

KT Programming

Proposal: KT recommends no in-person programming, including small group sessions, such as seder matching

Background: The medical guidelines right now are for social distancing, allowing for small group (<250 people) gatherings. My medical opinion is that 250 is too many people, but groups ~10 with 6' between people are appropriate risk mitigation. However, the current social media culture is towards #canceleverything, and much of our synagogue is in that boat.

Example of current programming (http://www.kol-tzedek.org/community-online.html):

This week:

- Wednesday, March 18:
 - 9:00pm Parent/Caregiver Check-in with Rabbi Michelle (ongoing)
- · Thursday, March 19:
 - 10:00am Zoom Torah Games with Rabbi Michelle (for ages 5 and up)
 - 12:00pm Lunch n' Learn with Rabbi Ari Lev: Developing a Personal Prayer Practice
- Friday, March 20:
 - 10:00am Alef Bet Yoga and Stump the Rabbi with Rabbi Ari Lev (for ages 3 and up)
- Saturday, March 21:
 - 8:00pm Havdalah and Dance Party with Rabbi Mónica
- Sunday, March 22:
 - 10:00am Queer Torah Study with the LGBTQ Havurah

Digital Prayer Books (PDFs):

- Kol Haneshamah Daily Prayerbook
- Kol Haneshamah Shabbat Vehagim

KT Morning Minyan:

Monday and Thursday @ 7:30am

KT Long-term planning (non-medical)

Proposal: Discuss budgeting with KT treasurer; and start to have her work on projections for different scenarios outlined below

Background: Because of the long period of illness from COVID19, we should expect months of social distancing. If we succeed at "flattening the curve" that strategy (intentionally) extends the pandemic. CDC leaked worst case projections suggest up to one year, which I agree seems plausible. What plans do we need to put in place that will sustain us? Financially: how long can we continue to pay hourly employees if (A) current income remains stable, (B) dues drop off due to economic hits by various amounts (C) and also decreased income from in-person events. (D) how can we make the online program the most long-term financially viable

KT Long-term planning (medical)

Proposal: Clergy develop plans about chaplain work, bereavement

Background: We are in a mitigation, rather than containment phase. We still estimate a CFR of ~1% with a worst case scenario of 214M infected americans = 2M deaths in the US. If correct, KT members will get sick, be hospitalized & even die and KT members will lose relatives, especially parents & grandparents. This will likely happen in clusters, and during times of increased or even mandatory social isolation. We need a plan for how to support these individuals and also how to react as a community to communal grief.

KT Long-term planning (contingency)

Proposal: Develop clear backup plans for all essential KT personnel

Background: We are in a mitigation, rather than containment phase. Current estimates are that 66-75% of Americans will get infected. At median KT age, that is likely a mild infection that will not require hospitalization, but we should do some amount of disaster planning for what would happen if core KT personnel were out of commission for 2-4 weeks.

Active question / concerns / planning underway:

- Does livestreaming Shabbat practice feel different bw zoom & facebook live...open v. closed circuit?
- Virtual Hesed / Mi sheberach list
- Virtual seder matching...maybe hybrid with one large community seder
- Collect list of mental health providers in the community
- With many of the executive and general board working as active medical personnel, what is our contingency plan should they become sick or are called into more active medical service that makes shul governance out of scope?

Redundancy of information -- Rowan? Who has insurance info? Legal consequences DOH contact info -- Stefan?