

The COVID-19 pandemic has necessitated that organizations change the way they operate to keep their employees safe and limit the spread of the COVID-19 virus. Law enforcement personnel have consistent contact with the public as a function of their job and are therefore likely to come into contact with suspected or confirmed cases of COVID-19. As we move through this crisis, law enforcement agencies and personnel are faced with the challenge of developing and implementing strategies to manage potential COVID-19 exposure while performing their critical job functions.

### Law Enforcement Agencies

#### Health and Safety Plan

- Develop a COVID-19 health and safety plan, and designate a person to lead the implementation of the plan. The plan should include:
  - Protocols for disinfecting:
    - Duty belts and gear
    - Patrol cars
    - Holding cells
    - Locker rooms
    - Break rooms
    - Dispatch radios
    - Other frequently touched surfaces in the station, including door handles, desks, keyboards, laptops, etc.
  - Actions to take in the event a member of law enforcement is exposed to COVID-19
  - Minimum return-to-work requirements for any law enforcement personnel infected with COVID-19
  - Contingency plans to address staffing shortages due to illness or caring for family members
  - Protocols for detaining and isolating a person with suspected or confirmed COVID-19, including when the person does not comply
  - Clarification of instances when police officers have the authority to enforce quarantine orders
- Make necessary modifications to ensure proper social distancing within the station.
- Consider developing a plan for alternative housing options for officers who may live with family members who are at high risk for COVID-19.
- Coordinate with the local health department to establish a testing protocol for officers.
- Ensure support services are available for department personnel and their families to address COVID-19 issues.
- Ensure sick leave policies are flexible and consistent with public health guidance and that employees are aware of and understand these policies.



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#### Training

- Ensure all law enforcement personnel participate in COVID-19 training that addresses, at a minimum:
  - Methods to minimize exposure to COVID-19, including:
    - Hand-washing
    - Coughing/sneezing etiquette
    - Social distancing
    - Masks and face coverings
    - Use of cleaning and disinfecting supplies

- Respiratory protection personal protective equipment (PPE), including proper containment and disposal of PPE
- Prepare officers to reply to COVID-19-related questions about preventing the spread, quarantine, testing, etc.

### Communication

- Communicate the COVID-19 health and safety plan and any changes in policies to all employees of the department.
- Monitor guidance provided by the Centers for Disease Control and Prevention (CDC), and maintain consistent communication with the local health department.
- Establish procedures to communicate the latest public health information to law enforcement personnel, including any impact this information has on department policies and procedures.

### Operations

- Restrict public access to police department facilities.
- Implement shift change procedures that will limit gatherings of personnel.
- Implement a specific protocol with dispatch centers to determine if a caller or patient may have signs or symptoms and risk factors for COVID-19, and communicate that information to responders.
- Develop protocols to deal with calls related to COVID-19 patients, including wellness checks, medication delivery, etc.
- Establish protocols for officers to complete investigations and reports by telephone for offenses that do not require police presence (e.g., incidents that do not involve violence, the endangerment of life or safety, or crimes in progress and those that do not require the collection of evidence).
- Take necessary steps to ensure your incident command system can be activated, if necessary.

## Law Enforcement Personnel

### General Precautions

- Avoid touching your eyes, nose, and mouth.
- Wash your hands with soap and water for at least 20 seconds, or use hand sanitizer with at least 60% alcohol (i.e., proper hand hygiene).
- Keep disinfectant wipes and hand sanitizer in an easily accessible place during your shift.
- Maintain proper social distancing (i.e., a distance of at least 6 feet) at all times possible.
- Properly cover coughs and sneezes, and wash your hands immediately after coughing (i.e., proper cough/sneeze etiquette).
- Make appropriate plans if a person at higher risk for COVID-19 lives in your household.
- Do not work if you are sick. Self-monitor for symptoms, and if you develop a temperature greater than 100.4°F or symptoms such as cough or shortness of breath, notify your supervisor, and call your healthcare provider for medical advice and guidance before visiting the provider's office. Follow your department's return-to-work policy after recovering from the illness.

### PPE

- Avoid close contact with individuals with a suspected or confirmed case of COVID-19 until you have proper PPE.
- Only trained personnel wearing appropriate PPE are permitted to have contact with people who have or are suspected to have COVID-19.

- Appropriate PPE includes:
  - A fit-tested National Institute for Occupational Safety and Health (NIOSH)-approved N95 or higher-level respirator or a surgical mask if a respirator is not available
  - One pair of disposable examination gloves
  - Eye protection, such as goggles or a face shield that fully covers the front and sides of the face
  - A disposable isolation gown or single-use/disposable coveralls
- If unable to wear a disposable gown or coveralls because they limit access to your duty belt and gear, ensure your duty belt and gear are disinfected after contact with the individual.
- If your PPE becomes contaminated or compromised (e.g., torn), discard and replace your PPE according to the policies and procedures of the department.
- Follow CDC guidance if you are reusing, reprocessing, and storing PPE.

### Interaction with People Suspected of Having or Confirmed to Have COVID-19

After any interactions with people who are suspected of having or confirmed to have COVID-19, officers should:

- Avoid touching their eyes, nose, and mouth.
- Immediately practice proper hand hygiene.
- As soon as possible, clean and disinfect their duty belt and gear with an Environmental Protection Agency (EPA)-approved disinfectant in accordance with the product label.
- Change their uniform as soon as possible. If possible, change at the station, and wear street clothes home.
- After changing out of their uniform, wash or sanitize their hands.
- Launder the potentially contaminated uniform according to department procedures and manufacturer's recommendations.
- Document the date and location of the contact, including:
  - Any individuals the officers may have been in contact with since the suspected or confirmed COVID-19 contact
  - Communicating documented information to the officers' supervisor, infection control officer, and/or occupational health program

If in close contact with a suspect during apprehension:

- Clean and disinfect your duty belt and gear with an EPA-approved disinfectant in accordance with the product label before reusing.
- Follow department procedures for containing and disposing of PPE.
- Follow department procedures for containing and laundering uniforms.

After an on-scene investigation:

- Remove and dispose of PPE in accordance with department policy.
- Practice proper hand hygiene.
- Disinfect duty belt and gear if they came into contact with any individual suspected or confirmed to have COVID-19.
- Give any person taken into custody a mask or face covering.
- As much as possible, isolate any person taken into custody during the intake process.
- If a person taken into custody exhibits symptoms of COVID-19:
  - Assess the person for transport to a healthcare facility.

- If transport to a healthcare facility is necessary, isolate the individual, and contact emergency medical services (EMS).
- Do not transport the individual.
- Coordinate with the medical facility, and allow EMS to make the transport.

When entering a building where a suspected COVID-19 death has occurred or the cause of death is unknown:

- Assume others in the building are infected.
- Limit the number of law enforcement personnel in the building.
- Wear appropriate PPE.
- Maintain appropriate social distancing at all times, especially within the building.
- Do not touch potentially contaminated surfaces.
- Avoid direct contact with the body of someone who has died or is suspected to have died from COVID-19.
- Do not move or transport the body without consulting with the medical examiner/coroner's office.

### After Known Exposure to COVID-19

- Contact your supervisor, infection control officer, and/or occupational health program immediately if you are exposed to a patient with suspected or confirmed COVID-19 when you are not wearing recommended PPE. Complete any occupational exposure report forms required by your department's exposure control plan.
- If sufficient resources and personnel are available, stay home for 14 days after any exposure of 10 minutes or more or if exposure was high-risk (e.g., the individual coughed in the face of the officer).
- If you are permitted to continue working, take additional precautions, including wearing a face mask, adhering to cough etiquette and proper hand hygiene, and monitoring for symptoms for 14 days after you were exposed to the patient.
- If you are permitted to continue working, the department should take the following additional precautions for a period of 14 days after exposure:
  - Screen the officer before each shift to ensure he or she is symptom-free.
  - Ensure the officer is following any guidelines implemented under the occupational health program.
  - Ensure the officer adheres to proper social distancing practices.
  - Ensure the officer wears a face mask or a cloth face covering at all times to protect others.
- If an exposed officer develops symptoms of COVID-19 or tests positive for COVID-19, the officer should:
  - Contact his or her supervisor, infection control officer, and/or occupational health program immediately.
  - Stay home except to get emergency medical care and self-isolate from other members of the household and pets.
  - Wear a face mask when around any people.
  - Practice proper hand hygiene and cough/sneeze etiquette.
- If an exposed officer develops symptoms of COVID-19 or tests positive for COVID-19, the department should:
  - Send the officer home immediately, and encourage him or her to follow CDC guidance regarding medical treatment.
  - Clean and disinfect all surfaces in the officer's workspace, including his or her vehicle, workspace, and anywhere in the station house he or she may have been present.
- Before leaving home isolation, the officer should consult with department officials, healthcare officials, and the local health department.
- If you have not been tested, you may leave home isolation if:
  - You have no fever for at least 72 consecutive hours without using fever-reducing medication.
  - Other symptoms, including cough, have improved.

- It has been at least 10 days since the onset of symptoms.
- If you have not been tested, you may leave home isolation if:
  - You have no fever without using fever-reducing medicine.
  - Other symptoms, including cough, have improved.
  - You have received negative results from two COVID-19 tests conducted at least 24 hours apart.