



HEALTHIER WORKPLACES | A HEALTHIER WORLD

Back to Work Safely: Guidance for **Museums and Other Cultural Heritage and Collecting Institutions**

Guidance Document, 2nd edition

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Overview

Museums and other cultural heritage and collecting institutions and their workforces engage in the collection, preservation, study, and exhibition of objects and specimens of historical, cultural, scientific, and educational value. These establishments consist of art museums and non-retail art galleries; historical, military, natural history, science, and technology museums; archives; halls of fame; botanic gardens, aquariums, and zoos; traveling exhibitions; and more. Teaching and study collections within many academic campus departments and collection exhibits associated with specific corporations or governmental agencies are also included. These venues often have public faces that include displays, outdoor sculpture gardens, docent tours and lectures, performances and hands-on learning, student field trips, traveling exhibitions, and private events. The occupations that support the mission of museums include curation, conservation, art handling and preparation, scientific examination, education, exhibit design and fabrication, security, administration, maintenance, and more. Museums also collaborate locally and internationally to ship and receive loans and acquisitions (gifts as well as purchases) for temporary exhibits and ongoing research projects. Although important, most museums and collecting institutions, if not all, were deemed “nonessential” in the United States by state and federal governments, resulting in employers halting operations and closing workplaces. However, as some restrictions have lifted and continue to be lifted, many uncertainties still remain. Thus, there is a need for guidance on reducing the risk of transmission for museum and collecting institution employees and visitors. This document is intended to provide guidance and considerations for small and medium-sized museums and other cultural heritage and collecting institutions to implement health and safety measures to reduce the risk of transmitting COVID-19. While the scope of these guidance docu-

ments does not cover workplace testing or vaccination guidance, please refer to state, local, and federal guidance on these topics, such as the Centers for Disease Control and Prevention (CDC)’s [COVID-19 testing](#) and [vaccine](#) webpages.

Museum employers and administrators are faced with difficult questions that must be addressed as they reopen, resume normal operations, or continue normal operations, such as:

- How can we best protect the health and safety of our employees, visitors, and volunteers with consideration for the care and integrity of the diverse collection material types and environments?
- What communication is needed to keep everyone informed of the preventive steps being taken?
- What steps can we take to minimize the risk of disease transmission?
- What training is needed for our employees?
- What health and safety measures do we need to take regarding new virus variants?
- What do we do if an employee or visitor has tested positive for or is suspected to have COVID-19?
- What do we do if an employee or visitor is sick or not following guidelines?
- How do we handle high-traffic crowd management throughout the museum or institution, including during peak times?
- How do we deal with cleaning and disinfecting high-contact surfaces, such as check-in desks, computer keyboards, and door handles, regularly during the day?
- What can on-site vendors do to minimize COVID-19 transmission?
- What considerations should be given to developing a collections management policy for both living and educational collections?



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In addition to the questions asked by museum employers and administrators, museum employees, volunteers, and visitors are also thinking of ways that they can protect themselves.

The current scientific evidence indicates that SARS-CoV-2, the virus that causes COVID-19, is spread primarily by airborne transmission, through exposure to respiratory aerosols or droplets in air that carry the virus. These respiratory aerosols and droplets are generated by the human respiratory system during normal activities, including breathing, speaking, shouting, singing, coughing, and sneezing. Exposure to these respiratory droplets in poorly ventilated or crowded indoor spaces is particularly of concern, and infection can occur through exposure to mucus membranes, such as the eyes, nose, and mouth. In addition, while not the primary route of exposure, people may also become infected from touching surfaces contaminated with the virus. It has also been shown that the virus can survive in aerosols for hours and on surfaces for days, depending on the type of surface. Measures can be taken to reduce the risk of spreading COVID-19 from person to person or by contact with potentially contaminated surfaces.

The purpose of this guidance document is to provide clear and actionable steps towards the safe operations of museums and other cultural heritage and collecting institutions through prevention, early detection, and control of COVID-19. This document offers practical guidance for museums and other cultural heritage and collecting institutions to implement multiple layers of risk mitigation strategies through the hierarchy of controls, a system used to minimize or eliminate exposures to hazards. The hierarchy of controls ranks hazard control approaches in order of most effective to least effective—through the elimination of a hazard, substitution of a hazard, use of engineering controls, use of administrative controls, and correct use of personal protective equipment (PPE). Specifically, to reduce the risk of

transmitting COVID-19, the controls we focus on in this document are engineering controls, such as ventilation; administrative controls, such as physical distancing, enhanced cleaning and disinfecting practices, and personal hygiene; and PPE, such as gloves and face coverings. Aside from the hierarchy of controls, we also focus on mitigation strategies to use within restrooms and for high touch surfaces, employee wellness, training, waste and laundering, and communication. No single mitigation strategy will be sufficient to address COVID-19 health and safety risks; rather, a multilayered risk management approach using controls, which can include vaccines, is recommended to limit the spread of COVID-19.

It is important to continue to monitor the global (World Health Organization or WHO), federal (CDC), state, and local guidelines for changes or updates in recommendations, disinfection strategies, worker protections, and other COVID-19 risk management best practices. It is also important that museums and other cultural heritage and collecting institutions consistently monitor and evaluate the effectiveness of implemented mitigation strategies and alter their approaches as needed.

The following document addresses aspects of museums and other cultural heritage and collecting institutions that have not been previously evaluated in other AIHA guidance documents. Please refer to the “Resources” section for links to AIHA guidance documents concerning other areas that may have characteristics in common with and guidance applicable to museums and other cultural heritage and collecting institutions, including construction sites, general office settings, libraries, warehouses (i.e., for collection storage areas), retail services, restaurants and dining halls, and childcare centers. Employers should consult AIHA’s resources list to connect with other museums and professional organizations, such as the [American Alliance of Museums](#), for reopening



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plan examples, innovative practices, and recommendations for collections management policies.

Any relaxation or modification of the recommendations herein (e.g., based on employee vaccine status) should be based on and comply with federal, state, and local requirements, as well as best practices.

What should an Employer do to reduce risk for themselves, their employees, volunteers, and visitors?

Museum leadership and other cultural heritage and collecting institutional employers are encouraged to continually monitor global (WHO), federal (CDC), state, and local guidelines for changes or updates in recommendations, disinfection strategies, worker protections, and other COVID-19 best management practices. These employers should also consider developing a knowledgeable team to monitor, assess, and implement new strategies as they become available and as knowledge evolves regarding SARS-CoV-2 transmission, vaccines, new virus variants, and other aspects of the virus.

Employers are also encouraged to complete a task-based risk assessment or job hazard analysis to best determine, by job task, where engineering or administrative controls can be implemented to reduce or eliminate virus transmission. Refer to the [OSHA Job Hazard Analysis document](#).

Due to the wide variety of types and sizes of museums and other cultural heritage and collecting institution buildings and spaces, it may not be possible for all institutions to implement all of the following guidelines. However, implementing as many as possible through a multilayered risk management approach can help reduce health risks and risk of transmission.

Ventilation

- Keep heating, ventilation, and air conditioning (HVAC) systems operational to maintain thermal comfort and maximize outdoor air based on system design.
 - Strive to maintain the relative humidity at 40-60%.
 - Refer to [AIHA's Indoor Environmental Quality document](#).
 - **Confer with collections care employees or conservators on environmental needs in exhibit and collection storage areas.**
- If you need assistance on HVAC issues, ask an HVAC professional and see the American Society of Heating, Refrigerating, and Air-Conditioning Engineers' (ASHRAE) COVID-19 preparedness resources for more information.
 - AIHA occupational and environmental health and safety (OEHS) science professionals and industrial hygienists are also well-versed in general dilution ventilation. AIHA has a [consultants list](#) of such qualified professionals.
- Consider using portable high-efficiency particulate air (HEPA) filtration units with variable flow control or other ventilation-related engineering controls to accommodate differing room sizes and ventilation needs. Refer to [AIHA's Indoor Environmental Quality document](#) for more information. Consider whether the noise of these units when they are turned on is appropriate for the particular application.
- If fans, such as pedestal fans or hard mounted fans, are used, take steps to minimize air blowing from one person directly at another individual. If fans are disabled or removed, it is important to remain aware of and take steps to prevent [heat hazards](#).
 - Be mindful of using portable pedestal or overhead ceiling fans, as these may contribute to spread of the virus.



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- Use natural ventilation by opening windows and doors to increase air flow, if possible.

Enhanced Cleaning and Disinfecting Practices

- Check with your preservation and conservation employees or consultants about whether cleaning and disinfection treatments are needed for certain collections or exhibit-containing areas.
 - Conduct a risk assessment for exhibits made of materials that cannot be safely cleaned, such as historic surfaces, outdoor metal sculpture, or fragile stone, to determine if cleaning is necessary before making plans to enhance cleaning and disinfecting practices.
 - If a needs determination is made, ensure that these products have been vetted and are safe to use for all collection components. Many disinfectants and treatment technologies, such as ultraviolet germicidal irradiation (UVGI), may be unsafe for use or ineffective for use on collection items or historic surfaces.
 - Disinfection of some collections and exhibition materials may not need to be performed. Use good hand hygiene before and after handling collections and exhibition materials.
 - Refer to the [Canadian Conservation Institute's guidance on caring for heritage collections during the COVID-19 pandemic](#) and the [Northeast Document Conservation Center's guidance for disinfecting books and other collections](#).
- Consider developing a standard operating procedure, checklist, or audit system to consistently train employees on enhanced cleaning and disinfecting practices or to track when and how cleaning and disinfecting is conducted, including cleaning and disinfection of spaces previously occupied by someone confirmed to have had COVID-19. Refer to [AIHA's guidance document on workplace cleaning for COVID-19](#).
 - Make Safety Data Sheets (SDS) for cleaning and disinfection products available and ensure employees are aware of the hazards of use. Incorporate new hazards into the existing OSHA Hazard Communications Program.
 - Use disposable wipes or rags when available. Ensure reusable rags are maintained, handled, and cleaned per manufacturers' instructions. For more information, see the "Laundering" section below.
 - All items should be allowed to dry thoroughly after cleaning.
 - Establish a disinfection routine and ensure disinfection protocols follow product instructions for application and contact time.
- Select appropriate disinfectants.
 - The U.S. Environmental Protection Agency (EPA) has developed a list of products that meet EPA's criteria for use against SARS-CoV-2, [EPA List N](#).
 - Do not mix different EPA-registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing ammonia, sodium hypochlorite (bleach), or hydrogen peroxide.
 - Review product labels and SDS and follow manufacturer specifications for cleaning and disinfecting.
 - Allow for appropriate ventilation during cleaning and disinfecting.
- Provide appropriate signage regarding cleaning and disinfecting measures being taken, if needed.
- Place signage and barriers to keep visitors from touching exhibit barriers, signs, information booths, vitrines, and other frequently touched surfaces.
- Ensure any commonly used items and high-touch surfaces (e.g., pens, desks, chairs, benches, wheelchairs, microscope oculars, camera equipment, scanners, copiers, and online catalog lookup sta-



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tions) are cleaned and disinfected on a frequent or regular basis and after each use.

- If adequate cleaning and disinfection of frequently touched surfaces between each use cannot be accomplished, then the facility manager should consider leaving these areas closed or securing additional resources for cleaning supplies and cleaning professionals.
- Sharing equipment and workspaces should be discouraged wherever possible. Equipment that must be shared should be cleaned and disinfected before and after use.
- Cleaning and disinfecting protocols should be developed and implemented in cases where confirmed cases of COVID-19 are discovered. Refer to [AIHA's guidance document on workplace cleaning for COVID-19](#).
- Consider consulting an occupational and environmental health and safety (OEHS) science professional or industrial hygiene expert if additional advice is needed. AIHA has a consultants list of such qualified professionals.
- The employer should evaluate the museum or institution to determine the most appropriate application method for disinfection. Please refer to [EPA's guidance](#) on the use of different methods for applying disinfectants to learn more.
 - Currently, CDC does not recommend fogging, fumigation, or wide-area or electrostatic spraying as a primary method for surface disinfection in most cases. Refer to [CDC's COVID-19 webpage](#) on cleaning and disinfecting facilities.

Personal Hygiene

- Establish a “before and after work” handwashing or sanitizing protocol for all employees and volunteers.
- Provide handwashing stations or, if not feasible, touch-free automated hand sanitizer dispensers at high-traffic locations (e.g., at the institution's main

entrance, at exits, near elevators, and outside restrooms). These should contain hand sanitizer with at least 60% ethanol or 70% isopropyl alcohol.

- If providing neither a station nor a dispenser is feasible, then at a minimum, consider providing hand sanitizer at high-traffic locations. This sanitizer should contain at least 60% ethanol or 70% isopropyl alcohol.
- Post signs at each hand sanitizer station to encourage proper use and illustrate proper hand sanitizing techniques.

Physical Distancing

- Physical distancing can help limit transmission. Institution leadership should follow all local, state, or federal physical distancing requirements.
- Modify or adjust workstations to minimize close contact (e.g., within six feet or less for a cumulative 15 minutes over a 24-hour period) of employees and volunteers with other employees and volunteers, visitors, and others, when possible.
- Creating one-way foot traffic patterns, especially on stairs and through special exhibitions or galleries, may be appropriate to mitigate crowding and prevent clustering of people.
- Use methods to physically separate employees, volunteers, and visitors throughout the facility (e.g., break rooms, elevators, inside galleries, theaters or exhibition spaces, and entrance and exit areas), when possible.
 - Use visual cues, such as floor markings and signs, to encourage physical distancing.
 - Consider cordoning off 8-foot sections on benches or remove benches and replace them with distanced chairs if feasible.
 - Use barriers, such as screens, when possible. Be mindful that barriers can disrupt ventilation and airflow. Ropes with stanchions can help maintain distance between exhibits and visitors.



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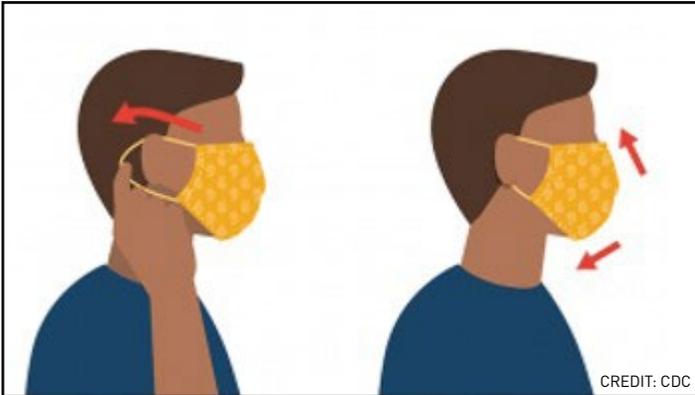
- If necessary, reduce the number of galleries that are open, particularly for dead-end areas where airflow is limited or, more importantly, if the airflow in an area is poor and is supplied with unfiltered recirculated air.
- Consider capacity limits (i.e., reducing the number of people allowed in the museum), following local, state, or federal public rules or guidelines.
- Limit person-to-person contact, monitor the number of visitors, and restrict access to certain areas, such as elevators (signs should state a maximum number of people per elevator per physical distancing guidelines), galleries (especially small, enclosed spaces with less ventilation), and gift shops.
- Consider different hours of operation for vulnerable populations like the elderly or others who may be medically compromised by illness or disease.
- Suspend coat and bag checks and use other means, such as coat self-checking for visitors, employees, and staff.
- For exhibits that do not allow adequate distancing of six feet between visitors, assess to determine if installations can be relocated elsewhere in the gallery or if barriers can be installed.
- Cancel or limit the number of participants in group visits, guided tours, public programs, and special or private events, following local and state guidelines. Consider holding events in outdoor areas as an alternative.
- Limit access to storage and workrooms to essential personnel. Consider strategies for alerting others that rooms are occupied.
- Limit the number of visitors and seating in libraries, common spaces, or reading rooms to provide physical distance between visitors using collection materials.
- Reduce capacity for areas that require seating or extended occupancies such as theaters, education spaces, meeting rooms, and employee and visitor transportation. Remove or block off seating, if possible.
- Ensure that seating meets occupancy limits and social gathering number limits required by local and state guidelines.
- Assigned seating should be used when appropriate (e.g., in theatres and for shows or demonstrations) such that guests are not seated next to one another, except for household groups.
- Stagger screening, show, and event times so that visitors for one event do not arrive at the same time as those for another.
- Post clear direction signs to ensure that entrances and exits, which preferably are separate from each other to accommodate one-way traffic patterns, to and from auditoriums, common areas, or meetings spaces are not areas of congregation or congestion.

Face Coverings

- Face coverings can help limit transmission. Employers should follow all local, state, or federal face covering requirements.
- Cloth or disposable non-medical face coverings are NOT PPE, but they do offer some protection to the wearer and others. Use of face coverings is not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.
- Train employees on the proper way to maintain, wear (covering both the nose and mouth), handle, and clean face coverings, as discussed by CDC. Refer to the graphic on the next page and to [CDC's guidance on how to wear masks](#).
- Encourage employees and volunteers to wear cloth or disposable face coverings at all times, particularly when physical distancing cannot be maintained.



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- Encourage employees and volunteers to wear cloth or disposable face coverings if using public transportation to get to the museum. Refer to [CDC's guidance on safe use of public transportation](#) during COVID-19.
- Additional information on cloth face coverings can be found in [CDC's guidance for using masks](#) to slow the spread of COVID-19.

Restrooms

- Post signage limiting restroom occupancy, to allow for proper physical distancing, and to remind visitors, volunteers, and employees to wash their hands before and after using the restroom.
- Minimize touchpoints when entering and exiting restrooms, if possible.
 - If the door cannot be opened without touching the handle, provide paper towels and a trash can by the door so that a paper towel can be used when touching the handle and then discarded.
 - Consider controlling access to bathrooms with a key so that disinfection measures can be better managed. If a key is used, consider disinfecting it after each use.
- If possible, allow doors to multi-stall restrooms to be opened and closed without touching handles.

- Place signs as reminders to close toilet lids (if present) before and after flushing.
- Use no-touch faucets, towel dispensers, soap dispensers, and waste receptacles when possible.
- Hand soap should be readily available for use by occupants.
- Provide paper towels in restrooms.
 - Refer to [AIHA's guidance document on using hand air dryers during COVID-19](#) for more information.
- If feasible, work with HVAC professionals to ensure that bathrooms are well ventilated and, if filtration is used, that proper filtration practices are being followed.
- Increase frequency and efforts to keep bathrooms clean and properly disinfected and maintain a record of sanitary work practices.
 - Take precautions when cleaning or maintaining sinks and toilets (i.e., avoid creating aerosols, close toilet lids before flushing, and use disposable gloves).

Waste and Laundering

- Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.
- Any reusable cloth materials should be washed and dried on the highest temperature setting allowable for the fabric.
- When handling dirty laundry, wear gloves and a mask and do not shake.
- Clothes hampers or laundry baskets, if used, should be cleaned according to manufacturers' instructions.
- Wash hands after handling dirty laundry.



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Training

- Provide awareness training to employees and volunteers on cleaning and disinfection products used in the museum following [OSHA's Hazard Communication Standards](#).
 - For employees who will use cleaning and disinfecting products, training should also include proper use, PPE, disposal, and relevant precautionary measures.
 - Provide instruction and training to employees and volunteers on how to correctly maintain, handle, wear, clean, and dispose of cloth or disposable face coverings.
 - Provide appropriate training and education for all PPE, including disposable and reusable gloves.
 - **NOTE: If an employer chooses to provide or the employee supplies their own N95 respirator, please fully consider all the potential OSHA requirements.**
 - Use videos and in-person visual demonstrations of proper PPE donning and doffing procedures, while maintaining physical distancing during these demonstrations.
 - Emphasize that care must be taken when putting on and taking off PPE, to ensure that the worker or the item does not become contaminated.
 - PPE should be: (1) disposed of; or (2) properly disinfected and stored in a clean location when not in use.
 - Stress hand hygiene before and after handling all PPE.
 - Correct maintenance on handling, wearing, cleaning, and disposing of PPE.
 - Make SDS for cleaning and disinfection products available and ensure employees and volunteers are aware of the hazards of use. Incorporate new hazards into your existing [OSHA Hazard Communication Program](#).
 - Implement and inform employees and volunteers of supportive workplace policies, as applicable.
 - Provide flexible sick leave policies consistent with public health guidance. Providing paid sick leave is important to encourage employees to stay home when sick.
 - Refer to [CDC's guidance for businesses and employers](#) regarding COVID-19 test results from employees and volunteers.
 - Offer employees and volunteers the flexibility to stay home to care for sick family members.
 - Implement human resources policies consistent with public health guidance and state and federal workplace laws. For more information on employer responsibilities, visit the [Department of Labor](#) and Equal [Employment Opportunity Commission](#) websites.
- Provide employee assistance programs and community resources to help employees and volunteers manage stress and receive support.
- Offer special accommodations upon request for employees and volunteers at increased risk for severe illness, to allow them to perform their duties safely, while also protecting sensitive employee health information.
- Post signs and reminders at entrances and in strategic places to provide instructions on hand hygiene, respiratory hygiene, and cough etiquette. Include signs with images for non-English readers, as needed.
 - Train employees on new or modified working schedules, how they can stay up to date on new scheduling requirements, and how to make requests for schedule changes if a need arises.

Other Control Measures

- Employees, visitors, and volunteers should be encouraged to stay home if they are symptomatic.



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- Employers are encouraged to explore work-from-home options, staggered work shifts and hours, and other flexible approaches for employees, if feasible.
- If employees and volunteers commute to the museum using public transportation, consider asking them to:
 - Use other forms of transportation, if possible.
 - Maintain physical distancing and wear cloth or disposable face coverings.
 - Commute at off-peak times, if possible.
 - Wash their hands before the trip and as soon as possible after arriving.
- Educate employees and volunteers on recognizing the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms.
- Although perhaps not necessary if handwashing protocols are rigorously followed, consider providing disposable gloves to employees and volunteers, especially for cleaning and disinfecting, removing waste materials, and cleaning the restrooms.
 - If gloves are worn, change them regularly; wearing gloves is not a substitute for handwashing.
 - If worn, inspect gloves frequently. Remove or replace any gloves that are torn, damaged, or contaminated.
- Plan for employee and volunteer absences by developing flexible attendance and sick leave policies, plan for alternative coverage, and monitor and track employee and volunteer absences related to COVID-19.
- Discourage hands-on demonstrations unless safe cleaning, disinfection, and physical distancing protocols can be maintained to keep employees, volunteers, and visitors safe.
- Establish a payment system for entrance fees, in gift shops, etc., to minimize contact time between staff and visitors.
 - Consider implementing an app-based system.
 - Consider having the staff take payment information over the phone when visitors reserve tickets.
- Stay informed of local and state COVID-19 information and updates in your geographic area.

Communication

- Communication and training should be easy to understand, in languages preferred to be spoken or read by employees and volunteers, and include accurate and timely information.
 - Methods for communicating with employees and volunteers could include emails, texts, automated phone calls, websites, and signage.
- Adopt a communication strategy that is customized to your institution and emphasizes transparency.
 - Communicate to employees and volunteers what is being done to mitigate the spread of COVID-19 (e.g., disinfection routines, health policies for staff, and health and safety measures in place).
 - Establish formal and informal routes of communication for employees and volunteers to express concerns, questions, comments, and feedback.
- If the institution is in a multi-tenant location or shared facility, consider establishing a communication pathway with other tenants and occupants to inform each other of confirmed COVID-19 cases present in the building.
 - Communicate ventilation concerns and response with other tenants and occupants (e.g., HVAC systems can be shared by multiple tenants and therefore adjusting the system in one area may have negative effects in another area).



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Employee Wellness

- Communicate to employees and volunteers the importance of being vigilant when monitoring personal health symptoms and contacting museum leadership if or when they start to feel sick.
- Revisit your sick leave program to allow for time off and follow all HR policies and HIPAA or other regulatory requirements.
- Conduct employee and volunteer temperature screenings and wellness checks before each shift. **(NOTE: Comply with [OSHA's Access to Employee Medical and Exposure Records Standard for confidentiality](#).)**
 - Temperature screening methods can include a manual thermometer (use non-contact infrared thermometers) or thermal camera meeting [FDA recommendations](#). Additional screening information and guidance can be found on [CDC's website](#).
 - Assign an employee or volunteer to manage and conduct temperature screenings while following CDC guidelines. If this is not possible, employees and volunteers can self-check their own temperatures.
 - Screening should be done in a manner such that the privacy of employees and volunteers is respected.
 - Perform visual inspections for other signs of illness (e.g., flushed cheeks, rapid or difficult breathing without recent physical activity, fatigue, or coughing).
 - Employees who have a fever of 100.4° F (38° C) or above or other signs of illness should not be admitted into the facility.
- Museum leadership can consider incorporating a wellness questionnaire similar to [CDC's general screening survey](#). However, we encourage checking your regional health department websites. For example, there is a [personnel screening form](#) available on the San Francisco Department of Health's website.
- Refer to [CDC's guidance for businesses and employers](#) regarding employees and volunteers who have symptoms or signs of COVID-19 (i.e., fever, cough, or shortness of breath) or who have had close contact with someone who has COVID-19.
- If an employee or volunteer tests positive for COVID-19:
 - Follow federal, state, and local recommendations for reporting and communicating cases, while remaining compliant with regulations and guidelines pertaining to protecting private health information, such as confidentiality required by the Americans with Disabilities Act (ADA). See [OSHA for guidance on reporting workplace exposures to COVID-19](#).
 - Engage HR immediately and enforce all applicable HR rules and regulations.
 - Follow federal, state, and local recommendations for any individuals that had close contact with the employee or volunteer.
 - Use trained personnel to perform enhanced cleaning and disinfecting of any surfaces that the employee or volunteer may have come into contact with,
 - Encourage the trained personnel to wear face coverings and gloves, dispose of their gloves after use, and wash their hands and faces when complete. Visibly dirty surfaces should be cleaned using a detergent or soap and water PRIOR to disinfection.
 - For disinfection, use only EPA-registered disinfectants on [List N](#).
- Encourage employees and volunteers who are sick to stay home. This includes:



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- People with flu-like symptoms or who live with someone with these clinical symptoms.
- People with COVID-19, people who live with someone with COVID-19, or people who have been exposed to someone with COVID-19.
- Institutional leadership is encouraged to educate employees and volunteers to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms.

What should an Employee or Volunteer do to reduce risk to themselves and visitors?

- Employees and volunteers should evaluate their health continuously; if they are sick, have a fever or symptoms, or have someone sick at home, then they should remain home.
 - **NOTE: Employer HR policies, HIPAA guidelines, and other laws should be followed at all times.**
- Disinfect shared equipment and high-touch surfaces frequently, and at least after each use.
- Maintain a clean cloth or disposable face covering. Replace frequently, if needed, and replace after contamination.
 - When wearing a face covering, ensure both your nose and mouth are covered.
 - Change your face covering if it becomes wet, damaged, or contaminated.
 - Wash your hands before touching your face covering.
 - Wear a cloth or disposable face covering while using public transportation.
 - Additional information on cloth face coverings can be found on [CDC's website](#). (**NOTE:** Cloth or disposable non-valved face coverings primarily protect other people but can also protect wearers. When wearing a face covering, ensure both your nose and mouth are covered. Use of a cloth or disposable face covering is not a substitute for physical distancing.)
- Have extra face coverings on hand.
- Maintain good hygiene practices by washing your hands with soap and water for at least 20 seconds or using a hand sanitizer with at least 60% ethanol or 70% isopropyl alcohol. For more information, refer to [CDC's handwashing guidelines](#).
- If you are an employee or volunteer who tests positive for COVID-19, or who has come in close contact with someone who has COVID-19, follow [CDC's guidelines](#).
- At minimum, wash your hands after each visitor interaction; after being in a public place; after touching your face covering; after blowing your nose, coughing, or sneezing; after using the restroom; after touching any common contact surfaces; and before eating. Avoid touching your eyes, nose, or mouth with unwashed hands.
- Wash your hands when you arrive at work, throughout the day during various activities (e.g., before and after preparing food, after handling garbage, and after using the bathroom), after touching your face covering, when you leave work, and when you arrive home.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you do not have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing, or sneezing. Learn more about [coughing and sneezing etiquette](#).
- Let your employer or volunteer lead know if you have concerns about PPE or face coverings that may be provided to you and ensure that you are properly instructed on how to use them. CDC has recommended sequences for donning and doffing PPE.



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- **NOTE: If an employer chooses to provide an N95 respirator, please fully consider all the potential OSHA requirements.**

Worker Rights

This document presents and supports workplace protections that are essential components of occupational health and safety systems and programs. These basic protections are worker rights, as well as essential ingredients of occupational health and safety systems.

What can a Visitor do to reduce the risk of transmission of COVID-19?

- Comply with instructions regarding COVID-19 precautions set forth by the museum or institution, including but not limited to restricted access, capacity limits, physical distancing requirements, and use of face coverings.
- Evaluate your own health and your family's health continuously. If you are sick, stay home. If you have an elevated temperature, stay home. If someone in your house is sick, stay home. If you have allergies and uncontrollable sneezing, stay home.
- Check with the museum or institution, prior to going, regarding any current requirements for visitors and volunteers to follow specific to COVID-19.
- Use online and electronic services in place of in-person services, if feasible.
 - If you anticipate needing to complete paperwork, consider filling this out at home prior to your visit or bringing your own pen.
- Wear a cloth or disposable face covering as you enter and leave the museum building and while indoors.
- Wash your hands before and after you leave the museum building, if possible, especially if touching common high-touch surfaces. If not feasible, use hand sanitizer that contains at least 60% ethanol

or 70% isopropyl alcohol when you enter and before you leave the museum building.

- If using public transportation to get to and from the museum or institution, wash your hands when you enter and before you leave the building. If not feasible, use hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol.
- Maintain a distance of at least six feet from other visitors, volunteers, and employees when walking through the museum building, whenever possible.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you do not have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing, or sneezing. Learn more about [coughing and sneezing etiquette](#).

Resources

[AIHA: Effective and Safe Practices, Guidance for Custodians, Cleaning, and Maintenance Staff Guidance Document](#)

[AIHA: Employers' Guide to COVID-19 Cleaning and Disinfection in Non-Healthcare Workplaces Guidance Document](#)

[AIHA: Joint Consensus Statement on Addressing the Aerosol Transmission of SARS-CoV-2 and Recommendations for Preventing Occupational Exposures](#)

[AIHA: Reducing the Risk of COVID-19 Using Engineering Controls Guidance Document](#)

[AIHA: Worker Rights White Paper](#)

[AIHA: Workplace Cleaning for COVID-19](#)

[American Alliance of Museums: Collections Management Policy](#)



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[American Alliance of Museums: COVID-19 Resources & Information for the Museum Field](#)

[American Alliance of Museums: Long-Term Closure Re-Entry Checklist for Cultural Institutions and Collection Care Stewards](#)

[American Water Works Association \(AWWA\): COVID-19 Resource Topics](#)

[American Institute for Conservation \(AIC\): Resources – COVID-19 Pandemic](#)

[ASHRAE: Coronavirus \(COVID-19\) Response Resources from ASHRAE and Others](#)

[Canadian Conservation Institute \(CCI\): Caring for Heritage Collections During the COVID-19 Pandemic](#)

[CDC: COVID-19 – Cleaning and Disinfecting Your Facility](#)

[CDC: COVID-19 – COVID-19 Testing Overview](#)

[CDC: COVID-19 – General Business Frequently Asked Questions](#)

[CDC: COVID-19 – Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 \(COVID-19\)](#)

[CDC: COVID-19 – How to Wear Masks](#)

[CDC: COVID-19 – Protect Yourself When Using Transportation](#)

[CDC: COVID-19 – Use Masks to Slow the Spread of COVID-19](#)

[CDC: COVID-19 – Vaccines for COVID-19](#)

[CDC: Facilities COVID-19 Screening](#)

[Department of Labor: Coronavirus Resources](#)

[EPA: Can I Use Fogging, Fumigation, or Electrostatic Spraying or Drones to Help Control COVID-19?](#)

[EPA: List N](#)

[FDA: Non-Contact Temperature Assessment Devices During the COVID-19 Pandemic](#)

[National Park Service: COVID-19 Exhibitory Cleaning Guidance](#)

[Northeast Document Conservation Center \(NEDCC\): Disinfecting Books and Other Collections](#)

[OSHA: Access to Employee Medical and Exposure Records](#)

[OSHA: Hazard Communication Standards](#)

[OSHA: Heat](#)

[OSHA: Job Hazard Analysis](#)

[OSHA: Recording Workplace Exposures to COVID-19](#)

[REALM Project: Reopening Archives, Libraries and Museums](#)

[San Francisco Department of Public Health: Attachment A-1 – Personnel Screening Form](#)

[U.S. Equal Employment Opportunity Commission: Coronavirus and COVID-19](#)

[U.S. Equal Employment Opportunity Commission: What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws](#)



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Disclaimer

AIHA is not legally responsible and shall be held harmless from all claims, causes of action, and demands, whatsoever, any third party may incur on account of damage, loss or injury resulting from adhering to these guidelines.

These guidance documents were primarily developed for those smaller business that don't have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders.

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