

Chicago Museum Industry Guidebook



OVERVIEW

Museums serve the public in an important role as spaces that bring people together to share in arts and cultural experiences, build community, enhance quality of life, and add vibrancy and engage audiences of all ages. Like other industries, the impact of COVID-19 has been devastating to Chicago's museums. These guidelines are designed to aid organizations as they plan to reopen in accordance with the guidelines of city, state and federal government. These considerations are recommendations only and are not intended to be exhaustive or comprehensive in scope and not every consideration will apply to every museum/organization. Guidance from the CDC, State of Illinois, and City of Chicago supersedes these recommendations.

This document presents information sourced from the City of Chicago Museum Working Team based on their research and planning for reopening. The organizations who gave input on this document vary in size, scale, capacity, programming, staffing and financial resources. The Department of Cultural Affairs and Special Events (DCASE) is issuing this document as a resource to the community. The mission of DCASE is to enrich Chicago's artistic vitality and cultural vibrancy. DCASE positions this document as an open collaboration with the museum community. Neither DCASE or any of the working group members or institutions will be liable for any loss, damage, or claim with respect to any liabilities, including direct, special, indirect, or consequential damages, incurred in connection with the document or reliance on the information presented.

IMPORTANT NOTE:

DISCLAIMER FOR MUSEUM INDUSTRY REOPENING DOCUMENT

This document is intended to provide information to those in the museum sector to assist in reopening according to the guidelines provided by the City of Chicago. Users of this document should not in any manner rely upon or construe the information or resource materials in this document as legal, or other professional advice and should not act or fail to act based upon the information in this document without seeking the services of a competent legal or other professional. Note: This document has been created utilizing a number of models and examples from various resources, including guidance and guidelines from international industry associations, national arts and cultural organizations, other states' guidance, State of Illinois documents, City of Chicago documents and Chicago based institutional knowledge. All sources are noted where applicable

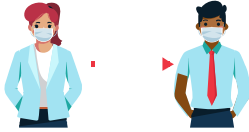


Considerations:

- Healthy interactions
 - Social distancing
 - Gathering size
 - Protective gear
 - Hygiene requirements
- Safe spaces & conditions
 - Entry access
 - Cleaning standards
 - Visual guidance
 - Workplace conditions
- Operational resilience & monitoring
 - Flexible models
 - Operational resiliency
 - Travel guidelines
 - Testing / tracking



Healthy interactions



1. Social Distancing:

Limitations on physical distance to other individuals

- a. Ensure > 6 ft. between individuals where possible unless this creates a safety hazard
 - i. Seek to increase physical space between personnel and/or guests while standing in lines, using elevators and restrooms, and moving around facilities
 - i. Signage should direct guests to avoid elevators and use stairways as possible.
 - ii. Elevator capacities should be considered and clearly communicated
 - iii. Elevator staging space should include >6 ft. spacing marked on the floor with accompanying signage.
 - iv. Consider restroom guidelines to maintain >6 ft. distance
 - v. Small restrooms may need staging space outside the restroom with >6 ft. markings on floor and signage to stage guest use
 - vi. If possible, post clear CDC encouraged hand washing procedures in restrooms
 - ii. Consider placement of furniture, reconfiguring office spaces, limiting use of small spaces (including closing smaller galleries)
- b. Physical barriers are recommended to provide protection during ticketing interactions, for front desk greeters and for attendant(s) at payment terminals and must be accessible to people with disabilities
- c. Provide dedicated training to staff on how to properly enforce social distancing in public spaces
 - i. Specific training should be given on knowledge and communication of protocols for persons with disabilities. Suggested training resources located on National ADA Center - At Your Service: Welcoming Customers with Disabilities <https://adata.org/project/your-service-welcoming-customers-disabilities-your-one-stop-center>
 - ii. Restrict seating to enable social distancing while ensuring ADA accessibility
- d. Consider not having coat check open.



- e. Consider use of prominent signage and floor markers showing the > 6ft. distancing, direction of foot traffic, and graphics with people wearing face coverings.
- f. Museum shops should follow [State of Illinois](#) and [City of Chicago](#) retail guidelines.



2. Gathering Size:

In early Phase Four attendance thresholds should be determined by establishing 25% of building capacity and will move to 50% as soon as CDPH deems it safe to increase

- i. Monitor capacity at all times
 - a. For smaller organizations that are able to maintain single direction traffic, tracking access into the space and number of visitors should be a priority
 - b. Depending on available space, some museums may need to rely on outdoor space to stage guests for ticketing and entry, with > 6 ft. spacing marked on pavement and accompanying signage directing guests to observe markings.

No group greater than 50 with physical distancing between groups

- i. Ensure space is large enough to accommodate > 6 ft. social distancing between visitor groups and individuals and reconsider pathways to enhance distancing
 - a. When possible, station guest service staff near problem points to help manage traffic flow if not in jeopardy of contributing to crowding problem
- ii. Outdoor gatherings for more than 50 people in controlled spaces can be considered as long as social distancing can be monitored and maintained
- iii. Limit gatherings of personnel in meeting rooms and other gathering points
 - a. Meeting rooms may need removable seats removed to ensure >6 ft. spacing or seats blocked if seating is not removable
 - b. All meetings should be considered for remote access before considering an in-person gathering



Temporarily pause interactive exhibits with high-touch components, group tours, and audio tours to minimize use of shared items and promote physical distancing.

- i. Consider moving audio tours to a phone or personal device platform.
- ii. Small group tours can be considered if space allows appropriate distancing between participants.

Create policies and expectations to include on all pre-arrival material and to post near entry and ticketing areas to set expectations for the guest's behavior while visiting and be transparent about what steps the museum is taking to make the guests' visit as safe as possible, include cleaning practices.



3. Protective Gear

Face coverings: In any indoor or outdoor common spaces face coverings must be worn over nose and mouth.

- i. Please refer to the [IHPS FAQ for Businesses Concerning Use of Face-Coverings During COVID-19](#) for additional information. An additional resource for research is the [Considerations for Mask Policies](#) issued by the American Alliance of Museums
- ii. Exceptions may be made for individuals with medical conditions or disabilities that prevent them from safely wearing a face-covering. For more information, please see the questions on reasonable accommodations in the [IHPS FAQ for Businesses Concerning Use of Face-Coverings During COVID-19](#).
- iii. Clearly visible signage providing simple graphic explanation should be posted at visitor entrance and in common areas (near OSHA, other regulatory postings) to explain face-covering policy.
 - a. Signs should be provided in multiple languages based upon the demographics of your organization's visitors and employees
- iv. Employers shall issue disposable or cloth face coverings to all onsite personnel
 - a. Non-clear face coverings hinder the ability to read lips and facial expressions. When it is not possible to use a clear face covering, the institution still has a responsibility to communicate effectively. The following could be considered depending on the situation:



- i. Communication aids, like print-outs or visual tools like personal dry-erase board.
- ii. FaceTime/video calls (i.e. the individual doing the communication goes to an area where they can safely remove their face coverings and talk with the individual via videophone, or have them text/email)
- b. In workplace settings face coverings may be removed where personnel are working alone in segregated spaces (e.g. cubicles with walls, private offices, etc.), removed on break time, to eat or drink, or in outdoor workspaces where employees do not regularly come within six feet of other personnel or visitors while social distance is maintained.
- c. All staff should be educated how to wear and take off face coverings properly.

There is growing evidence that gloves might increase rather than decrease transmission, but when requested, employers shall issue latex free disposable gloves for personnel transacting business with customers. When possible, employer will facilitate touchless transactions for purchases or ticketed entries.



4. Hygiene Requirements

Promote frequent hand washing or, if soap and water are not readily available, use of hand sanitizer that contains at least 60% alcohol for all staff and visitors – especially in higher-volume environments.

- i. Provide a simple graphic explanation of hand washing and hand cleaning signage at the entrance, bathrooms, kitchen, dining or cafeteria, meeting rooms, and others.
 1. Signs should be provided in multiple languages based upon the demographics of your organization's visitors and employees
- ii. The American Alliance of Museums recommends these two resources for their comprehensive health and safety information for employers:
 1. [CDC's Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019](#)
 2. [OSHA/HHS's Guidance for Preparing Workplaces for COVID-19](#)



Provide hand sanitizer or spray disinfectants at entry and exit points, offer easily accessible sanitary stations (hand wash or sanitizer) placed around the building for personnel and guests.

All guests, staff, volunteers, visitors should practice respiratory hygiene/cough etiquette. Where appropriate, organization can provide a simple explanation of respiratory hygiene/cough etiquette that can be understood via graphics or appropriate languages for that organization's demographics.

Ensure hygienic interactions with touch surfaces.

- i. Clean and sanitize shared tools and equipment between each shift and/or when the equipment is transferred to a new person
- ii. Minimize use of high touch areas including doors, elevators, water fountains, interactives (interactive exhibits, activity areas, audio tours), cash transactions and items like paper visitor guides.
 1. Consider providing, when deemed useful, clear signage for stairs, refillable water bottle stations, cashless payment options or donation boxes.
 2. Develop disinfecting protocols for listening and viewing devices in accordance with CDC or health facility standards.
 3. If feasible consider making all bathroom sinks and toilets touchless.
 4. Consider closing exhibits/spaces/gift store for certain periods of time to efficiently sanitize

Safe spaces & conditions



5. Entry Access Protocol

Prior to leaving home, all individuals encouraged to self-identify symptoms and stay at home if symptomatic.

Prior to entry to establishment, employees self-screen to ensure no symptoms of COVID-19 (e.g., questionnaire)

- a. Subject to the guidance of the Commissioner of Health, the questions may include:
 - i. Have you had a body temperature over 100 degrees Fahrenheit or have you used a fever reducer in the previous 24 hours to treat a body temperature over 100 degrees Fahrenheit?



- ii. Do you have a new cough that you cannot attribute to another health condition?
- iii. Do you have a new or worsening sore throat that you cannot attribute to another health condition?
- iv. Do you have new shortness of breath that you cannot attribute to another health condition?
- v. Have you recently developed a complete loss of smell or taste?

Employees that do not pass screening or become ill in the facility should be directed to appropriate medical care/testing. If test results are positive for COVID-19, they should self-quarantine for 14 days and not return to work until 72 hours after recovery in isolation. For a full list of testing sites in Illinois please visit, Health: [COVID-19 Testing Sites | IDPH](#)

1. See additional measures from the [State of Illinois](#) and [City of Chicago](#) for workplace guidelines.

Provide a dedicated public entrance/exit, while ensuring ADA accessibility



6. Cleaning and Disinfecting Standards

Cleaning vs. Disinfecting

Cleaning refers to the use of products such as soap and water, which remove germs, dust, and soiling from surfaces. The cleaners reduce the risk of infection by removing the germs, but they do not necessarily kill the germs. Disinfecting refers to the use of products that are specifically designed to kill germs on surfaces. COVID-19 guidelines issued by the CDC require the use of disinfectants that will kill the virus on the surfaces being cleaned.

1. Specific personnel should be assigned responsibilities for broad cleaning and disinfecting shared and public spaces and should be properly trained in products and procedures.
 - a. Training should include when to use a face covering, gloves or other PPE, how to properly put on, use, and take off, and dispose of necessary PPE
 - b. Gloves and gowns (or coveralls, aprons, uniforms) or other PPE should be compatible with the disinfectant products being used



- c. Ensure staff are educated on the hazards of the cleaning chemicals used in the workplace and follow manufacturer's instructions for all cleaners and disinfectants
- d. Ensure staff reports breaches in face covering such as a tear in gloves or any other potential exposures to their supervisor

Specific Guidelines for Historic Surfaces and Materials

Many disinfectants contain bleach, alcohol, and other ingredients that can damage historic surfaces, so extreme care must be taken when selecting these products.

- a. Wood surfaces like historic handrails and doors should only be cleaned with products that will not impact the finish. Do not use products containing bleach or alcohol. Test products in an inconspicuous area first.
- b. Do not use bleach on hard porous materials like stone, brick and ceramics which can absorb the material.
- c. Create a soap and water solution from a mild or gentle soap (Ivory liquid soap or Orvus) for use on painted surfaces, handrails, etc. and always test in an inconspicuous area first. Place in a spray bottle for use.
 - i. The droplets released from spray bottles can impact finishes, as such, when cleaning, wet the paper towel and wipe the surface, rather than spraying the surface directly to limit the amount of water used since it can damage finishes.
- d. Use paper towels rather than cotton cloths, so that they can be discarded after use.
- e. Hard surfaces including stone, brick and ceramics should be wiped down with soap and water first, followed by disinfecting with an alcohol-based solution (minimum 70%).

General Recommendations

- a. In high traffic public areas when possible eliminate soft surfaces, for example replacing upholstered chairs with those that have a hard seat and back.
- b. Utilize garbage cans that are "no touch".
- c. Consider providing personnel with items such as alcohol wipes (minimum 60% alcohol) to be used for keyboards, telephones, and other items in their personal workspace.
- d. Only essential items should be kept on desks and tables to make cleaning as easy and efficient as possible
- e. Scheduling protocol should be established for all areas and surfaces based on usage by personnel and visitors



- i. Bathrooms and frequently touched items like chairs, door handles, light switches, elevator buttons, point of sale terminals, protective barriers, and handrails should be cleaned on a regular schedule throughout the day
- ii. Offices, break rooms, lobby areas, studios, work rooms, and other shared spaces should be cleaned at the end of each day at a minimum, but more frequently if use warrants it.



7. Visual Guidance

- a. Post guidelines and criteria for visitors to enter (e.g., face coverings, social distancing)
 - i. When possible provide solutions to control flow of traffic, mitigate bottlenecks and lines and reinforce social distancing including floor marks and signage.
 - i. It is recommended to communicate standards, revised hours, procedures, limited capacity, ticketing procedures, any specific accommodations, etc. to customers via website pre-arrival as well as onsite.
 - ii. Consider posting disclaimers at all entrances, exits, and egress clearly stating that by entering the facility, attendees accept all risk in attending in-person events and will adhere to all social distancing and protective equipment use requirements
 - a. Signage may not remove all organizational liability but informs visitors that they understand their risks and responsibilities



8. Workplace

Training and Communication About Policies

Museums should provide ongoing training for staff to protect staff and promote safe interactions with visitors. The [State of Illinois](#) provides training information.



The National Institute of Environmental Health Sciences (NIEHS) offers educational resources and tools intended for workers who are at greatest risk of exposure during the COVID-19 pandemic, including a training on protecting oneself from COVID-19 in the workplace.

Education and training materials for employees and the public, such as fact sheets and posters are available at the CDC's and IHPS's.

Give staff clear guidelines for how to respond if visitors are not following health and safety protocols, such as alerting museum security or a high-level supervisor.

Workspace Social Distancing Measures

In many cultural institutions, workspaces are the same as public spaces. However, there may be some spaces that are staff-only. These different types of spaces should be acknowledged and practices should be adapted as appropriate. Overall, review which locations, buildings, and parts of buildings/offices personnel should have access to and how the spaces can be used or re-purposed for meetings and workspaces.

1. Physical Social Distancing (ensure >6ft. distance between workstations)
 - a. This may require changing furniture placement and/or conversion of space, e.g. conference room to office space.
 - b. If proper distance is not possible, partitions are recommended.
 - c. Prohibit or limit access to particularly tight spaces, high traffic areas, etc.
 - d. Reappropriate larger event/conference spaces for break space if possible
 - e. In open-concept/flexible workstation spaces, consider assigning seats
 - f. If possible, create outdoor spaces for meetings and lunch breaks.
 - g. Create schedules for meeting spaces, and ensure the space is properly sanitized between meetings
2. Entry Access (mail delivery; building access for external contractors)
 - a. No visitors: Only essential personnel are allowed in personnel areas
 - i. Designate mail pick-up and drop-off space to limit contact with staff
 - ii. Schedule necessary visits from contractors to limit contact with staff
 - iii. Create internal policies for notifying colleagues of any external visitors (deliveries, contractor, IT support)



- iv. Make face coverings available for visitors who arrive unprepared
3. Contact Precautions
- a. Cleaning and disinfecting between staggered shifts/workstation usage
 1. Discourage personnel from using other workers' phones, desks, offices, or other work tools and equipment, when possible
 2. Limit access to shared kitchen amenities like refrigerators, toasters, coffee machines, microwaves, water filters, etc.
 3. Reevaluate procedures and policies for washing shared uniforms and miscellaneous items to ensure proper sanitation
4. HVAC considerations
- a. Follow appropriate engineering guidelines for operational heating, ventilating, and air conditioning systems outlined by the American Society of Heating and Refrigeration and Air Conditioner Engineers - ASHRAE.
 - i. Improve filtration/disinfection as possible, including increasing filtration efficiency and researching other filter types.
 - ii. Ensure proper functionality of controllers, building automation systems, dampers, filters, economizers, and other HVAC components.
 - iii. As possible, increase the ratio of outside air within the facility. Check that exhaust fans are venting properly to the outdoors, and check intake fans to avoid risk of nearby hazards (e.g., nearby exhaust)
 - iv. Consider maintaining relative humidity levels between 40-60% to reduce risk of virus transmission and improve efficacy of prevention efforts. Dry air below 40% relative humidity has been shown to reduce healthy immune system function (respiratory epithelium, skin, etc.), increase transmission of some airborne viruses and droplets (COVID-19 still being studied), increase survival rate of pathogens and decrease effectiveness of hand hygiene and surface cleaning because of surface recontamination or too-quick drying of disinfectants
 - v. For HVAC systems that are able to handle MERV-13 or smaller Higher MERV (Minimum Efficiency Reporting Value) level of 13+. MERV was developed by the American Society of Heating and Refrigeration and Air Conditioner Engineers - ASHRAE. MERV values vary from 1 to 16. The higher the MERV value is the value the more efficient the filter will be in trapping airborne particles



9. Flexible Models

1. Staff Scheduling
 - a. Limit in person work and minimize employee contact where possible.
 - i. Implement flexible work sites and hours (e.g.: work from home, limit onsite personnel, staggered shifts).
 - b. Consider phased re-opening on an institutional level (first wave = staff essential to prepare for reopening, etc.)
 - c. Postpone non-essential gatherings, limit size of meetings, require appointments for guests, utilize virtual meetings whenever possible (internal and external)
 - d. Create dedicated work teams where possible with reduced overlap to restrict exposure
 - e. more staggered report times or altered shifts to minimize staff gatherings, limit in person meetings
2. Expanded Sick Leave:
 - a. Ensure that personnel are aware of and understand current and updated policies
 - i. Consider permitting personnel to stay home to care for a sick family member or take care of children due to school and childcare closures or draft non-punitive “emergency sick leave” policies that does not require a positive COVID-19 test result or a healthcare provider’s note to validate their illness, qualify for sick leave, or to return to work as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner.
 - ii. Additional flexibilities might include giving advances on future sick leave and allowing personnel to donate sick leave to each other
 - iii. Prominently post OSHA and CARES act notifications in common work areas so that staff are aware of protections.
 - iv. Plan for increased frequency of personnel absences and ensuring coverage with staggered staffing by identifying critical job functions and positions and planning for alternative coverage by cross-training personnel (similar to planning for holiday staffing)
 - v. Contingency plan for scaled back public hours or limited access to spaces within the institution, due to fewer staff onsite at any given time.



3. Supportive Policies:

- a. Connect staff (including volunteers) to social, behavioral, and other support services.
- b. Create new policies and procedures as needed and determine how to message and communicate with all personnel (ex. FAQs sheets)
 - i. Consider how policies apply to everyone who is involved in your organization - artists, volunteers, interns, independent contractors, board members, students, teachers, and administrators
 - ii. Be mindful of ADA standards when creating policies so as to not discriminate with respect to age, health conditions, and other factors, including those identified as risk factors for COVID-19
- c. Stay in close communication with your staff to ensure that the organization is aware of all perspectives. Consider establishing an email address to field direct questions to leadership
- d. Adapt annual performance review/goal setting processes to account for the ways in which remote or limited work has affected productivity and goals.
- e. Consider negotiating reduced parking fees at local lots when staff must work onsite.

4. Programming flexibility

- a. Make plans to continue to host virtual programming as recovery phases advance to accommodate guests who don't feel safe returning to public life.
 - i. Seek input from audiences about what will make them feel safe about returning to your organization in person.
- b. Brainstorm smaller programming activations that can serve to engage passersby and pedestrians with your institution.
- c. Define goals and strategies for virtual engagement to best serve audiences and institutional goals.



10. Operation Resiliency

1. Consider advance ticket/reservation only option (when accessible) to limit capacity and interaction with personnel
2. Eliminate use of cash and institute contactless transactions as much as possible, including ticket and merchandise purchasing



3. Clearly communicate changes in procedures to the public and train personnel on the procedures and how to explain them
4. Provide training for all personnel on engagement strategies to encourage visitors to follow health and safety protocols, and how to respond when protocols are not being followed
5. Consider adding these guidelines to your institution's Disaster Relief Plan to prepare for a future pandemic.



11. Travel Guidelines

Limit travel of employees across multiple locations (if applicable)



12. Testing and Tracking

- a. If an employee contracts COVID-19, they must follow all [CDC guidelines](#) before returning to work
- b. If an employee is identified as being COVID19 positive by testing, cleaning and disinfecting must be performed according to [CDC guidelines](#)
- c. Any employee who has had close contact with co-worker or any other person who is diagnosed with COVID-19 should be tested and self-quarantine, if need be, according to [CDC Guidelines](#)
- d. If facility becomes aware of 2 or more cases possibly associated with an establishment over a 14-day period, employers are required to report cases to Chicago Department of Public Health (CDPH)
- e. Follow all other CDPH guidance set forth and comply with CDPH recommendations in response to workplace outbreak.

Government/Network/Organization Guidelines:

[State of Illinois Restore Illinois Phase 4](#)

[State of Illinois Museum Guidelines](#)

[City of Chicago Phase 4 Museum Opening Playbook](#)

[American Alliance of Museums](#)



City of Chicago Trusted PPE Provider

Accessibility & Inclusion

[ADA National Network - Includes COVID-19 resources](#)

[Disability:IN Chicagoland COVID-19 Resource List](#)

[Great Lakes ADA Center - Includes COVID-19 resources](#)

[What You Should Know About COVID-19 and the ADA, the Rehabilitation Act and other EEO Laws](#)

[National ADA Center - At Your Service: Welcoming Customers with Disabilities](#)

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