

Valley Chevra Kadisha Tahara Manual

August 3, 2023

Preamble

“The highest act of Gemilut Chesed (acts of loving kindness) is that which is done for the dead, for there can never be any thought of repayment.”- Tanchuma Vayechi 107A

“Laying out the dead” is a time-honored ritual process, both spiritual and practical, that spans world cultures. In Judaism, this ritual process is the responsibility of the chevra kadisha, the sacred society whose members have presided for centuries over the burial practices of Jewish communities throughout the world.

There are five core practices that comprise the initial work of the chevra kadisha:

Shmirah: Attending the met/ah from the time of death until burial
Rehitzah: Washing the body
Taharah: Ritual purification of the body
Halbashah: Dressing the body in burial garments
Hashkavah: Placing the deceased in the coffin (the actual “laying out”)

Taharah, the specific term for ritual purification, is also the word conventionally used to encompass all of the practices from washing to laying out the dead. This Taharah Manual is based upon that broader definition of Taharah. The responsibilities of shmirah are presented in the Valley Chevra Kadisha Shmira manual.

Taharah traditions have evolved over centuries and continents. Over time, each chevra kadisha develops its own unique minhagim (customs) as appropriate to the values and needs of particular communities, in keeping with the general principles of Taharah.

This Taharah Manual, like many others from which it has drawn inspiration and guidance is another link in the chain of tradition. It is a work in progress, expressing our best understanding at this time of how to honor and care for the dead in our community.

Thanks to all whose expertise and commitment are reflected in these pages. This Manual was prepared under the supervision of Rabbi Jonathan Bernhard and Rabbi Richard Camras and is offered in special tribute to all of the members of our community who have volunteered to participate in this sacred work.

Steven Poretzky
6th Av, 5782

Table of Contents

	Section	Page Number
	Introduction	3
	Pre-Tahara Activities	4
	Preliminary Prayers	5
	Rechitzah (Physical washing)	6
	Taharah (Spiritual washing)	7
	Halbashah (Dressing) & Halanah (Placement in aron)	8-9
	Concluding Prayers	10
	Post-Taharah activities	11
	Appendices	
1	General protocols	13
2	Health and safety protocols	14
3	Assistance asked of the Funeral Home	22
4	Information to gather about the deceased	23
5	Supplies list	24
6	Glossary of terms	25
7	Incident report form	26
8	Contact information	27
9	Guidelines for organizing a Tahara team	28
10	Putting on the K'tonet	29
11	Knot tying diagrams	30
12	Rosh/a Job Description	31 - 34

Note: Chapter and page references are based on the book Chesed Shel Emet, Expanded Third Edition by Rabbi Stuart Kelman and Dan Fendel

Introduction

This manual is a guide for performing Tahara by the volunteers of the Valley Chevra Kadisha (VCK), a community-based chevra kadisha serving greater Los Angeles, CA. It is written for use by all genders, even though there might be variations in how they do their work. This manual is available to all chevra volunteers. It is expected that it will be updated from time to time as personnel, technology, and practices change.

Honor and Respect

One of the major underlying principles that supports and guides the work of a chevra kadisha is the Jewish belief that each individual is composed of both physical and non-physical elements – a body and a soul – where the soul is the eternal spiritual aspect of each human being. The ideas that: (1) the soul is present in the Tahara room, and (2) that the Tahara ritual helps to “midwife” the soul from this world into the next provide a framework upon which decisions directing the chevra kadisha can be made. It is in this context that this manual has been written. The midwifing of the soul is considered one of the most important ways we can show kavod ha’met – honor and respect to the dead.

The team leader (“rosh/a”)

The performance of Tahara is a holy act. Maintaining an atmosphere of respect, dignity, and reverence is paramount during the entire time the Tahara team is in the Tahara room. With this in mind, and considering the many possibilities for variation in details in the performance of these procedures, as well as the variation in experience and knowledge of team members, it is our local convention (minhag) to appoint a leader for each Tahara.

The primary responsibility of the leader is to provide direction in making decisions, thereby avoiding conflict, confusion, or disrespect during the ritual. If there are disagreements as to if or how something should be performed, such discussions should be held before or after the Tahara is performed, and never in the presence of the deceased. The leader should assign tasks and review any special circumstances requiring changes to normal procedures. This must be communicated to the team performing the Tahara so everyone understands how the ritual will be performed, and to minimize questions and unnecessary talking during the procedure. In general, a briefing of the team prior to and a debriefing after the Tahara are recommended.

See the Valley Chevra Kadisha “Rosh/a Job Description” in Appendix 12 for more details about the role of the team leader.

Pre-Taharah activities (outside of the Taharah room) Chapter 3

1. Assign roles (note: assignments and positions may change during the Tahara)
 - a. Who will read prayers? Hebrew, English or both
 - b. Who will hold the head of the met/ah?
 - c. Who will pour the 1st, 2nd, 3rd, bucket of water?
 - d. Positioning around the table
 - e. Who will tie the knots?
 - f. assign roles for preparation described in sections “5. a-e”, below
2. Learn about the met/ah (Leader):
 - a. Know the Hebrew name and whether tallit will be used
 - b. Obtain information about the size and condition of the met/ah and resulting safety precautions
 - c. Interface with funeral home personnel
3. Put on personal protective equipment (PPE) - hair covering (optional), mask, goggles/face shield, gown, gloves, boots or shoe covers (non slip)
4. (Optional) Recite opening kavanah (various English readings) before entering the Taharah room (reader, all, or responsively)
5. Enter Tahara room
 - a. Check supplies (sheets, towels/washcloths, candle, buckets, pitcher, etc.)
 - b. Tear sheets or confirm washcloths, fill buckets (2 warm water for Rechitzah, 3 cold water for Tahara (24 quarts), hand washing pitchers).
 - c. Check met/ah: covered with sheet, on back with feet facing the entry door
 - d. Check the aron: wood, no metal, no lining or straw (remove any present); Magen David (if none, affix with glue at end where feet will be placed). Place sovev and tallit on the aron.
 - e. Lay out tachrichim. Inspect for cleanliness and completeness (pp. 56-57)
 - i. Mitznefit – headdress (male: 1 piece, female: 2 pieces – bonnet & face cover)
 - ii. Michnasayim – trousers sewn shut at the feet, fastened at waist with long band
 - iii. K'tonet – shirt to waist with sleeves
 - iv. Kittel – long robe to knees w/ sleeves & collar. Pulls over head or open in front
 - v. Avnet – belt placed over the kittel
 - vi. Tallit – Include if used during lifetime, remove ornaments/metal, cut the tzitzit
 - vii. Sovev – sheet encircling entire body

A. Preliminary Prayers

Chapter 5

- Action 1: Wash hands, right then left 3 times using cup (no brachah, air dry) (p. 19)
- Action 2: Put on PPE: double gloves, masks, goggles, shoe covers, face shields, full gowns, etc. (p. 19)
- Action 3: Recite **together** MECHILAH (Prayer I, pp. 19-20)
- Action 4: Recite CHAMOL (Prayer II, pp. 20-24 for a male; pp. 20-21, 24-26 for a female)
- Action 5: Recite ANA ELOHEI HACHESED (Prayer III, pp. 28-30 for a male; pp. 28-29, 30-31 for a female)

B. Rechitzah (Physical washing)

Chapter 6

Action 1: Prepare 2 buckets (warm water), cloths, etc. for washing (p. 36)

Action 2: Cut off/remove any clothing, then leader removes sheet, cover genitals with cloth (p. 36)

Action 3: Recite VAYA'AN VAYOMER (Prayer IV, pp. 36-37)

Action 4: Simultaneously: (pp. 38-40 for a male; pp. 38-39, 40-41 for a female)

a. Recite ROSHO KETEM PAZ or HINACH YAFAH (Prayer V), and

b. Wash the body

i. Examine the body by area exposing only the area under review. Remove bandages, tags, etc. for burial with met/ah, remove jewelry/valuables and give to Funeral Home staff. It's traditional practice that bandages and linens that are soiled with uncontaminated blood accompany the deceased. Don't remove tubes if you're not sure what the consequences will be.

ii. Do physical washing in this order:

1. head, hair, then ears (with cloth), neck
2. right: arm/hand, upper body, lower body, right leg/foot
3. left: arm/hand, upper body, lower body, right leg/foot
4. incline body on left side – wash right side of back in same order as above, including rectum (pack, if necessary)
5. incline body on right side – wash left side of back in same order as above
6. clean under fingernails & toenails, remove all non-acrylic nail polish, clip nails if needed
7. remove any blood with cotton balls, place cotton balls in a bag to be put in aron along with any hair, false teeth, nail clippings and blood-stained clothes. Blood before or at the time of death is not saved.
8. use skin sealer or tape on any punctures or wounds to prevent fluid flow
9. cover met/ah with a clean sheet, and remove/discard/gloves

C. Taharah (Spiritual Purification) Chapter 7

Action 1: Wash hands (no brachah), put on new gloves

Action 2: Fill 3, 8-quart buckets with cold water. Immerse and place boards at ankles, thighs, lower back & shoulders (p. 45)

Action 3: Recite AMAR RABBI AKIVA (Prayer VI, pp. 46-48)

Action 4: Uncover the met/ah completely. Simultaneously: (pp. 49-50)

a. Recite TAHOR HU (met) or T'HORAH HI (ah) at least three times (Prayer VII), and,

b. Pour water over met/ah. If possible, slightly slant the table to promote drainage. Three members pour in succession without interruption in the flow. Holding the buckets close to the met/ah can minimize splashing.

i. Head to foot first down the right side then left, then middle (no water in mouth, eyes, nose).

ii. One member pours first, before empty, second member begins, then third

iii. If any interruption, refill buckets and begin again

Action 4: Recite V'HITKADASHEM three times (Prayer VIII, pp. 50-51)

Action 5: (p. 51)

a. Remove boards

b. Dry met/ah, table

c. Cover met/ah with clean sheet

D. Halbashah (Dressing) and Halanah (Placement in aron) Chapter 8

Action 1: Recite SOS ASIS (Prayer IX, pp. 53-55)

Action 2: Lay out tachrichim for cleanliness (pp. 56-57)

- a. Mitznefit – headdress (male: 1 piece, female: 2 pieces – bonnet & face cover)
- b. Michnasayim – trousers sewn shut at the feet, fastened at waist with long band
- c. K'tonet – shirt to waist with sleeves
- d. Kittel – long robe to knees with sleeves and collar. Pulls over head or open in front
- e. Avnet – belt placed over the kittel
- f. Tallit – If used during lifetime for met/ah, remove ornaments/metal, cut tzitzit
- g. Sovev – sheet encircling entire body

Action 3: Simultaneously: (pp. 58-61)

- a. Recite K'TONET BAD KODESH YILBASH (Prayer X) in sync with dressing activities, and
- b. Dress met/ah in tachrichim in the following order:
 - i. Recite K'TONET BAD in portions, per instructions below, as each piece of the clothing is put on
 - ii. Kippah – Male and female if worn during lifetime
 - iii. Mitznefet – Male and female, recite UV'MITZNEFET BAD...
 - iv. Michnasiayim – Put pants on, two people tie sash at waist with 4 twists and 2 slip knots. Male, two people tie bands around legs above ankles with 2 slip knots. Female, two people tie bands below knees with 2 slip knots, recite UMICHIN'SEI VAD...
 - v. K'tonet – Put a volunteer's arm through sleeves, one on each side. Grab met/ah wrist and pull through each sleeve, sit body up, raise arms, pull shirt down, lower arms, tuck into pants. One person tie bands at neck with 4 twists and 2 slip knots, recite K'TONET BAD
 - vi. Kittel – Put on in the same fashion as the K'tonet, except the volunteer grabs both the wrist and end of shirt sleeve (keeping the shirt in place), one person ties bands at neck with 4 twists and 2 slip knots. Kittel is not tucked into the pants
 - vii. Female - Face cover, recite BIGDEI KODESH...and V'EL SHADDAI...

Action 4: Prepare the aron and place the body in the aron (p. 62)

- a. Place shards on eyelids & mouth (optional) and afar on eyes, heart, genitals (inside the pants)
- b. Place Avnet across aron and Sovev diagonally & overlapping aron's sides
- c. Drape the tallit, if used. Cut off one fringe & tuck into Avnet
- d. Place met/ah in aron, supporting the head, with feet at the Magen David on the aron cover. Carry the body from both sides or use hydraulic lift

- e. Sprinkle afar on the met in the aron.
- f. Recite V'LO YAVO'U (Prayer XI)

Action 5: (pp. 63-64) Recite V'CHIPER ADMATO (Prayer XII)

Action 6: Wrap tallit (left side, then right) and sovev (feet first, then right, left, head).

Tie Avnet, tie shin or shin and dalet, recite UV'ANVNET BAD...

- a. add any extra items, e.g., loose hairs, false teeth, blood-stained clothes all in a bag. Place at the foot of the aron. (pp. 64-65)

E. Concluding Prayers

Chapter 9

- Action 1: Recite HINEIH MITATO, Y'VARECH'CHA, YEILCHU, MI ATAH & ATAH YIGDAL (Prayer XIII, pp. 67, 69, 70-71)
- Action 2: Recite as a full group closing MECHILAH (Prayer XIV, pp. 71-72)
- Action 3: Close aron and place unlit candle on top of the foot (p. 72)
- Action 4: As aron is moved, feet first, to location awaiting burial, recite UVINSO'A (Prayer XV, pp. 72-74)
- Action 5: Upon arrival at the location, light a yahrzeit candle (no brachah) and place it at the head of the aron. Exit walking backward, i.e. facing the met/ah (p. 75)

Post-Taharah activities

Chapter 10

- a. Clean the Taharah room thoroughly, remove PPE, store and check supplies. All soiled supplies should be discarded. Supplies with excrement, blood or other bodily fluid should be discarded in the appropriately marked container.
- b. Outside the Taharah room:
 - i. Wash hands with soap, then ritual washing, alternate right hand & left 3 times using cup (no brachah), air dry
 - ii. (Optional) recite closing prayers (together, individual, or responsive) – various English texts
 - iii. (Optional) Group sharing – emotions, practical issues/suggestions, adverse reactions, etc.
 - iv. (Optional) Final Group prayer – English – “Thank you for the strength...”
 - v. (Optional) Moment of silence
 - vi. Rosh signs Tahara certificate
- c. Rosh/a completes and submits tahara report form (see appendix 7)

Appendices

1. General protocols
2. Health and safety protocols
3. Assistance asked of the Funeral Home
4. Information to gather about the deceased
5. Supplies list
6. Glossary of terms
7. Incident report form
8. Contact information – Advisors, Tahara team dispatchers, Funeral Homes
9. Guidelines for organizing a Tahara team
10. Putting on the K'tonet
11. Knot tying diagrams
12. Rosh/a Job Description

Appendix 1. General protocols

- Don't pass items over or turn your back to the deceased.
- Speak softly and only as necessary, remember the soul of the deceased is in the room with you.
- Do not use towels to dry met/ah that have been used to dry the table/boards, etc.
- You may use towels that have been used to dry the met/ah on the table/boards, etc. Use torn/cut sheets if towels are too rough for the skin.
- If the condition of the body is such that Taharah cannot be performed, the body is placed in the aron and wrapped in the sovev. Tachrichim are placed over the body on the parts of the body they would have normally covered.
- Keep the met/ah covered (especially genitals area), except for the area(s) then being worked on.
- Details for the Tahara are not disclosed to anyone outside of the Tahara team except for information communicated via the "Incident Report Form", see Appendix 8.
- The names of Tahara team members participating in a given Tahara are not disclosed to the surviving family members of the deceased, or to the community at large.
- Members of the team are encouraged to stay in touch with their team leader about any issues that might arise for them following the Tahara.

Appendix 2. Health and Safety Protocols

SAFETY PRECAUTIONS WHILE HANDLING THE MET/A

Taharah has been performed by Chevra Kadishas (CK) for many years. When performed properly, it is a safe procedure. Since 2020 we have been living in a world with a different approach of what keeping safe and healthy means. All dead bodies are potentially infectious and STANDARD PRECAUTIONS should be implemented in every case in order to prevent direct exposure to blood, body fluids, and tissue. These precautions include:

1. TRAINING AND EDUCATION
2. SAFE WORKING ENVIRONMENT
3. APPROPRIATE SAFE WORK PRACTICES
4. PERSONAL PROTECTIVE EQUIPMENT (PPE)
5. VACCINATIONS

The CK will not always have complete information regarding cause of death, so for protection, always take appropriate precautions. Any health information a team member acquires must be kept confidential.

These are factors that may increase the likelihood of disease acquisition:

- How contagious the disease is.
- How much of the infectious agent exists in the met/a and the environment.
- What is the health and immune status of each Taharah team member.

The modes of disease transmission (ABCD)

A. **AIRBORNE.** Particles breathed out, suspended in the air. This was unlikely to occur before Covid-19. Usually the met/a is delivered in a plastic bag. Be very cautious while handling this bag so no air escapes before our team members are properly protected.

B. **BLOODBORNE.** Infectious body fluids come into contact with broken skin or mucous membranes of the eyes, nose or mouth. This occurs when there is direct exposure to any body fluids (blood, urine, mucous).

C. **CONTACT.** Can be direct when you touch any secretions of the met/a or indirect when you touch something that the met/a contacted. Any item of the room that hasn't been sanitized including the body is considered contaminated. That is why it is very important that you **DO NOT** touch your eyes, hair, beard, mouth, nose.

D. DROPLETS. This mostly occurs when liquids are splashed and small particles enter your eyes, nose, mouth or broken skin.

PERSONAL HYGIENE PRACTICES AND USE OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

1. All Tahara volunteers should be trained in infection prevention and control procedures. A high standard of personal hygiene should be practiced.
2. We recommend that each volunteer have a set of clothing set aside exclusively for Taharah. Modest/ respectful long sleeve shirt, pants, and non-slip shoes or plastic boots.
3. Wear PPE, including:
 - Hair cap (optional)
 - Water repellent long sleeve gown
 - Surgical mask (cover the beard)
 - Face shield or goggles
 - Double pair of gloves.
4. Make sure any wounds, cuts, abrasions, are covered with waterproof bandages or dressings.
5. DO NOT smoke, drink or eat. DO NOT touch hair, eyes, mouth or nose while performing Taharah.
6. Wash hands thoroughly with liquid soap and running water at a minimum, before starting and after the end of the procedure.
7. Avoid injury both during examination of the met/a and dealing with waste disposal and decontamination.
8. Remove and dispose of PPE properly after the Taharah is completed.
9. Dry hands and open/close doors with paper towels.

ACCIDENTAL EXPOSURE TO BLOOD OR BODY FLUIDS

1. The injured or exposed areas should be washed with copious amounts of water.
2. The injured or exposed person should immediately seek medical advice for proper care and post exposure management.

It's imperative to know the location of emergency equipment, like the eye wash station, the shower, sharps container clearly marked, tools for handling hazardous materials, and disposable bags marked for soiled linens and trash.

STRAIN FROM LIFTING AND HANDLING THE MET/A

Before the Taharah begins make sure you have enough team members to handle the body safely. Funeral home staff can assist.

Some funeral homes have mechanical lifts. Staff can assist in their usage.

When a lift is not available, place a sheet under the met/a, roll the edges and then lift together. Ensure that brakes on the table and gurney are engaged.

SLIPS AND FALLS

Make sure work pathways are clear, alert all team members of water on the floor and dry it right away, before any further procedures. Don't forget to always use your non slip shoes.

ENVIRONMENTAL CONTROL

It is important that surfaces be disinfected 0.1 % sodium hypochlorite or 62-71% ethanol. These disinfectants reduce coronavirus infectivity on surfaces within a minute of exposure time.

The following environment cleaning and disinfection procedures should be observed:

1. PPE should be worn.
2. All surfaces which may be contaminated should be cleaned with water and detergent and then disinfected with household bleach mixing 1 part of 5.25% bleach with 49 parts of water, allowing it to remain for 15 to 30 minutes or until air dried.
3. Surfaces visibly contaminated with blood, spills or other bodily fluid: Absorbent towels should be used to remove these fluids and then be immediately disposed of as infectious waste. Then decontaminate per step 2., above.

VACCINATIONS

Vaccination against Hepatitis B and Covid 19 are highly recommended. Please consult your physician and follow his/her recommendations.

CATEGORIZATION OF DEAD BODY ACCORDING TO RISK INFECTION

Based on the mode of transmission and the risk of different diseases, the following categories are assigned to the level of caution that is required for handling of dead bodies:

Category 1.- Standard precautions are recommended for all dead bodies other than those with infectious diseases.

Category 2.- In addition to standard precautions additional precautions are recommended (like using double pair of gloves) for dead bodies with known :

- Human Immunodeficiency Virus infection (HIV)
- Hepatitis C
- Creutzfeldt-Jacob disease (CJD) (Mad Cow)
- Severe Acute Respiratory Syndrome (SARS)
- Avian influenza
- Middle East Respiratory Syndrome (MERS)
- COVID-19

And other infectious diseases, as advised.

Category 3. In addition to standard precautions, stringent precautions are recommended for dead bodies with: Anthrax, Plague, Rabies, Viral hemorrhagic fever, Ebola and other diseases as advised by a physician. The rosh/a should consider alternatives to a standard Tahara in these cases.

As important as all of these precautions are, our physical, emotional and mental health are also important. Be sure you are as healthy as can be. For example, if you are immunocompromised, prone to infections, or diabetic type 1, it may be best to not participate with a Taharah team. If you find it difficult to work with blood or bodily injuries, be aware of potential difficult scenarios that you may face. If you are dealing with depression or other mental/emotional issues, this type of work may not be right for you until you're feeling better.

If a team member feels ill during the Taharah he/she should stop working and switch rolls with the leader or the prayer chanter. If this is not possible, he/she should leave the Taharah room.

GUIDANCE FOR HANDLING THE MET/A

- Always remember Kavod Hamet/a is the key underlying principle for all actions.
- “If you don’t see it, it doesn’t exist.” In other words, if there is something inside the body cavity, leave it, such as any sutures or tubes in the neck or elsewhere unless there is a medical person on the team who can advise about removing them.
- If there is a Foley catheter (catheter attached to a urine collection bag), cut it on the end near the bag; the urine will drain out and the balloon holding it inside the body will deflate; you can then pull the tubing out; use the hose to rinse the urine off the table.
- Other type of catheter: tape it to the body.
- Generally, if you’re not certain about removing any medical equipment, don’t.
- Take out IVs if you can without extra bleeding; if not, leave it in and tape it to the body.
- For a feeding tube with a peg, cap it and leave it in.
- Dentures are left in, for they are considered part of the body.
- There are plastic full-body coverings and plastic “sleeves” for arms and legs if bleeding or other seeping liquid cannot be stopped. Ask the funeral director for these if needed. The main consideration is that liquids, blood, feces are not seeping through the tachrichim or out of the casket before the funeral. Do what you need to do to make sure that does not happen.

In case of an injury to any person of the Taharah team here is the list of the urgent care facilities closest to the following mortuaries

Eden Memorial Park.
Valley Presbyterian Hospital.
15107 Vanowen St. Van Nuys
818-782-6600

Providence Holy Medical Center
15031 Rinaldi St. Mission Hills
818-365-8051

Mount Sinai Memorial Park
UrgentMED -Burbank
2005 W Alameda Ave. Burbank
818-736-9977

LakeSide Urgent Care Center
255 Buena Vista St. Burbank
818-295-5920

Resources

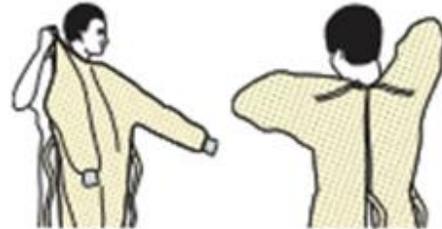
1. Health and Safety Precautions for Taharah. Kohenet Ellie Barbarash, CPEA, Dan Doernberg, Elayne Kornblatt Phillips RN,PHD, David Zinner, Michael Rein, MD, Darla Knight Low , RN, BSN.
2. Guidelines for the Handling of Dead Bodies for Owners/Operators of Funeral Homes Establishments. Ministry of Health & Wellness.
3. Dead Body Management in the Context of the Novel Coronavirus (COVID-19). WHO/PAHO Document.

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



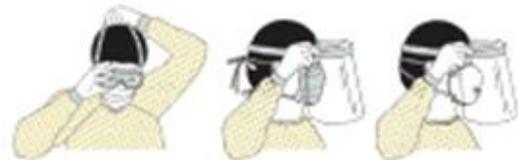
2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

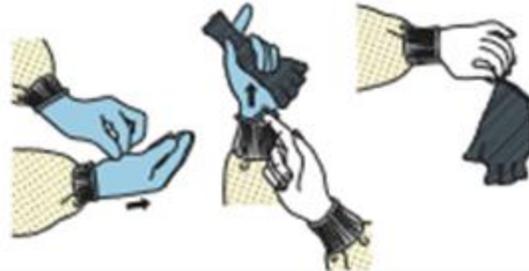


HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door.** Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggles or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by tilting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container



4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front.
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

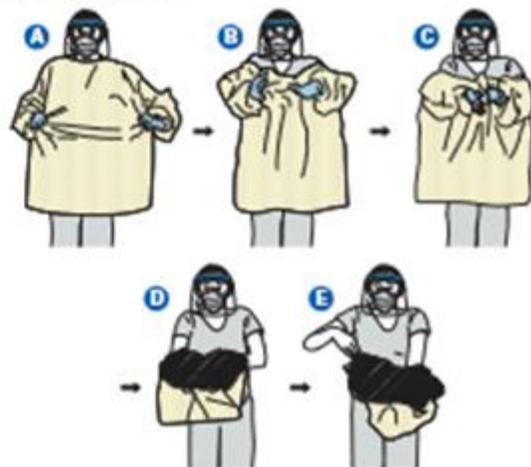


HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside out into a bundle
- As you are removing the gown, peel off your gloves: at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

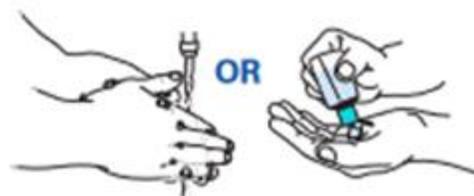


3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS
BECOME CONTAMINATED AND IMMEDIATELY AFTER
REMOVING ALL PPE**



Appendix 3. Assistance Asked of the Funeral Home

- Clean, orderly preparation room, ready for use
- Supply gender appropriate tachrichim
- PPE: full sleeve body suits of various sizes, gloves of various sizes, masks, face shields, booties or rubber boots, goggles
- Body should be lying face up on a table that tilts, with the table tilted slightly toward the feet. Body should be covered by a clean sheet. Medical devices already removed is ideal.
- Table in locked position (both tilt and wheels)
- Casket in the room or nearby
- Simple wood casket with holes in bottom, Magen David on cover, no lining or embellishments.
- Empty table or other area for spreading shrouds and supplies
- At least 8 clean, dry sheets (twin, non-fitted) and/or towels (hand towel size)
- Roll of cotton batting
- Packet of earth from Israel
- Water source and sink
- Working floor drain
- Emergency eye flush station
- Biohazard and regular trash cans
- pottery shards
- Sharps disposal bin
- Laundry bin for used sheets and towels
- Turn off all buzzers, phones, alarms in the room
- Identified location to move body after Tahara
- Yahrzeit candle and matches
- Access to supplies cabinet
- Access to lift and instructions or instructor

Appendix 4. Information for Dispatch volunteer to gather

typically from clergy or funeral home staff

Gather as much as you can:

- Hebrew and English name of the deceased
- Time/date/location of the Tahara
- Time/date of the burial
- Family desire to participate in Shmira?
- Is there a tallit and does the family want it used for halbashah (clothing)?
- Does the deceased identify as female or male?
- Are there any special circumstances about the condition of the body (size, weight, other?)
- Will the body be cremated or embalmed or have there been any other non-traditional Jewish requests?

Appendix 5. Supplies list

- PPE (gowns, gloves, masks, goggles, face shields, shoe covers/boots)
- Wooden nail-cleaning sticks
- Nail clippers
- combs
- Nail polish remover
- Scissors (for sutures, clothing, casts)
- Cotton balls, gauze pads
- Skin sealer tape or surgical tape
- Pierce seal powder or liquid bandage or Monsels solution
- Large bandages or surgical pads
- Medical quality antiseptic spray
- Superglue, rubber cement
- Disposable containers to hold water for washing the body (large hard plastic or equivalent)
- Large roll of cotton batting or heavy-duty disposable paper towels
- Bedsheets (10) twin size, non-fitted
- Cloth towels (24) hand sized
- Varnished wooden boards (4 or 5)
- Double handled plastic hand washing pitcher
- Three 8-to-10-quart rubber or durable plastic buckets with measurement marks and handle
- Optional – Egg and vinegar, cups for mixing egg & vinegar
- Earth from Israel
- Pottery shards
- Tachrichim, including bags for bloody items, hair, etc.
- Tallit
- kippot
- Disposable diapers
- Liquid soap
- Trash containers (biohazard and regular)
- Container for used sheets/towels

Appendix 6. Glossary of terms

Aron: The casket, traditionally all wood.

Chevra Kadisha: Burial society or "Sacred Society," whose members perform *Taharah*.

K'vod Hamet: Honoring the dead by treating the body with respect and care until burial.

Met/ah: The deceased (m/f)

M'taharim: Those performing the Tahara

Mitzvah: commandment

Tachrichim: Simple white linen or muslin burial garments. They are hand-sewn and have no buttons, zippers or fasteners.

- a. Mitznefit – headdress (male: 1 piece, female: 2 pieces – bonnet & face cover)
- b. Michnasayim – trousers sewn shut at the feet, fastened at waist with long band
- c. K'tonet – shirt to waist with sleeves
- d. Kittel – long robe to knees with sleeves and collar. Pulls over head or open in front
- e. Avnet – belt placed over the kittel
- f. Tallit – Prayer shawl.
- g. Apron – worn over kittel (female only). Not used if tallit is used
- h. Sovev – sheet encircling entire body

Taharah: Ritual purification of the met or metah

Appendix 7. VCK Leader's Report Form

Send via email to info@valleychevrakadisha.org

Date	
Place	
Start time	
End time	
English name of deceased	
Hebrew name of deceased	
Team leader name	
Team member names	
List any jewelry and/or other items removed from the met/ah and report their location	
Explain any problems encountered during the Tahara	
List any questions about the Taharah	
Suggestions	

Appendix 8. Contact information

Rabbinic Advisors

Tahara/Shmira Dispatch Coordinator

Name	Telephone	Email

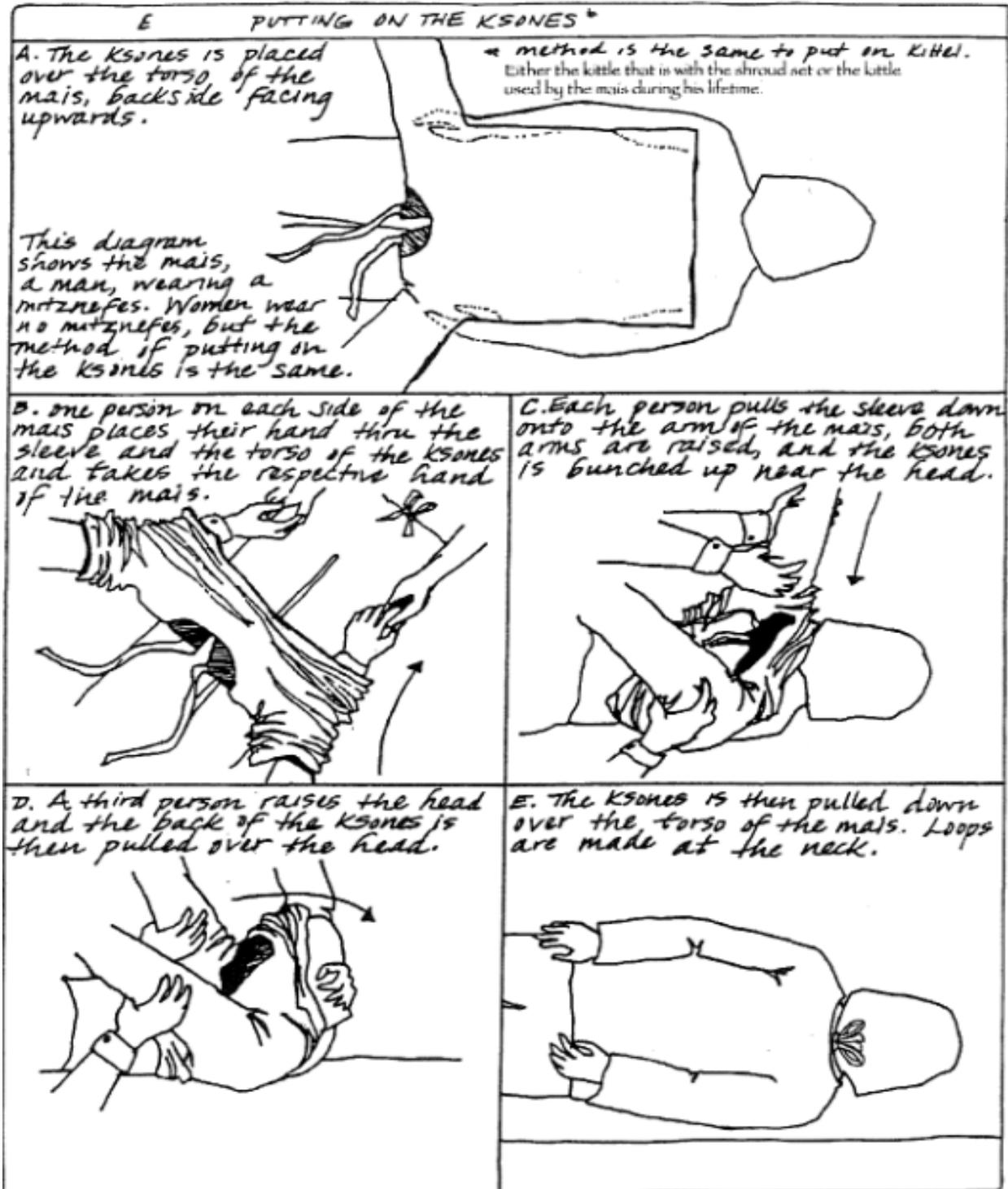
Contact information – Funeral Homes

	Name	Email	Telephone	Address	Access

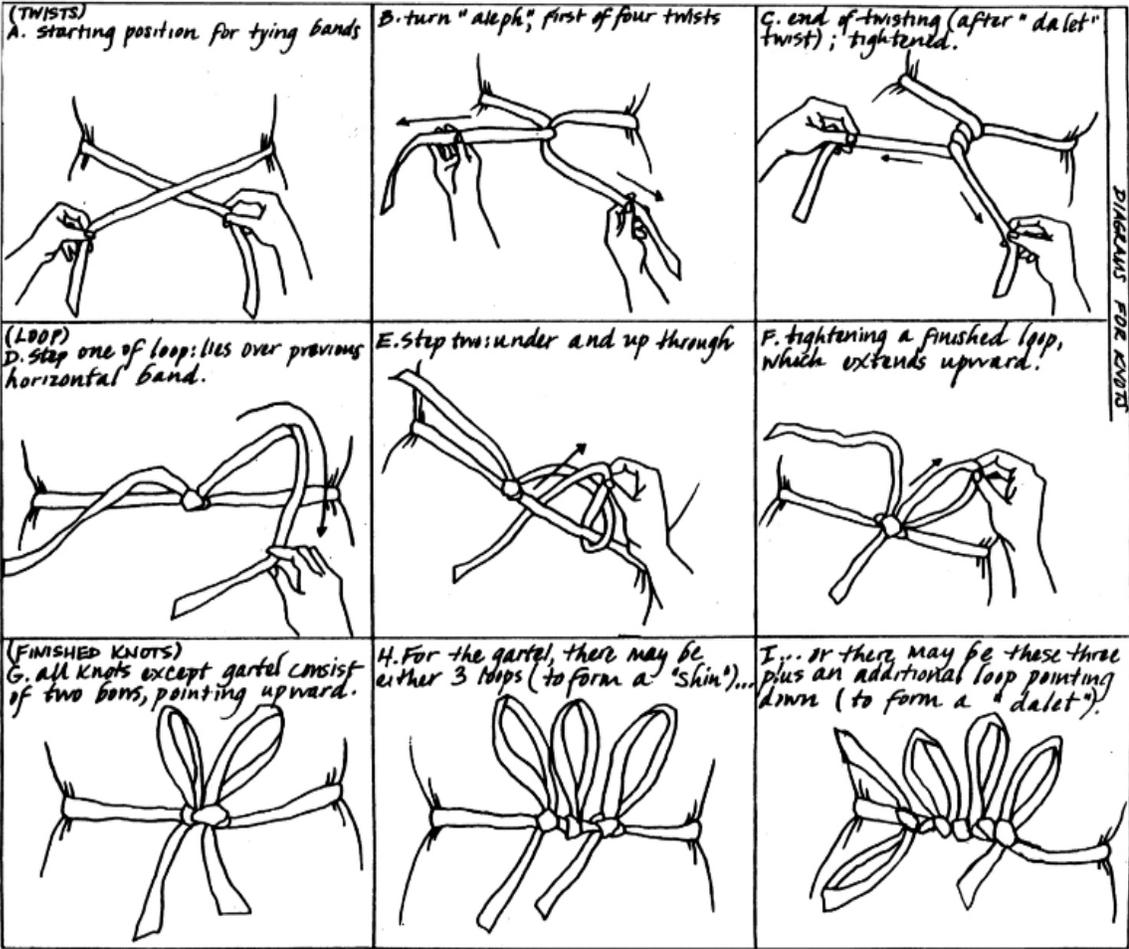
Appendix 9. Guidelines for organizing a Tahara team

- Use the group WhatsApp (either “VCK Tahara Men” or “VCK Tahara Women” text to notify volunteers of a service request. Notify time/date and location of tahara and any special or non-traditional circumstances. Update the Tahara log and Shmirah log after each shmira/tahara is completed (found in the “VCK Dispatch” shared document)
- Generally, men for men and woman for woman (see policies regarding shortage of volunteers, transgender and other issues)
- Assign a “rosh/a”. Make sure the person is willing to serve as such
- Gather information about the deceased (see Appendix 4) and provide to rosh/a
- Try to include at least one volunteer with a medical background, especially if there are special circumstances regarding the body
- Try to include at least one volunteer with Tahara experience
- All team members should be provided contact information of: a) relevant funeral home staff, b) rosh, and c) dispatch volunteer on duty.
- If there is a shortage of volunteers (Tahara and/or shmira), try IKAR/Beth Am chevra kadisha for additional volunteers (we will assist them also).
_____ [Contact info] _____ If the shortage is for a man’s tahara, you may include our women tahara volunteers.
- Rotate volunteers when possible, so that work is distributed roughly evenly among all the available volunteers
- Include less experienced volunteers with more experienced ones
- Generally, aim for 5 members of the team, including the Rosh/a. Tahara can be performed with 2 or 3 members, but 5 allows for a reader/chanter plus two volunteers on each side of the met/ah.

Appendix 10. Putting on the K'tonet



Appendix 11. Knot tying diagrams



DIAGRAMS FOR KNOTS

Appendix 12. The team leader (“rosh/a”) Job Description

I. Background

A Tahara team generally consists of one leader and four additional volunteers (although fewer volunteers can work). The leader is called the “rosh/a” (literally, “head”). The rosh/a may have prior experience performing Tahara as a team member or a rosh/a, but this is not a requirement.

The performance of Tahara is a holy act. Maintaining an atmosphere of respect, dignity, and reverence is paramount during the entire time the Tahara team is in the Tahara room. With this in mind, and considering the many possibilities for variation in details in the performance of these procedures, as well as the variation in experience and knowledge of team members, it is our local convention (minhag) to appoint a leader for each Tahara. The primary responsibility of the leader is to provide direction in making decisions, thereby avoiding conflict, confusion, or disrespect during the ritual. If there are disagreements as to if or how something should be performed, such discussions should be held before or after the Tahara is performed, and never in the presence of the deceased.

The leader should assign tasks and review any special circumstances requiring changes to normal procedures. This must be communicated to the team performing the Tahara so everyone understands how the ritual will be performed, and to minimize questions and unnecessary talking during the procedure. In general, a briefing of the team prior to and a debriefing after the Tahara are recommended. No person should be present in the Tahara room without the permission of the rosh/a.

The leader is responsible for determining how to implement any special requests from the family of the deceased and should be guided by VCK policies and advisors. Such requests might include, for example, special clothes for the deceased, inclusion of items into the casket, etc. These must be discussed at the pre-briefing so everyone understands what the request is, if it will be implemented, and how. Furthermore, the leader is the one who will make decisions during the procedure if unexpected situations arise. The leader coordinates all activities, working closely with the reader. The reading describes what is to be done, while the leader ensures it is done as best we can. If there are new volunteers on the team, the leader should act as guide. The leader may consult with advisors to the chevra kadisha during the Tahara, but must step outside the Tahara room to do so.

As a Rosh/a, you should be knowledgeable of and comfortable with the rituals, the readings, and the connections between them. Find time before a Taharah to review our Tahara manual.

There are many ideas and suggestions, and solutions to performing a Taharah. You will learn more about them through observing and doing. Other good learning options include attending the annual Kavod v'Nichum Conference or taking online classes through the Gamliel Institute.

Generally a good team includes these attributes:

- Commitment to a shared purpose
- Trust
- Respect
- Caring
- Communication skills (both verbal and non-verbal)

The composition of each Taharah team will be different. As a Rosh/a, you should try to become a keen observer of individual idiosyncrasies, group dynamics, individual strengths and weaknesses.

Characteristics of leadership:

- Focuses on the big picture -- *Kavod hamet*
- Uses common sense
- Recognizes choices – what is the issue? what are the alternatives? how to reach a decision?
- Gives space for team members to have a say
- Has a strong, soft voice
- Uses self-reflection – to step back and assess the situation
- Has balance – sees other points of view
- Recognizes that true self-confidence is recognizing your own strengths and weaknesses
- Has genuine humility and knows that each person has a function on the team

As with any leadership responsibility, each rosh/a brings different attributes to the role. Although we all follow the same basic format and procedures, we each add our own contributions to the task. As you become more experienced, you will learn to rely on your own sense of kavanah to direct the team.

II. Prior to entering the Tahara room

Arrive at the funeral home about 30 minutes early:

- a) get any updated information from the staff,
- b) prepare the Tahara room,
- c) set out the supplies.
- d) ask if the aron is there. If the met/ah will not be placed in the aron, ask where the team should place the met/ah.
- e) tell the funeral home staff how many other volunteers are expected.
- f) place a sheet over the table where supplies and tachrichim will be laid.

Working in concert with the other team members. Determine:

- a) how the prayers will be read, by whom, in what language(s), and how, if at all, the group will incorporate any kavanot,
- b) who will hold the head of the met/ah during the Tahara procedures,
- c) who will fill the buckets of water and who will pour the first, second and third bucket of water used to purify the met/ah,
- d) upon entering the Tahara room,
 - i.) who will check that needed supplies are present and in good condition and tear sheets if needed,
 - ii.) who will check the met/ah to assure the body is properly arranged (on back, covered with a sheet, feet facing the door, on table slightly tilted towards feet for drainage), and
 - iii.) who will check the aron (wood, no metal or lining), remove any straw or lining, ensure a Magen David is affixed (at end where feet of met/ah will be placed).

Ensure that:

- a) all the volunteers know the English and Hebrew (if available) name of the met/ah.
- b) all team members put on PPE correctly and that everyone follows our established safety procedures.

c) Any new volunteers are included in the team:

- i.) as the team is gathering, greet the new person, introduce her/him,
- ii) let the new person know that everyone is there to support her/him and encourage her/him to ask if any issues arise.
- iii) Give the new person an assignment that she/ can he do with a veteran team member (pails, tachrichim layout, etc).
- iv) Be aware of any signs of distress or confusion and assist as you can.

- Ask if anyone has any physical constraints that the team needs to be aware of.
- Inform the team of any special physical issues for the met/ah.
- Review procedures, like warm water for washing; cold water for the actual Taharah pouring; changing the sheet after washing, after Taharah, or whenever the sheet is wet; changing the face covering when it becomes wet.
- Remind the team: Not to stand at the met/ah's head if possible, not to turn one's back on the met/ah, and not to reach over the met/ah, as tradition states that the soul is still hovering above him/her.

III. Upon entering the Tahara room

- You'll be multi-tasking – following the liturgy that is read or chanted, ensuring that the physical jobs are being accomplished, and that there is a sense of decorum. You will also be the liaison with the reader, signaling when you are ready to move on to the next part and/or when you need more time during the liturgy (or designate that responsibility)
- Handle any interpersonal issues, a team member who interjects conversation during a Taharah, pours the Taharah water in an incorrect way, or does something else incorrectly due to inexperience or personal style. Our volunteers in general are caring, aware, and conscientious. Occasionally, though, something will occur that does need some discussion. Consider in the moment whether the issue can be handled respectfully during the Taharah. Often, though, it's better to have a private conversation later with the person either at the funeral home after the Taharah or at another planned time. Another option is to remind the entire team in the after-sharing about an issue, for example, how to pour the Taharah water.
- If during a Taharah, something needs to be discussed— for example, how to move the met/ah into the aron, step to the side with your team. Respectfully and softly give directions and feedback, especially with less experienced volunteers on the team. This will help volunteers perform and improve.
- The rosh/a should consult with advisors as needed (outside the Tahara room)

IV. After leaving the Tahara room

While removing PPE, remind team members to keep gloves on until all other PPE is removed and place all used PPE into the RED biomedical waste container. Ask one team member to use disinfectant wipes, with gloves still on, to clean any equipment that was used during the Tahara.

Outside the building, invite anyone to share thoughts and feelings with the team. This could be a time for the rosh/a to express how the team worked or didn't work as a team and why, or to discuss how to improve any situation that needs some work. Invite team members to share what they learned (ex. how to remove something) so that we are educated for the next time. Thank team members for their contributions to the work.

The rosh/a completes the Taharah certificate. Give the certificate and any jewelry removed from the met/ah to the funeral home staff as you leave.

The rosh is responsible for advising the funeral home staff when specific supplies are needed, including PPE supplies.

Complete and send an "Incident Report Form" if applicable (see Appendix 7).