One of the executives in the AMCL (Association of Mid Council Leaders) meeting, Lisa Allgood, is the transitional presbyter for Cincinnati Presbytery.

Most of her career was as an immunologist and she shared some of what she is both hearing from her former colleagues and from her own experience in the field. Here are some bullet points of what she shared:

**The Virus**
- We are going to at some level until we have a vaccine which is 18-24 months out;
- Part of what scares the medical community is that they still don’t understand how the virus operates and how it mutates.
- They have concerns that this virus is acting like the Spanish Flu virus that mutated and had a much more lethal second wave;
- There are signs that it is mutating and affecting younger people in different ways than older people affecting the brain and causing strokes rather than affecting the lungs;
- The good news is that this is a slow mutating virus;
- They believe that somewhere between 25%-90% of the people who get COVID-19 are completely asymptomatic;

**Singing**
- The safest thing to do in worship to have “no choirs” for the next two years;
- If you do have singing consider duets and a plastic shield in front of singers;
- A cough transports the virus 12’-15’. A singing voice transports the virus up to 20’;

**Public Services**
- If you hold services gloves and masks should be required;
- Consider holding multiple services in order to hold the number of worshipers down;
- Don’t have materials remaining in the sanctuary: Bibles, Hymnals, papers, pencils, etc.
- Don’t hold fellowship or coffee hour. Don’t do anything with food
- Don’t pass communion or offering plates;
- If possible, have dedicated cleaners to disinfect bathrooms;
- Use the six foot rule in bathrooms having marked standing spots in the hallways;
- Don’t use air conditioners;
- Try to keep windows and doors open;

Lisa realized that so much of this will be really difficult and every presbytery and session will need to make decisions that are best for them and follow government guidelines. But as an immunologist these were the things that she felt we needed to hear. **For now these should not be heard as recommendations, but as a preview of what may be coming.**

- Brian Heron, Presbyter for Vision and Mission for the Presbytery of the Cascades