

Ringling and COVID-19

What are the risks and what might we do about them?

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This document seeks to provide information and advice for ringers and those responsible for bell towers regarding Coronavirus Disease 2019 (COVID-19) and what issues ringers and church authorities should consider in responding to changes in Government guidance as we start to ease the current lockdown. It is focused on the situation in the Church of England, which is responsible for the vast majority of churches with bells hung for ringing. While the specific advice from leaders of other churches and in other countries may vary, the basic issues for ringers and ringing are the same wherever we ring.

I am acutely aware of the importance of ringing as a hobby for many ringers. For many it is a way of life and the enforced period of abstinence from ringing has caused a great deal of frustration and unhappiness. Any return to ringing, when allowed by Government and church, will nevertheless need to take full account of the severity of COVID-19 and accept that, for the time being at least, a complete return to “normal ringing life” is unlikely to be possible for some significant time.

To stimulate discussion and hopefully bright ideas, I have throughout the text given ideas of what we might do to reduce risk (and hence items of potential guidance) are shown throughout the text in numbered and highlighted **bold text**.

This article is to get people thinking and to explain quite what a complex and very difficult situation surrounds ringing. NONE OF THE SUGGESTIONS CAN BE IMPLEMENTED AT PRESENT BECAUSE THE CURRENT SITUATION FOR RINGERS IS UNCHANGED. Following the House of Bishops meeting on May 5th the instruction is that just one “appointed person” (usually one of the clergy, or else a single churchwarden or member of the PCC) may enter a church for one of four limited reasons including daily prayer and the ringing of a single bell. It does not allow clergy to get a ringer to do that for them – unless that ringer is the churchwarden or PCC member who will also say daily prayers and deal with the other limited reasons. That means no team ringing at present.

The latest guidance should always be available at

<https://www.churchofengland.org/more/media-centre/coronavirus-covid-19-guidance-churches> and the document *Access to church buildings during lockdown: advice for incumbents*, which may be accessed from that site, is constantly reviewed and updated and contains other specific guidance on bells as well as other matters.

If at any time Government or church guidance prohibits or limits an activity then that guidance **must** be followed. We need to remember that we may only ring within the law and church guidance even if we don't always like it. However, we need also to remember that ringing rooms are unlike the rest of the church in several respects so there may be times when what is safe elsewhere in a church building is not safe in the tower. Ringers cannot be forced to ring in a less safe environment.

The developing pandemic in the UK and other countries was got into check only with the

draconian measures that we have all experienced. The disease has not gone away but the major restrictions on our lives have limited the virus's chances to spread. We need to find other ways to limit its spread and to reduce the risk to ourselves and others until there is either a vaccine or an effective treatment.

The ways to stop the virus spreading and causing severe illness fall into three categories:

- Strict hand hygiene
- Maintaining a safe distance between adjacent people
- Limiting the numbers of people with whom one interacts.

The enemy: Coronavirus

Everyone has seen and heard so much about the disease COVID-19 that there should be no need to repeat all of the information here. The coronavirus that causes COVID-19, is a new virus named SARS-CoV-2, and there are still major gaps in scientific knowledge about it.

The most important things for ringers in particular to know about COVID-19 are:

- It spreads through droplets from sneezes and coughs
- These droplets can land on any surface and survive there for periods of up to 72 hours
- Our chance of inhaling virus depends on distance from the source and the time we spend near that source
- We can easily pick up the droplets on our hands and carry them to our own face, or move them to another object from which someone else might pick up the virus.
- It has a far longer incubation period than influenza and while incubating the disease one can spread it to others
- There was no pre-existing natural immunity in the community
- As a result of all of the above, it's highly infectious – much more so than seasonal 'flu
- Sadly, the mortality rates are significant (the worldwide case fatality rate was 7% on May 6th) with most being in men over 55-59 and in women over 65-69 years old.

The need for careful and frequent hand hygiene

Because the droplets from sneezing settle on surfaces and may stay viable for up to 72 hours (on plastic, wood, many metals etc) anything we touch may have virus on it. Even on ropes it is likely to survive for several hours.

Only regular and thorough hand washing or use of hand sanitiser can reduce the risk of picking it up and catching it or spreading it.

Keeping a safe distance ("social distancing")

Social distancing rules are based on the distance that large droplets from a cough or sneeze travel before falling to the ground. Remaining more than 2m from others reduces the risk of transmission and is considered a "safe distance". The time spent close to another person is also important – briefly passing closer is not the same as standing 1m away from someone chatting. The aim is to reduce the risk of each individual interaction with another person. The terms "safe" and "social" distancing are used interchangeably in this document.

Limiting the number of people with whom we interact / numbers in groups

Placing limits on the number of people who interact is a separate intervention to safe distancing. Each individual interaction carries some risk, but every time we interact with someone else we repeat this risk. If we meet with five other people we have five times the

risk of a single encounter but if we meet with 25 it is 25 times the risk not only to us but to each of those 25 people too. Put another way, if you have multiple people passing through an indoor space they will all add their “germs” to the environment there and make it less safe. Lockdown, school closures and limits on the numbers of people gathering in a group are all designed to limit interactions and reduce risk.

How does this all apply to ringing?

As people start to return to normal places of work, employers will be told they need to find ways of setting up the work place and maintain the safe distance. Where they cannot then they will need to find ways of reducing the risk to employees. While ringing is a hobby rather than employment (and most would agree that the “acceptable level of risk” that should be accepted is lower) the need for a realistic risk assessment and plans to reduce risk apply in just the same way.

We need to think about the things we touch, the air we breathe and the number of people we have interacting in ringing rooms. Towers vary in size, shape, layout and cleanliness. In addition the access to upstairs ringing rooms may be via a short spiral staircase or a long winding set of staircases and poorly ventilated passage ways where it is impossible to get through without rubbing against the sides or using handrails. Ground floor rings may have easier access but are also more accessible to non-ringers and the environment is less easy to control reliably. There are issues that are common to all towers and some that will be unique. All need considering.

Things we touch (and may therefore pick up virus from) in the tower

We should think carefully about *everything* we touch during the course of a ringing session. The main things we touch in towers include ropes and rope spiders, doors (including keys and handles) and lots of different objects or surfaces including the walls, coat hooks, chiming wires, any seating, the tower copy of Diagrams and so on. All could potentially carry virus.

Ground floor rings may be particularly risky since it is more likely that people other than ringers can and will access them between ringing sessions.

Virus doesn't remain viable indefinitely and on most surfaces it seems to “die” (not be viable) after about 72 hours. While it probably only survives on ropes for a few hours that is still the duration of a whole practice, striking contest or ringing meeting.

There are additional risks arising from the use of substances. The habit of spitting on or licking the hands clearly carries a high risk of transmitting virus and must not be allowed. While glycerine or liquid chalk are less likely to carry virus they diminish the effectiveness of hand cleaning and sanitising so also should be avoided.

Note that to be effective against coronavirus, hand sanitizer needs to contain (by volume) either greater than 60% ethanol or greater than 70% isopropanol. There are non-alcohol based hand sanitizers sold and these are not effective.

It should be added that while disposable gloves may reduce the amount of virus reaching the hands the act of removing them will involve some virus getting onto the hands again and hand washing or use of hand sanitizer is still required. On balance they add little real benefit.

THINGS WE COULD DO TO REDUCE RISK

1. **Consciously avoid touching our faces when in the tower**
2. **Use Hand Sanitizer regularly and allow it to dry fully before and after ringing activities.** For example:
 - Before entering the tower
 - On entering the ringing room
 - Before and after touching rope spider to release ropes, pulling off clock hammer wires etc
 - Before and after ringing
 - Before and after returning ropes to a rope spider, releasing clock hammers
 - After exiting the tower
3. **Don't spit on or lick hands during ringing**
4. **Limit risk from ropes by having each bell be rung by a single ringer during the course of any day's ringing and by having no more than one set of ringers ring at any one tower on any one day.**
5. **Declutter the ringing room and reduce the number of items that could harbour virus.** Examples of things that should probably be removed from ringing rooms might include books, tins of sweets or biscuits, the tower kettle and mugs.
6. **Where an Ellacombe chime is used it should be washed down thoroughly before and after each session.** This is because the rubber covers on the ropes of an Ellacombe apparatus will harbour virus for a longer period than rope. Hand hygiene advice should also be followed. Only one person should use the apparatus at each session to reduce risk further.

Maintaining distancing in the ringing room and reducing numbers of interactions

Of all of the issues to consider safe distancing is the most difficult. The problems are the spacing between ropes, the distance between any other person in the tower (such as people sitting out or non-ringing visitors) and those ringing and the length of time spent close together.

The position of ropes is fixed so there is an issue in any tower where a pair of ropes fall less than 2m apart. In practice that means that there is an issue in nearly every tower because there are very few towers, if any, where all of the ropes are 2m or more from others. While ringers tend to face forwards, they turn their head from side to side as they follow different bells so that a 2m semi-circle at least needs to be clear of other people.

Since different towers are of different sizes and shapes, have different shaped rope circles, a different layout of seating etc., it will be important to undertake a detailed assessment of the risks in a particular tower including detailed measurements of the distances between ropes.

We may be tempted to drop the safe distance to allow ringing, but in doing so we need to understand fully that the risks of virus transmission increase significantly were we to do so.

THINGS WE COULD DO TO MAINTAIN A SAFE DISTANCE AND / OR REDUCE RISK

IT IS IMPORTANT TO APPRECIATE THAT IF WE CHOOSE TO RING, WITH ALL PRACTICAL MODIFICATIONS IN PLACE ELSEWHERE, THERE IS STILL A RISK OF TRANSMISSION THAT WE CAN'T MEANINGFULLY REDUCE.

This risk is not just to us, but to the other ringers we ring with that day, and also to the general public as any transmitted virus is taken out of the ringing room and passed on further. It is for individuals and the church to consider their responsibilities towards public health.

7. **Ensure each tower undertakes a proper assessment before the resumption of ringing to see if the ringing is possible within the safe distancing guidelines**
8. **Where there are two ropes that are too close together these two bells could be rung by two ringers who were from the same household so long as they remained at all times 2m or more away from anyone else.**
9. **(Apart from members of the same household) There should be a minimum distance of 2m between one ringer and any other person in the tower at all times.**
10. **We should only allow those ringers who will be ringing in a ringing session to be in the tower with no other visitors or ringers "sitting out".**
11. **We could select a set of bells / ropes that are each more than 2m from any other to ring.** This probably would not be musical but would be safer than ignoring safe distancing.
12. **We should limit the duration of all ringing sessions.** The risk increases with time and certainly practices, quarter peals, peals etc must be considered high risk.
13. **We could insist on the use of face masks when in the tower to reduce risk a little.** The use of simple face coverings or masks may reduce the risks of *transmitting* virus to others from a person who is asymptomatic but infected. They do not, however, provide any significant protection for the person wearing the mask against *acquiring* the infection. (Although properly fitted medical grade masks may provide protection for the wearer they are in short supply and it would be inappropriate for them to be used in ringing when there are shortages in hospitals and other healthcare settings which may be placing their staff at risk.)
14. **We could explore the feasibility of other protective equipment in towers** such as Perspex shields between ropes, goggles and so on. Obviously they would need to be tested for effectiveness and safety in a ringing environment before use.
15. **We should suspend teaching of bell handling for the time being since it requires teacher and student to stand in close proximity.**

Ventilation

While towers are often cold they are not generally well ventilated. Thus clouds of droplets or finer aerosols containing virus are not likely to be dispersed by breezes. Any longer period of ringing will inevitably be associated with an increased total amount of virus shed into the environment and thus an individual's exposure. There is no hard evidence on which to provide a definitive statement but intuitively shorter periods will carry less risk.

As well as reducing the length of ringing sessions everything possible should be done to improve ventilation in the tower during ringing.

Getting in and out of the ringing room: Staircases and Passageways

Spiral staircases, ladders and passageways to enter and leave ringing rooms are pinch points where people may come together in a more confined space and where ventilation may be even poorer than in ringing rooms. The time spent in the stairwells / passageways should however be less. Overall, people need to be spaced well apart when ascending the tower – both physically and in time. They need to avoid touching rails or the walls as much as possible and on entering the ringing room they should move well away from the door to allow others to enter.

REDUCING RISKS WHEN ENTERING AND LEAVING THE TOWER

16. **When accessing a tower where the ringing room is upstairs only one person (or the members of only one household group) should ascend at a time**
17. **Those who need to use handrails for support and balance should still do so but others may wish to avoid touching them.**
18. **Adequate time should be allowed between people ascending the tower**
19. **Once in the ringing room, people should move away from the door to allow others to enter and maintain a safe distance of at least 2m.**
20. **Hand sanitizer should be used immediately after entering the ringing room.**

Handbell ringing

Unlike on tower bells, with handbell ringing there is no fixed equipment like ropes that constrain the ability to remain safely distanced. Unless otherwise excluded by government policies on safe distancing and numbers of people gathering in a group, then handbell ringing should be safe.

REDUCING RISKS WHEN RINGING HANDBELLS

21. **Place the seats at least 2m apart and remain that distance**
22. **Ensure scrupulous hand hygiene before and after picking up a pair of handbells, when making and distributing any food or drinks during and after a ringing session etc.**
23. **Never attend a handbell practice if you are feeling unwell or should be quarantined for COVID-19**
24. **Try to maintain good ventilation in the room where ringing is taking place.**

Various innovations that allow handbell ringing using online networks (e.g. Handbell Stadium, RingingRoom, Muster) have been developed and have already allowed performances where the ringers have been in different physical locations.

Bell maintenance

The main additional considerations when working on the bells during the pandemic are:

- Maintenance of good hand hygiene (being especially careful not to touch the face when distracted by work or by attempting to wipe away sweat),
- avoiding lone working (as per normal)
- keeping a safe distance from your co-worker or helper.

What Individual Ringers Can Do To Help

The age distribution of ringers is older than the general population. Older people who get COVID-19 are more likely to develop severe disease and the mortality rate is higher. Ringers in general have a responsibility both to other people (including fellow ringers) and themselves.

WAYS TO HELP KEEP OURSELVES AND OTHERS SAFE

25. **No one who should be in quarantine for COVID-19 should attend ringing during his or her prescribed period of quarantine.**
26. **Ringers over 70 years of age and those with underlying health problems should consider the potential risks of ringing in groups; Those who fall into both categories should similarly be aware of the significant risks that ringing may pose to their health during the pandemic.**
27. **Ringers who have previously had confirmed COVID-19 should remember that they may still pick up and transfer the virus on their hands. Therefore all of this guidance applies equally to all ringers irrespective of their personal immune status.**

What does this mean for those planning ringing events?

Ringers' diaries now seem empty. Meetings, dinners, striking contests, outings and peals have all been cancelled. We all want to get back ringing and to start making plans. Getting to a point where any full circle ringing is possible safely, even for services, won't be easy. I think we should therefore be under no illusions about a complete return to our normal ringing activities.

While this analysis has been limited to events at and near the tower, ringers and those responsible for them need to remember that the overall risk of ringing at any particular tower will also include whatever risks are involved in getting there and back home again. This is especially the case if public transport is involved or where people travel long distances – from one area (with one level of infection) to another.

ASSUMPTIONS TO USE FOR PLANNING

28. **The guidance on having only one band per day per tower above necessarily means that no conventional striking competitions are possible while restrictions remain in place.**
29. **Meetings of ringers for social activities or for business meetings may occur but must follow prevailing government guidance on group gatherings.**
30. **Ringing at meetings should be limited to one band if at all.**
31. **It would be premature to start planning outings (including peal and quarter peal attempts) by groups, certainly in the short to medium term.**
32. **Visits by ringers to neighbouring towers should only happen if they are specifically invited.**
33. **The ability to hold ringing dinners and large social events will depend on the prevailing Government advice regarding large gatherings. Ringing associated with such events is likely to be very limited.**

This is a fast changing field medically and scientifically and Government guidance is also under constant review. This assessment and potential guidance for ringers and for those in whose towers we ring arising from it will therefore remain under constant review.

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