

COVID-19 Sample Reopening Plan

Texas Historical Commission: Guidelines for Texas Historical Sites and Museums

Submitted by: Donna Barker, Star of the Republic Museum

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To help museums share thinking as they navigate the challenges and uncertainties of the COVID-19 pandemic, the Alliance is compiling examples of reopening plans from individual institutions. These plans are specific to each museum's circumstances and are not meant to be definitive guidance for developing your own. Instead, they provide reference for what other museums are considering as they chart a course toward safely reopening. Check the Alliance's [reopening guide](#) frequently for updates, as we will be adding new examples as we receive them. If you have a plan or perspective on reopening you'd be interested in sharing with the broader museum field, please contact content@aam-us.org.

Disclaimer: This sample document serves as an example of how one museum addresses a particular issue. Museums should compose original materials based on their unique circumstances. Any document produced by the recipient should not substantially use the contents of this sample as the basis. Materials are provided "as is," without any guarantee or warranty of any kind, expressed or implied. Information shared here is not intended to supersede guidance from public health officials, medical experts, and federal/state/local governments. Museums are encouraged to seek legal and other expert advice on their specific circumstances.

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AAM maintains an online collection of more than 1,000 sample policies, plans, and forms from museums of all types and sizes through the Alliance's [sample document library](#). Access is a benefit to staff of [Tier 3 member museums](#). Given the current crisis, this and other resources have been taken out from behind our member paywall to make them free and accessible for all. The current crisis is taking a distressing financial toll on cultural organizations, and AAM is no different. In these challenging times, we ask that if you can, consider supporting our [advocacy work](#) and making extensive [COVID-19 resources](#) freely available for our field, by [making a donation](#) or [becoming a member](#) of AAM. Thank you for your much-needed support.

CORONAVIRUS-AWARE OPERATING GUIDELINES FOR HISTORIC SITES

4/29/20

As we open our historic sites to the public, we will need to adjust the way we operate in order to provide a safe environment for both staff and visitors. These guidelines are based on the best information currently available from the Centers for Disease Control and Prevention (CDC) and the Texas Department of State Health Services (DSHS). These guidelines are also based on current directives from Governor Abbott and the Texas Historical Commission. **This document will be updated as appropriate.**

Each site will need to use these guidelines and recommendations to develop an operating plan for their sites that will work with their unique facility and staffing situation. The last section of these guidelines provides a template for getting started, but it is not all-inclusive and may need to change or be modified for new circumstances or site activities.

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GENERAL GUIDELINES

...Staff, Volunteers & Contractors...

- All staff and volunteers must be trained on proper use of PPE, environmental cleaning and disinfection, hand hygiene, respiratory etiquette, and our coronavirus-aware operating guidelines.
- Any employee or volunteer who is feeling ill or displaying any of the following must be sent home immediately:
 - Feeling feverish or having an elevated measured temperature greater than or equal to 100 degrees Fahrenheit
 - New or worsening cough, or shortness of breath
 - Sore throat
 - Headache
 - Muscle pain
 - Diarrhea
 - Repeated shaking with chills
 - Loss of taste and/or smell
 - Having had any close contact with a person who is lab-confirmed to have COVID-19
- All staff and volunteers must wash or sanitize their hands when coming in to work. They must practice proper hand hygiene throughout following these guidelines and aim to wash/sanitize their hands at least once every two hours.
- All staff and volunteers must wear coverings over their nose and mouth unless they are alone in their own private office or working alone outdoors.
- All staff and volunteers must maintain a minimum of 6-8 feet separation from others at all times. Telework, staggered shifts, and alternate office space may be necessary to accomplish this.
- If a staff person or volunteer is suspected or lab-confirmed to be ill with COVID-19, they must go home and not come back to the site until they meet *all* of the following criteria:
 - Fever-free for at least 72 hours (3 days) without medication
 - Other symptoms have improved
 - It has been at *least* 7 days since onset of symptoms
 - The decision to return to work has been made in conjunction with their healthcare provider.
- If a staff person, volunteer, or contractor has had contact with someone suspected or lab-confirmed to be ill with COVID-19, anyone at the site who had close contact with that person should not return to the site for 14 days or until a negative COVID-19 test result is obtained. They may work from home (telework), use accrued time, or in some cases, emergency leave.
- If the staff person, volunteer or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis
- All staff and volunteers must maintain at least 6-8 feet from others at all times.
- Workstations, office equipment, and phones should not be shared if possible. If workstations, office equipment, phones, etc. must be shared among staff, they must be disinfected before

another individual uses them. Plastic film or similar non-porous covering that is changed between users may also be used in addition to or in lieu of disinfecting.

...Visitors...

- Visitors are strongly encouraged to wear coverings over their nose and mouth before entering any indoor facility at the site. If supplies allow, sites may offer face coverings to visitors that do not have them.
- Visitors will be strongly encouraged to bring their own hand sanitizer unless sites have adequate supplies for visitors to use.
- Visitors must wash or sanitize their hands as they begin their visit at the site's visitor center and/or house museum. They will be encouraged to do so again before leaving.
- Visitors who do not respect social distancing or hand hygiene requirements may be refused service and asked to leave the site.
- When a visitor calls to make a reservation to visit they will be asked the following screening questions:
 - Do you have a fever, cough, or difficulty breathing?
 - Does anyone in your household have a fever, cough, or difficulty breathing?
 - Do you or someone in your household have a confirmed case of COVID-19?
 - Have you or someone in your household been in contact with someone with a confirmed case of COVID-19?
- If the caller answers yes to any of the above questions they will be asked to make their reservation for at least two weeks later. When they do visit the site, they will be asked the same screening questions again. If they answer yes to any question, they will be asked to visit another time.

PROTECTIVE EQUIPMENT & HAND HYGIENE

...Desk Shields...

- Clear barriers of Plexiglas, mylar, or similar material should be placed at visitor information desks, POS stations, and other similar locations where person-to-person interaction is unavoidable, and it is not possible to maintain a minimum of 6-8 foot distance between staff and visitors/customers.
- Desk shields may be self-supported, but it is recommended that they be secured to the desk, wall or ceiling to prevent the possibility of it falling on anyone.
- Desk shields should be disinfected at least once daily and possibly more frequently depending on visitation levels.

...Face Coverings...

- All contractors, volunteers and staff must wear a covering over their nose and mouth while at the site. This may be but are not required to be surgical masks or N-95 respirator masks, which are critical supplies for healthcare workers.
- Visitors are strongly encouraged to bring their own face coverings and wear them when onsite, particularly in indoor facilities.
- Sites may offer face coverings to those who do not have them if supplies allow.
- The CDC recommends that face coverings should:
 - fit snugly but comfortably against the side of the face
 - be secured with ties or ear loops
 - include multiple layers of fabric
 - allow for breathing without restriction
 - be able to be laundered and machine dried without damage or change to shape
- Before putting on or removing a face covering, wash and/or sanitize your hands and try not to touch the face, eyes, nose or mouth.
- Machine washing is sufficient to disinfect cloth face coverings. They should be laundered routinely, depending on frequency of use. Ideally, staff should wear a freshly laundered face covering each day.
- Exceptions:
 - Children under the age of 2 are not required to wear face coverings.
 - Anyone with breathing difficulties or mobility limitations such that they cannot remove the face covering without assistance are not required to wear face coverings.
 - Site staff who are working alone in their own private office with the door closed.

...Gloves...

- Sites should be using nitrile rather than latex gloves. Latex breaks down over time, does not tolerate alcohol-based hand sanitizers, and many people have issues with latex allergies.

- Gloves are used to help prevent transfer of germs from one person or surface to another. If gloves are used by staff while performing retail/admissions transactions, hand sanitizer must be used between each transaction to prevent transfer of germs from one customer to another.
- While wearing gloves, do not touch your nose, mouth, eyes or face.
- Gloves should be worn during cleaning and disinfecting tasks, and be removed and disposed of immediately afterward.
- To safely remove gloves without contaminating the hands
 1. Pinch and hold the outside of the glove near the wrist area.
 2. Peel downwards, away from the wrist, turning the glove inside out.
 3. Pull the glove away until it is removed from the hand and hold the inside-out glove with the gloved hand.
 4. With your un-gloved hand, slide your finger/s under the wrist of the remaining glove, taking care not to touch the outside of the glove.
 5. Again, peel downwards, away from the wrist, turning the glove inside out.
 6. Continue to pull the glove down and over the inside-out glove held in your gloved hand.
 7. This will ensure that both gloves are inside out, one glove enveloped inside the other, with no contaminant on the bare hands.
 8. Wash and/or sanitize bare hands once gloves have been disposed of.
- Sites may make gloves available to visitors for use with touchscreens and other sensitive or difficult to clean interactive programmatic or exhibit components. Visitors should wear them only for that activity or use hand sanitizer before using them for a different component or activity to avoid transferring germs from place to place.

...Hand Hygiene...

- All visitors, customers, contractors, volunteers, and staff must practice good hand hygiene while on site. Washing hands properly with soap and water is the most effective, followed by proper use of a hand sanitizer with at least 60% alcohol. Proper use of hand sanitizer will kill the virus that causes COVID-19 but is not effective in killing all germ types. It may be less effective if hands are greasy or soiled.
- All visitors, customers, contractors, volunteers, and staff must wash their hands and/or use hand sanitizer when entering the visitor center and/or house museum before service is rendered. Noncompliance may be met with refusal of service.
- Hands should be washed and/or sanitized:
 - After using the restroom
 - After blowing one's nose
 - After cleaning
 - After handling garbage
 - After contact with "high touch" surfaces such as handrails, ATM machines or keypads, doorknobs, light switches, etc.
 - Before eating or drinking
 - Before touching your face, nose, mouth, or eyes
 - Between every retail/admissions transaction
 - During your workday, at least once every two hours

- Where restrooms are not readily available for handwashing, portable handwashing stations must be provided. In lieu of and/or in addition to handwashing stations, hand sanitizer with at least 60% alcohol must be provided in all service locations on site.
- It is recommended that sites display CDC handwashing posters in all restrooms and at all handwashing stations.
- Proper handwashing consists of the following steps:
 1. Wet hands with clean, running water (warm or cold) and apply soap.
 2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
 3. Scrub your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
 4. Rinse your hands well under clean, running water.
 5. Dry your hands using a clean towel or air dry them.
- Proper use of hand sanitizer either on bare or gloved hands consists of the following steps:
 1. Apply the sanitizer gel to the palm of one hand (read the label for correct amount).
 2. Rub palms together and rub gel over all the surfaces of your hands including between fingers, fingertips, back of the hands, and wrists.
 3. Keep rubbing the gel on hands and fingers until dry. This should take around 20 seconds – this contact time with the alcohol in the gel is necessary to kill the germs. Wiping sanitizer off with a towel or tissue will make it less effective in killing germs.

CLEANING & DISINFECTING

...Definitions...

- **Cleaning** refers to the removal of germs from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.
- **Disinfecting** is defined by use of chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection
- **PPE** is defined as Personal Protective equipment (glasses, goggles, gloves etc.)
- **Historic assets** are historic artifacts and documents, both in the permanent and education collections, as well as the materials, finishes, and fixtures of our historic structures.

...General...

- The risk of exposure to staff while cleaning and disinfecting is inherently low, but this risk should be minimized further with use of PPE.
- Basic PPE for cleaning and disinfecting at historic sites includes launderable clothing, face covering, and disposable gloves.
- Additional PPE for cleaning and disinfecting includes prescription glasses, safety glasses, goggles, or face shield when transferring or applying cleaning and disinfecting products.
- Staff should wear disposable gloves while handling trash and wash hands immediately after.
- Cleaning cloths should be placed in a plastic container that can be easily disinfected after use. Cloths should be laundered as soon as possible following guidelines provided here.
- Disposable wipes or paper towels should be disposed of immediately in a tightly closed bag.

... Non-Historic Assets...

- Public areas such as visitor centers, retail locations, and exhibit galleries should be cleaned and disinfected about once daily, but this may vary according to visitation levels. In retail locations, surfaces involved in payment transactions should be cleaned after each transaction.
- “High touch” surfaces being disinfected frequently throughout the day depending on visitation levels. “High touch” surfaces include door handles and push plates, railings, switches, touchscreens and countertops.
- Any items that visitors come in contact with should be disinfected.
- Staff offices, even private offices, should be disinfected several times a week, particularly keyboards, phones, door handles, light switches, desktops and drawer pulls, chair armrests and other “high touch” surfaces.
- Restrooms should be cleaned and disinfected several times throughout the day depending on visitation levels.
- If a staff person, volunteer, contractor, or visitor to the site becomes ill, the areas they have been in contact with should be closed down and the following steps taken:

- Open windows to the space and/or increase ventilation to air out the space for 24 hours before beginning cleaning of the area, if possible.
- Disinfect the area as recommended in these guidelines.
- **Disinfecting non-porous surfaces:**
 - Products:
 - Most common EPA-registered household disinfectants should be effective. Clorox and similar products that contain sodium hypochlorite are recommended.
 - Diluted household bleach solutions (at least 1000ppm sodium hypochlorite) can be used if appropriate for the surface. Ensure a wet contact time of at least 1 minute. To make a bleach solution, use 5 tablespoons of bleach (1/3 cup) in 1 gallon of water, or for a smaller batch, 4 teaspoons of bleach per quart of water.
 - Solutions of at least 70% alcohol can also be effective.
 - Follow the manufacturer's instructions for concentration, application, and contact time. Most will recommend surfaces stay wet with the product for a specified period of time for full effectiveness in killing germs.
 - Ensure any disinfectant product used is not past its expiration date.
 - Allow for adequate ventilation both during and after product application.
- **Disinfecting soft surfaces:**
 - Carpets, drapes, upholstery, etc. should be laundered in a washing machine if possible. Wall-to-wall carpets may be cleaned using detergent and steam extraction.
 - Soft surfaces may be sprayed with Lysol or other EPA-registered spray disinfectant made for that purpose. These products usually require a wet contact time for full effectiveness. Follow manufacturers' instructions, and ensure products are not expired.
 - Ensure proper ventilation during and after application.
- **Disinfecting electronics:**
 - Consider putting a wipeable cover on electronics such as touch screens, keypads, tablets and remote controls. These are purpose-produced and commercially available, but plastic cling wrap can also be effective.
 - Follow manufacturers' instructions for cleaning and disinfecting.
 - If no guidance is given for cleaning and disinfecting, use alcohol-based wipes or sprays containing at least 70% alcohol, and dry surface thoroughly.
- **Disinfecting Laundry:**
 - Soft surface items from sites to be laundered should be stored/transported in a tightly closed plastic bag when possible. Reusable cloth bags should be laundered and disinfected according to these guidelines for soft surfaces.
 - Gloves and face covering should be worn when handling laundry. When done, remove and dispose of gloves immediately and wash hands thoroughly.
 - Do not shake dirty laundry.
 - Launder items according to the manufacturer's recommendations using the warmest appropriate water setting, and dry completely.

... Historic Assets...

- Only historic assets that have been handled by or in close contact with visitors should need disinfecting. We require visitors and staff to wear masks and wash or sanitize their hands before engaging with historic assets to minimize the opportunity to shed virus on these sensitive materials.
- Chemicals recommended in these guidelines for disinfecting and cleaning non-historic assets should not be used for disinfecting and cleaning most historic assets. These chemicals can cause irreparable damage to irreplaceable cultural resources.
- Do *not* use the following to disinfect historic assets, inside historic house museums, or in collections storage areas:
 - Spray fumigants or disinfectants such as Lysol
 - Ultraviolet light
 - Ionizing/ozone-producing air filters
- The guidelines in this section for cleaning and disinfecting historic assets were developed by the HSD curatorial team and are drawn from a more detailed document they have developed for disinfecting historic assets. The recommendations included here are sufficient to address regular cleaning and disinfecting of historic assets.
- Historic assets that are small or fragile, mixed media, paper, or soft surfaces should not be disinfected by site staff.
- Should there be a circumstance requiring more intense cleaning, sites should proceed in consultation and cooperation with their Regional Curator.
- Routine Disinfection of “high touch” historic assets (handrails, doorknobs, door frames):
 - These directions assume these materials are gloss or satin finish painted surfaces, finished wood, glass, ceramic, or metal. *Do not use this method on other materials.* If you have any question, consult your Regional Curator.
 - “Routine” disinfection will depend on visitation. At minimum it is recommended to disinfect these surfaces twice weekly and at most once daily.
 - Should you notice any change to or degrading of the surface/finish, contact your Regional Curator for instructions.
 1. Use only mild, non-ionic soap such as Orvus paste or Ivory Liquid soap. If you can’t obtain these products, please check with your Regional Curator for alternatives.
 2. Make a soap and water solution using just enough soap to make a thin ring of bubbles when swirled into the water.
 3. Saturate the cleaning cloth and wring it out until just slightly damp. The cloth should not be dripping wet.
 4. Apply to a small area first to ensure it will not damage the finish. This is especially true of finished wood.
 5. Wipe the surface in one direction and do not re-submerge the cloth in the soap and water solution to avoid recontamination. Change cloths frequently.
 6. Leave surfaces wet/damp for five minutes to allow soap to deactivate the virus.
 7. Wipe down with a fresh cloth dampened with clean water to remove any soap residue from the surface.
 8. Dry surface with a clean cloth.

- Ceramic, terrazzo, stone and other non-porous or inorganic materials:
 - Items can be cleaned with 70% isopropyl alcohol if needed.
 - Never use alcohol on other materials, especially finished wood.
 - Clean the item with soap and water solution in these guidelines.
 1. Lightly dampen a cotton swab or pad with 70% isopropyl alcohol. Swab or pad should not be dripping wet or saturated.
 2. Spot-test a small area and wait to ensure there is no negative reaction.
 3. Wipe the artifact gently and allow to air dry. Ensure there is proper ventilation during and after application.

SITE OPERATING GUIDELINES

...General...

- In the Governor's Phase I reopening that begins May 1 and extends until at least May 18, all visitors may be required to call ahead for reservations and pre-pay admissions by phone. Visitors without reservations may be refused service at indoor facilities and may be asked to leave the grounds. Sites may allow for unreserved visitation if they can adequately restrict capacity to 25% or less. All visitors or household groups must pass the COVID-19 screening survey.
- Visitors are strongly encouraged but not required to wear face coverings.
- Operations at a site may be temporarily closed in part or whole should any of the following occur:
 - Staff, volunteer, contractor, or visitor have a suspected or lab-confirmed case of COVID-19.
 - The site's inventory of cleaning supplies and/or PPE is insufficient to safely operate as per these guidelines.
- Groups that arrive together in the same vehicle and/or of the same household group may gather together at the site. It is encouraged these groups be 5 or fewer.
- Visitors who do not follow requirements for social distancing and hand hygiene as per these guidelines may be refused service.
- All operations must be metered and monitored by site staff to ensure social distancing can be adhered to by staff and visitors. This may require a variety of mechanical and programmatic solutions such as doorbells, gates, appointments, etc.
- Any area where visitors may have to queue or wait for service should have appropriate distances identified between people.
- Picnic tables, playground equipment, and similar outdoor amenities should be disinfected at least once daily, or more frequently depending on visitation levels and staff capacity. Single-use items such as bicycles and golf carts must be disinfected after each user.
- Drinking fountains should be deactivated and/or boxed off and not available for use.
- Any interactive or "hands-on" exhibit component that cannot be disinfected after each visitor/user or after each household group should be removed from use by visitors.

...Retail & Admissions...

- Sites should take advantage of pay by phone options for both retail and admissions by having staff manually enter card numbers into the Elavon reader. Sales are entered POS with appropriate department/category and a receipt sent by email to the customer. Shipping charges should be added were needed using the appropriate department on the POS.
- Hand sanitizer should be accessible to both staff and visitors so they can sanitize their hands before and after each transaction.
- Where possible, card readers may be placed in front of the Plexiglas at cashier stations so visitors can swipe their own cards and enter their codes. Card readers and keypads must be disinfected between transactions as per the guidelines in this document.
- Sale of loose or non-prepackaged food items is not recommended

...Programs & Events...

- In Phase I, any onsite program must be limited to cohesive groups that arrive together and/or of the same household, this includes facilitated tours. It is encouraged these groups be no more than 5, but this will depend on the site's ability to keep staff at a safe distance.

...Rentals...

- Any facility rental must be limited to groups of the same household.
- Overnight lodging will not be available in Phase I of the Governor's Reopening Plan, which extends from May 1 to at least May 18.

SITE OPERATIONS PLANNING GUIDE

This is not an inclusive guide to all of the considerations for planning how you will operate the site once reopen, it is just a beginning. These answers may change as circumstances evolve.

- 1. How will your site check in with staff, volunteers and contractors at the beginning of their workday or shift to ensure they are feeling well and can be at work?**
- 2. How will your site ensure that each visitor who enters your facility/facilities wash or sanitize their hands before touching any surfaces inside or receiving service?** You may need to consider where you have hand sanitizer or handwashing stations located and how that is enforced.
- 3. How many people can your site's indoor facilities allow inside while providing enough space to enable proper social distancing? List each indoor facility separately.** If a single building has areas that can/should be separately metered (for example, gift shop vs. gallery vs. classroom), identify those, their safe capacity and how you will meter these spaces.
- 4. Will metering entry to indoor facilities impact your staffing? How?**
- 5. Does your visitor desk and/or cashier stations each have desk shields?**
- 6. How will you ensure that both visitors and staff are able to wash or sanitize their hands before and after each in-person retail or admissions transaction?**
- 7. How will your site handle in-person card payments?**
- 8. Will you have facilitated experiences (such as programs and tours)? How will you ensure proper social distancing practices during these experiences?**