to have bottles of alcohol-based hand sanitizer available for EMOC's. For example, these may be placed in the front pews (or other discreet but convenient place) for EMHCs to use on their way to the sanctuary and after ministering communion. See Appendix I.
 - iii. All ministers of Holy Communion are reminded to wash their hands properly before the beginning of Mass. In addition, a bottle of hand sanitizer is to be placed at the credence table (or other discreet but convenient place) for the ordinary ministers to wash their hands after the sign of peace.
 - iv. Ministers are to use proper technique in distributing communion. For example:
 - AA. Care must be taken not to touch the mouth, tongue, or teeth of a communicant wishing to receive communion on the tongue. For example, if there is any significant accidental contact, ministers should change the hand with which they are distributing communion. If there is gross contamination, the minister is to go wash his/her hands.
 - BB. When ministering the chalice, ministers must take care to wipe both the inside and outside lip of the chalice, to turn the chalice before the next person receives, and to move the purificator for each wipe so the same location on the purificator is not used over and over.

- CC. Ministers are reminded that self-intinction is not allowed.
 - DD. In some parishes, ministers are used to making brief contact with the communicants' hand while placing the Host on his/her palm. In some places it is also the practice to bless non-communicants. In both instances, the minister should refrain from all physical contact.
 - v. The person responsible for the care of the vessels after Mass is to ensure that they are properly cleaned. After being purified according to the rubrics, the sacred vessels should be washed with hot, soapy water.
 - vi. Purificators are also to be laundered according to liturgical norms. After soaking in water (which is then poured into the sacrarium), the purificators are laundered normally. Hot water and laundry detergent should be used.
- b. While there has never been a documented case of an infectious disease being transmitted through the sharing of the chalice, the congregation ought to be regularly reminded (in the bulletin, by announcement, or in formation sessions—such as RCIA, preparation for First Communion, or adult formation groups) that if one is ill with a fever he or she should stay home, or at least refrain from the Cup. They are also to be reminded that self-intinction is not allowed.
 - c. Parishes are urged to ensure that there are properly trained lay leaders of prayer available. In an emergency, these individuals may be called upon to lead *Sunday Celebrations in the Absence of a Priest*, funeral rites, and in extreme situations even the extraordinary forms of baptism and, very rarely, marriage. See Policy II.5 below.
 - d. Changes to communion practices mandated in the event of a pandemic may especially affect those with Celiac Disease (gluten-sensitive enteropathy), for example, when communion from the Cup is no longer possible. Pastors are urged to discuss options with their parishioners with this condition—such as the use of extremely-low gluten hosts or even the consecration of a separate chalice for the affected parishioner's communion. The Office of Liturgy is available to assist in this delicate pastoral matter.

Specific Procedures: Schools and Faith Formation Programs.

Parishes/schools are urged to ensure that there are properly trained substitute teachers/catechists available.

2. U.S. Stages 0-1 / WHO Phase 3

Policy – II.2.

The archdiocese is to provide updated information and education for the clergy, parish leadership, and the faithful. Specific planning for a possible pandemic begins at the archdiocesan, deanery, and parish levels. The following procedures are followed:

At this point, human infections with a new influenza virus have taken place overseas. The infections are spread from animal to human; there are either no (Stage 0) or very rare (Stage 1) cases of human-to-human transmission.

General Procedures:

- a. The archdiocese updates the clergy regarding current risk and any changes to archdiocesan policy.

- b. Archdiocesan offices prepare and distribute resources to be used in case of a pandemic (for example, a home prayer book to be used in case of quarantine, prayer and catechetical materials for children, etc.).
- c. Planning at the Catholic Pastoral Center, parishes, and schools should take into consideration the following:
- i. **Self-care.** Individuals should ensure proper diet, hydration, rest, and activity in preparation for and during a pandemic. Those who are stressed and overworked will be more susceptible to infection. People are encouraged to take a multi-vitamin daily; those with chronic health problems should seek their physician’s advice before beginning any new medication—including vitamins.
 - ii. **Staff reduction.** Presume that at the peak 40% of staff will be absent. Prepare appropriate personnel policies to cover sick leave during a pandemic. Be aware that archdiocesan and parish/school leadership, including the archbishop, may be unavailable due to quarantine, illness, or death.
 - iii. **Material needs.** The Catholic Pastoral Center and the parishes/schools of the archdiocese should begin to store necessary supplies. At the peak of a pandemic, there will likely be a disruption of infrastructure sufficient to prevent easy access to needed materials, or quarantine. At minimum a three-week supply of the following should be stored and rotated:
 - medicines for flu symptoms (for example: aspirin [consult physician for use in children under 16 years old], acetaminophen, ibuprofen, sore throat and cough lozenges, and anti-diarrheals);
 - masks and gloves for pastoral visits and caring for the sick; (see Appendix I)
 - sanitary materials (cleansers, bags, tissues, toilet paper, paper towels, etc; see Appendix I)
 - alternative sources of heat in case of utility disruption.
 - materials needed for the sacraments (wine, hosts; olive oil to bless for Oil of the Sick); It is important to stress that food, bottled water, and medications do have expiration dates. Materials from the stockpile should be used and replaced on a regular basis (“replace and rotate”) and expiration dates closely watched to prevent the problem of outdated supplies. As applicable, kitchen staff and visiting/parish/school nurses should be consulted in this process.
 - iv. **Finances.** In an outbreak of pandemic flu, stresses on infrastructure may make the use of ATMs, credit cards, or even checks impossible. Therefore, pastors/administrators should have in place approved procedures for the payment of bills and other expenses.
 - v. **Education of staff and all members of the archdiocese.** Parishes and schools are uniquely positioned to provide updated and accurate information to the community, especially groups for whom English is a second language. This education can take place via signage, handouts, bulletin inserts or articles, pulpit announcements, or group sessions. (See Appendix J.) In preparing materials, the archdiocese will keep in mind those groups for whom English is a second language.
 - vi. **Pastoral Care.** During a pandemic, those in quarantine or otherwise homebound will need particular care, ranging from phone or e-mail contact, to the provision of meals and other supplies. Parishes/schools should begin planning for such ministries. School or parish nurses, if available, ought to be involved in this planning. Those involved in making pastoral visits to the ill or homebound are to be reminded of the importance of proper hand washing before and after each visit and encouraged to carry hand sanitizer with them.
- It is likely that the poor will be among the hardest hit should a pandemic develop. For example, living on a limited income allows little buffer to use for stockpiling necessities.

Therefore, in their planning, all archdiocesan entities ought to ask the question: How will we respond to those in material need in the midst of a pandemic? Thought should be given to developing larger stockpiles that can be accessed by those-in-need, and even to providing housing for the poor who are ill and without other resources. In addition, thought should be given on how to assist those who live alone—or those who are single parents. While no one wishes to contemplate such things, there may be an increase in the number of orphans after a pandemic, and planning should take their care and welfare into consideration.

- vii. **Communication.** Communication with local public health authorities and the archdiocese will be crucial in the event of a pandemic. Plans should be developed to ensure that the lines of communication within and among archdiocesan entities (parishes, schools, deaneries, and the Catholic Pastoral Center) as well as with governmental structures remain open and are enhanced as needed.
- viii. **Travel.** Archdiocesan, parish, and school leaders are to be aware that international travel, as well as travel within the U.S., may become restricted. CDC travel warnings are to be heeded. Those responsible for planning trips should look into the issue of travel insurance should a trip need to be cancelled, and for what options would be available if restrictions are imposed while the group is overseas.

Specific Procedures: Catholic Pastoral Center.

Planning at the Catholic Pastoral Center level should take into consideration the following:

- a. Housing for priests.
- b. The Catholic Pastoral Center staff will assist deaneries, parishes, and schools with their planning.
- c. Material needs. The safety committee is charged with beginning to store necessary supplies.
- d. Finances. The archdiocese should prepare for a significant reduction in income during this period.

Specific Procedures: Liturgical-Pastoral.

- a. Planning at the deanery level should take into consideration the following:
 - i. Housing for priests. In the event of a pandemic, priests living together should be separated in order to lessen the risk of infection. Parishes are to make unused rectories available for housing displaced priests, and deaneries should prepare a housing plan now. Any necessary adjustments needed to the buildings, as well as the preparation of supplies, should then proceed.
 - ii. Care for the Sick. If all the clergy try to both care for their parishes and care for all the sick and dying during a pandemic, there is great likelihood that all the clergy will either become ill (and may die) and/or they will serve as carriers and spread the infection through the community. Therefore, it is recommended that in each deanery at least 2 priests and at least 2 deacons (if available) be given the *sole* responsibility to care for the sick and dying, and of burying the dead, during an outbreak of pandemic flu. This ministry should be undertaken on a volunteer basis. If any of these become ill or succumb, the next names on the list would rotate in. These clerics should live separately from others, in order to prevent cross-infection. In their absence, the other priests and deacons of the deanery would cover their other pastoral duties at the parish. Lay persons may also volunteer for this ministry.
 - iii. Houses for the Sick. It would be prudent to consider making one of the larger rectories in the deanery into a “house for the sick” to provide care for clergy who have fallen ill.
- b. Planning at the parish level should take into consideration the following: Parishes should prepare for a significant reduction in income during this period—due to self imposed

isolation, official quarantine, loss of income, and illness or death. Therefore, in their stewardship planning, parishes ought to discuss or consider the following:

- reminding parishioners that even if they are away, for example, on vacation, the parish relies on their regular contributions
- suggest the possibility of monthly or even yearly contributions
- explore the positives and negatives of “direct deposit” contributions

Specific Procedures: Schools.

- a. The Office of Catholic Schools will assist schools and faith formation programs in the preparation of resources to be used in case of a pandemic (for example, lesson plans and catechetical materials for children, as well as home prayer resources). See Appendix A for Internet-based resources and Appendix K.
- b. Planning at the parish/school level should take into consideration the following: Parishes/schools should prepare for a significant reduction in tithing and/or tuition income during this period—due to self-imposed isolation, official quarantine, loss of income, and illness or death. Therefore, in their stewardship planning, parishes/schools ought to discuss or consider the following:
 - reminding parishioners or families of students that even if they are away, for example, on vacation, the parish/school relies on their regular contributions or payments
 - suggest the possibility of monthly or even yearly contributions or payments -explore the positives and negatives of “direct deposit” contributions or payments.

Schools should develop a written policy regarding what response will be made if there are delinquent or tardy tuition payments in the wake of a pandemic.

3. U.S. Stage 2 / WHO Phases 4-5.

Policy – II.3.

The archdiocese, deaneries, and parishes are to ensure that all resources and protocols are in place for a pandemic. The archdiocese will assist in keeping clergy and parishes informed. The following procedures, focusing on local preparation and planning are to be followed:

At this point, there is a confirmed human outbreak overseas. Given the realities of international travel, the risk for pandemic is substantial.

General Procedures:

- a. Review and update existing plans and protocols at all levels (parish/schools, deanery, archdiocese).
- b. Remain alert for changes in the situation.
- c. Complete any tasks from Stages 0-1 that remain undone.
- d. Heed mandates from public health authorities.

4. U.S. Stage 3 / WHO Phase 6.

Policy – II.4.

The archdiocese, deaneries, and parishes are to ensure that all resources and protocols are in place for a pandemic. The archdiocese will assist in keeping clergy, parishes, and schools informed. The following procedures, including preliminary isolation procedures, are to be followed:

At this point, there is a confirmed human pandemic overseas, with increased and sustained transmission in the general population in multiple locations. Given the realities of international travel, the risk for infection spreading to the United States is almost inevitable.

General Procedures.

- a. Review and update existing plans and protocols.
- b. Remain alert for changes in the situation.
- c. Complete any tasks from Stages 0-2 that remain undone.
- d. Heed mandates from public health authorities.
- e. Remind archdiocesan staff, clergy, and parish/school communities as to what steps will be taken in the event of pandemic influenza in Stages 4 and 5. It is crucial that everyone be prepared for what to expect in the event of a pandemic.
- f. All sick individuals, including clergy, are to stay home. Signs are posted on Catholic Pastoral Center, church, and parish/school doors instructing those with fever or other flu-like symptoms not to enter. See Appendix J.
- g. Bring stockpiles up to levels that would allow for at least three weeks of activity without restocking (see 2.c.3).

5. U.S. Stage 4 / WHO Phase 6.

Policy – II.5.

The archdiocese, deaneries, parishes, and schools are to ensure that all resources and protocols are in place for a pandemic. The archdiocese will assist in keeping clergy, parishes, and schools informed. The following procedures, focusing on personal hygiene and social distancing, will be implemented if public health authorities determine the severity of the influenza warrants them.

(Stage/phase where distinction is made between general awareness and preparedness and specific responses.)

At this point, pandemic influenza has spread to North America, making infection in this country inevitable. More specific interventions to be taken at this point are highly dependent on the advice/mandate of public health authorities.

General Procedures.

- a. Heed all mandates from public health authorities.
- b. Buildings
 - i. In addition to signage called for in Stage 3, post signs describing what practices are in effect. Include information in newsletter, bulletin and, if applicable, on website. Announce practices from the pulpit. See Appendix J.
 - ii. Turn off water fountains or mark them as not to be used. Bottled water should be available in case of necessity. Schools are required to supply bottled water.
 - iii. Empty holy water fonts; parishes should have pre-filled bottles of holy water available for parishioners to take home.
 - iv. Set up hand-washing stations: tissues, trash receptacles, hand sanitizer, instructions (signage).
 - v. Staff or volunteers to clean door handles and other hard surfaces (such as pews, water fountains, desks, tables, countertops washrooms) with disinfectants; to wear masks, gloves, and goggles when doing so and when emptying trash receptacles.
 - vi. Disinfecting should be done in parishes and chapels at least daily if not after each Mass.
 - vii. Disinfecting should be done in schools and faith formation programs after each class transfer.
 - viii. Available supplies are assessed daily by maintenance, kitchen, and office staff. Supplies are replenished 3 times per week.
 - ix. Large group meetings should be postponed if at all possible. If not, participants should be seated with at least a 3' distance between individuals.
- c. The changes to liturgical practice called for below are implemented at the Catholic Pastoral Center and at schools as well as in parish churches.
- d. Parishes, deaneries, and schools are to keep the archdiocese informed re: status of their preparations and their communities. The Catholic Pastoral Center is to review the information submitted.
- e. Pastoral Care to the Sick
 - i. Activate plan to care for those who are quarantined or home-bound, such as regular phone or e-mail contact. Coordinate with parish/school nurse(s) and other outreach ministries.
 - ii. Be aware that persons who come in contact with those who are ill, including pastoral caregivers, may themselves become quarantined or incapacitated.
- f. Reinforce hygiene practices and the use of personal protective devices, as applicable. (Appendix I)

Specific Procedures: Catholic Pastoral Center.

- a. Employees are asked to inform their immediate supervisor if they develop any flu symptoms. Immediate supervisors in turn on a timely basis are to inform the directors of their departments, and they in turn the moderator of the curia of the number of Catholic Pastoral Center developing flu symptoms.
- b. The operations section chief will verify that entities have been informed of each stage and procedures to follow.

Specific Procedures: Liturgical-Pastoral.

Specific liturgical-pastoral procedures may be mandated by the archbishop at this phase or any subsequent phase dependent on both the spread of an influenza virus and its severity. These

procedures are listed, but not limited to those delineated in *Part Three: Liturgical-Pastoral Protocols*, below.

Specific Procedures: Schools.

- a. If large groups are prohibited from meeting, parish and school administrators, with their staffs, should prepare and distribute catechetical or academic resources (for example, lesson plans and catechetical materials for children, as well as home prayer resources; see Appendix A for internet resources and Appendix K for archdiocesan resources).
- b. Social Distancing (it is recommended that a distance of three feet be maintained between all individuals)
 - i. Schools ought to use e-mail for attendance and lunch counts and configure classroom seating to maintain 3’ distance (e.g. every other desk, if possible)
 - ii. In order to maintain a recommended three-foot distance between persons, other large-group gatherings will need to be modified.
 - AA. Contact sports (competition and practice) will be suspended.
 - BB. Dances will be suspended.
 - CC. Retreats, youth rallies, and the like will be suspended.
 - DD. Plays, concerts, lectures/assemblies, and non-contact sporting events should be cancelled.

6. U.S. Stage 5 / WHO Phase 6.

Policy – II.6.

The archdiocese, deaneries, and parishes are to ensure that all resources and protocols are in place for a pandemic. The archdiocese will assist in keeping clergy, faith formation program administrators, and parishes informed. The following procedures, focusing on increasing social distance and providing pastoral care safely, will be implemented.

At this point, there is confirmed spread of human pandemic influenza in the United States.

General Procedures.

- a. Parishes/schools are to keep the archdiocese informed as to the impact pandemic influenza is having on their communities. If necessary, and if permissible, the archdiocese may request that resources be shifted to best respond to influenza outbreaks (for example, ask for volunteers to minister in a community that is particularly hard hit).
- b. The changes to liturgical practice detailed below apply to the Catholic Pastoral Center and to schools.
- c. Available supplies are assessed daily by maintenance, kitchen, and office staff. Supplies are replenished daily.

Specific Procedures: Catholic Pastoral Center.

- a. In addition to signage called for in Stages 3 and 4, if local or regional public authorities prohibit public gatherings the front door may be locked, in which case all visitors must call the switchboard to be admitted. The switchboard operator will inquire about flu symptoms (cough, fever) or contact with anyone with flu symptoms and deny admittance to those who

pose an infection risk.

- b. Large group meetings are cancelled.
- c. Personnel Policy Changes:
 - i. Employee ill: follow existing archdiocesan policy.
 - ii. Family ill: May continue to work at home. If unable or choose not to work at home, use sick leave, then accrued vacation leave, then a living wage (as defined by regional NACPA) and health insurance continuance for one month will be offered if possible. After all resources are used, family and medical leave may be used.
 - iii. Voluntary employee quarantine at home, travel restrictions by government authorities, archdiocesan offices closed: Continue to work at home. If unable to work at home, use accrued vacation leave, then sick leave, then a living wage (as defined by regional NACPA) and health insurance continuance for one month will be offered if possible.
- d. The operations section chief will verify that resources and protocols are in place.

Specific Procedures: Schools.

- a. The procedures mandated for Stage 4 remain in force, with the following adjustments:
- b. If public health authorities mandate that all large-group gatherings be suspended, schools and parishes will comply.
 - i. If large groups are prohibited from meeting, parish and school administrators, with their staffs, should prepare and distribute catechetical or academic resources (for example, lesson plans and catechetical materials for children, as well as home prayer resources; see Appendix A for internet resources and Appendix K for archdiocesan resources).
 - ii. If schools or faith formation programs are suspended, signage to that effect will be posted at entrances to the parish or school offices. See Appendix J.

7. U.S. Stage 6 / WHO Phase 1 (Post-pandemic).

Policy – II.7.

In the post-pandemic phase, church response will focus on (1) ministry to the bereaved and those suffering from the physical and psychological after-effects of a pandemic, (2) restoring normal functioning at the archdiocesan, deanery, and parish/school levels, (3) critiquing response to the pandemic and updating policies as needed, and (4) preparing for the next wave of the pandemic.

At this point, the pandemic is either between “waves” or has ended.

General Procedures.

- a. Guided by directives from local public health authorities, and from the archdiocese, a graded return back to pre pandemic practices begins. For example, once large group gatherings are allowed, the procedures for Stage 4 will continue in effect.
- b. Ministry to the bereaved and those suffering from the physical and psychological effects of the pandemic is the Church’s first priority. This priority includes ministry to those clerics and lay volunteers who were on the “front lines” during the outbreak. Referrals to specialized counseling should be made when needed.
- c. The archdiocese, deaneries, parishes, and schools will review their response to the pandemic.

The appropriate information / forms are returned to the Catholic Pastoral Center. (Appendix D) Policies will be updated accordingly.

- d. Preparations for the next wave of the pandemic take place, including replenishing stockpiles.

Specific Procedures: Catholic Pastoral Center.

Plans for reconstitution of the Catholic Pastoral Center are enacted.

- a. Reports from each parish, school, and deanery are reviewed (Appendix D)
- b. Archdiocesan, deanery, parish, and school response to the incident is evaluated within 10 business days of the declaration of Stage 6. Necessary policy changes are made and communicated to all constituents.
- c. The chief financial officer will prepare a report of the fiscal status of the archdiocese within 30 days of Stage 6 having been reached.
- d. Human resource needs are assessed.
 - i. Personnel Policies from Stage 5 remain in effect.
 - ii. Decisions regarding the need to shift personnel, to discontinue adaptations called for in Stage 5, or to begin hiring are made within 30 days of reaching Stage 6 and after (b) and (c) are completed.
 - iii. Preparations are made for any hiring that needs to be done. The question of waiving specific certification or other requirements is made on a case-by-case basis, and in accord with civil law.
- e. Needed supplies are purchased and stockpiles replenished.

Specific Procedures: Liturgical-Sacramental-Pastoral.

Once it is safe to do so, parishes are to celebrate memorial Masses for those who died in the pandemic. The Office of Liturgy will produce materials to assist with planning such liturgies.

Specific Procedures: Schools.

Schools and faith formation programs must be able to assist students and their families in accessing any specialized care that they may need to be able to integrate their grief. The Office of Catholic Schools will prepare a list of possible resources. It may be helpful to ritualize the mourning that students are experiencing. The Office of Liturgy will produce materials to assist with planning such liturgies.

POLICIES RELATING TO PLANNING FOR PANDEMIC INFLUENZA PART THREE: LITURGICAL-PASTORAL PROTOCOLS

Depending on both the spread of an influenza virus and its severity, the Archbishop of Denver may mandate the following protocols affecting the celebration of the sacraments and the liturgy. Additional protocols not listed here may also be mandated depending on the requirements of state and local health officials and the circumstances of local communities within the archdiocese.

1. Distribute archdiocesan home prayer booklet and other resources in case large group gatherings are suspended by public health authorities. See Appendix K.

2. Baptism

- a. Only immediate family members and godparents are to attend.
- b. There are to be no large group baptisms.
- c. Fresh water is to be used for each baptism, and then discarded properly afterwards. If more than one person is being baptized, the water is to be blessed in individual vessels and then poured over the candidate into the font.
- d. In case of a pandemic, there may be an increased number of requests for baptism, while, at the same time, clergy may be incapacitated. Therefore, in keeping with c. 861, §2, the faithful are to be aware of the special forms of the rite of baptism to be used in the danger of death or if in an emergency an ordinary minister is not available. The archdiocese will provide a booklet containing the extraordinary rites of baptism. See Appendix K.
- e. For the baptism of those less than seven years of age, the ritual Rite of Baptism for Children in Danger of Death When No Priest or Deacon Is Available (# 157ff) is to be used, and the lay minister is to ensure that the baptism is recorded at the parish after the pandemic resolves.
- f. For the baptism of those who are 7-years-old and older, the rite for Christian Initiation of a Person on Danger of Death is to be used (RCIA #375ff).
- g. The archbishop may grant permission for baptism to be celebrated in the home, at the discretion of the local pastor (c. 860).

3) Mass: Communion Practices²

- a. The person preparing wine and hosts for Mass is to wear a mask and gloves (see Appendix I). The vessels containing the bread and wine are to remain covered until placed on the altar.
- b. All communion ministers (clergy and lay) must wash their hands with an alcohol-based hand sanitizer immediately before and after distributing communion (and in the case of any direct contact with a communicant).

² Policies referring to Mass also apply to other liturgical gatherings (e.g., Word and Communion Services, the Liturgy of the Hours, Eucharistic Exposition and Adoration, etc.).

- c. Communion from the chalice may be suspended. Only the priest (and deacon [see GIRM #128], if present) are to commune from the chalice—and then from opposite sides of the cup. If concelebrants are present, they commune by intinction (source: USCCB/BCL).
- d. In distributing communion, the Host shall be placed in the communicant’s hand without the minister touching the communicant. The practice of touching a non-communicant for a blessing is also to be discontinued. Communion on the tongue is to be strongly discouraged and may be suspended all together (c. 223).
- e. After being properly purified (in order to prevent cross-contamination, this should be done by the priest or deacon who has already received from the chalice). All Mass vessels (chalices, patens, and ciboria) are to be carefully washed in hot, soapy water after each Mass.
- f. If public health authorities mandate that all large-group gatherings be suspended, parishes will comply and stop offering the Mass and other sacraments to groups. If such were to occur, the archbishop dispenses from the Sunday obligation to attend Mass.
- g. The archbishop by his own authority may also order the suspension of Masses and public celebration of the sacraments and other liturgical rites. If such occurs, the archbishop also dispenses from the Sunday obligation to attend Mass.
- h. If public celebration of the sacraments is suspended, signs to that effect will be posted at entrances to the church and parish offices. See Appendix J.

4. Mass: Other Practices

- a. Collection baskets are not to be passed. It is preferred that a collection basket or locked “poor box” be placed at the entrance(s) of the church; alternatively, baskets with handles may be used (in which case ushers are to wear gloves and immediately wash their hands after the collection). Because the influenza virus can remain viable on surfaces for some time, the money collected is to be “quarantined” for 3 days before being counted. Those removing money from the collection baskets or boxes are to wear gloves and wash their hands afterwards. The collection is not carried in procession as part of the preparation of the gifts and altar.
- b. Worship aids, if used, should be printed for each occasion and then destroyed. Applicable copyright laws ought to be followed. Missalettes and song books should not be used.
- c. Exchanging the Sign of Peace by handshake or hug is suspended; rather, a bow to one another will be used. Ceremonial hand holding during Lord’s Prayer or any other part of the Mass is suspended.
- d. To the extent possible, the assembly will be seated in alternating rows, thereby increasing distance between individuals. In addition, it may become necessary to limit the number of individuals present for any one Mass.
- e. Non-essential gatherings—such as Children’s Liturgy of the Word and post-Mass social gatherings are to be cancelled.

- f. Priests, deacons, readers, and servers—since they will be touching items in common—are to sanitize their hands before and after Mass, and during Mass if their hands become contaminated.
- g. On Holy Thursday the washing of feet is suspended. On Good Friday, the cross will be venerated by bow or genuflection, not by touch or kissing. In those places where it is the practice to venerate icons with a touch or kiss, that practice, too will be replaced with a bow.

5. Reconciliation

- a. The use of “box” confessionals may be suspended. A distance of 3 feet is to be maintained between penitent and confessor. The priest and penitent may consider wearing a mask. (See Appendix I) Hard surfaces in the room used for reconciliation, including the screen, are to be disinfected after each visit.
- b. In accord with c. 961, the archbishop may grant permission for Form III of the Sacrament of Reconciliation (“General Absolution”). Pastors are reminded that they are to instruct their parishioners that anyone who receives general absolution has the responsibility to confess grave sins (Form I) as soon as it is possible to do so. The appropriate rite from the Rite of Penance is to be used.
- c. The faithful should be instructed in how to make an act of perfect contrition in the event of danger of death, and the unavailability of a priest. Deacons and lay ministers should be instructed in how to assist individuals in making an act of perfect contrition while avoiding simulation of the sacrament of reconciliation. See Appendix K.
- d. The validity of the Sacrament of Reconciliation requires the bodily presence of both the priest and penitent. All are therefore reminded that phones, e-mail and other electronic media may not be used to celebrate the sacrament. In these situations, the penitent should be assisted in making an act of perfect contrition.

6. Pastoral Care to the Sick

- a. Activate plan to care for those who are quarantined or home-bound, such as regular phone or e-mail contact. Coordinate with parish nurse(s) and other outreach ministries.
- b. Gloves and masks mandated for pastoral visits, including for the Anointing of the Sick. (See Appendix I) Gloves smeared with oil are to be placed in a sealed bag and later burned or buried. In case of necessity, the priest may use a suitable instrument (e.g., a cotton-tipped swab) to anoint in order to avoid direct physical contact. In such cases, the instrument must also be disposed of by burning or burial.
- c. Tea Tree Oil is a natural germicidal that can and may be added to the Oil of the Sick (1 part Tea Tree Oil to 9 parts olive oil). By doing so, the risk of transmission associated with touching the sick person is significantly decreased. See Appendix I.
- d. Be aware that persons who come in contact with those who are ill, including pastoral caregivers, may themselves become quarantined or incapacitated.
- e. Those ministering to the sick should plan on removing street clothes immediately upon returning home. The clothes should be handled with gloves and washed immediately. The minister should then shower/bathe before having contact with others.

- f. While the anointing of the sick is usually reserved to the pastor, it is also true that “for a reasonable cause” another priest can anoint the sick “with at least the presumed consent” of the pastor (c. 1003.2).

Likewise, canon 911 reserves Viaticum to the pastor or clerical religious superior of a place. In case of necessity, another priest, a deacon, or an EMHC may celebrate the Rite of Viaticum (with the presumed or explicit permission of the pastor or clerical religious superior). See Appendix K.

7. Weddings

- a. In case of a pandemic, there may be an increased number of requests for weddings, especially if there is danger of death. Clerics are reminded that the civil requirement of a wedding license is not waived. In the State of Colorado it is illegal to enter marriage without a license, and the officiant and parties are subject to legal penalties.
- b. Only immediate family and witnesses are to attend. Clergy are not to attend related social functions; parishes are not to host receptions.
- c. In extreme circumstances (e.g. danger of death, the expected absence of an ordinary minister for over a month), canon 1116, §1 allows for an extraordinary form of marriage before witnesses only. Recourse to such an option should not be made before exhausting all possibilities of having an ordinary minister present, and then only after contacting the pastor or vicar general.
- d. The above, of course, presumes the freedom to marry and that there be no canonical impediment to marriage.

8. Funerals

- a. Pastors of souls should be aware that there could be an increased need for funeral services and pastoral care to the bereaved. At the same time clergy and other ministers may be among those quarantined or those who succumb to the pandemic.
- b. In order to assist them in their pastoral care to the dead and the bereaved, ministers are to familiarize themselves with the options available in the *Order of Christian Funerals*. In addition, a shortened funeral rite for use during this phase of the pandemic will be prepared (see Appendix K).
- c. The liturgical celebrations may need to be altered, both to prevent spread of influenza and because of time and energy constraints:
 - I. The funeral vigil may be omitted, or the time at a vigil shortened, in order to prevent prolonged group gatherings.
 - II. The Funeral Liturgy outside of Mass should be used.
 - III. The Rite of Committal is used (outdoors if possible) with the funeral liturgy or by itself.
 - IV. Priests should make use of deacons and lay parish administrators (who may preside over the vigil, funeral liturgy, and rite of committal) and trained lay leaders of prayer (who may preside over the vigil and rite of committal) in order to prevent becoming overwhelmed (see OCF #14).

- d. Only immediate family members are to attend funeral liturgies. Plans for memorial Masses after the pandemic resolves should be made. A specific date should be set as soon as possible and publicized.
 - e. Depending on public health directives, it may not be possible to gather for the funeral liturgy or at the graveside for the Rite of Committal. If the body is not present, the proper rites are used and adaptations made.
 - f. A record of those who die during the pandemic is to be kept, and memorial Masses offered once the pandemic has resolved.
 - g. Deanery-wide plans naming selected clerics to be responsible for ministry to the sick and dying and to move priests to individual housing should be developed and may need to be implemented. Deans should ensure that these ministers have a support network in place.
9. Parishes and deaneries are to keep the archdiocese informed as to the impact pandemic influenza is having on their communities. If necessary, and if permissible, the archdiocese may request that resources be shifted to best respond to influenza outbreaks (for example, ask for volunteers to minister in a community that is particularly hard hit).