



**Loss Control
Division**

POLICE PERSONNEL *Coronavirus (Covid-19) Safety Protocol*

STANDARD OPERATING PROCEDURE



TERRY SANDERS, POLICE SAFETY CONSULTANT

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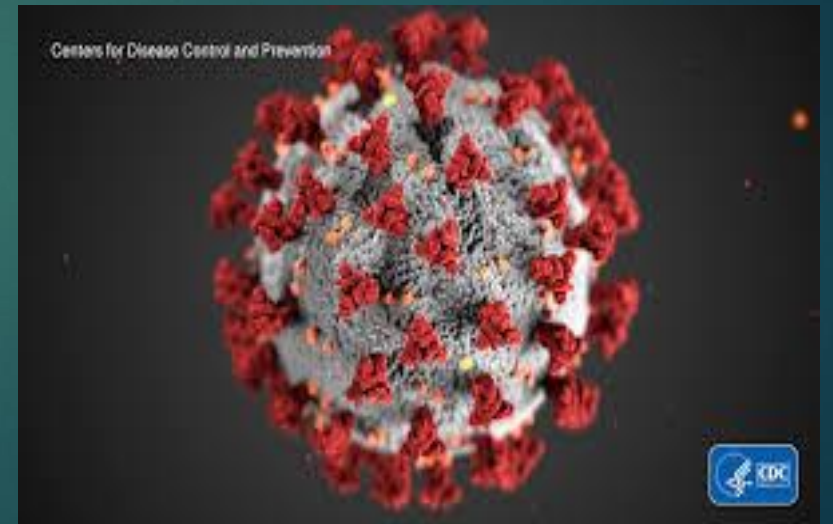
APOSTC CEU's RULES

For certified police officers to obtain APOST CEU's this training must be in a classroom setting with a designated instructor. A Certificate of Training signed by the officer and instructor should be kept in departmental training files.

A Training Certificate for this PowerPoint along with all other resource materials on the Coronavirus Personnel Protection SOP can be downloaded at www.losscontrol.org under **Reference Documents** by searching Key Word "Covid".

PURPOSE

- ▶ The purpose of this policy and training is to protect police personnel as a result of a Coronavirus (COVID-19) pandemic.



PROTECTION

- ▶ Other policies deal with the overall response to the pandemic however; the singular purpose of this policy is your protection!



LIMITS ON SUPPLIES AND EQUIPMENT

- ▶ During a pandemic, there may be a shortages of necessary supplies. The city will make every effort to acquire all Personal Protective Equipment (PPE), however, there may be times that equipment/supplies can't be obtained.
- ▶ Employees may have to make necessary adjustments to any shortage of supplies.
- ▶ Supervisors are to be made aware of the situations.



DEFINITIONS

- ▶ **Coronavirus (COVID-19)** – A respiratory (Airborne Pathogen) illness that can spread from person to person, infected birds and many mammals including humans. COVID-19 includes Causative (biological pathogen) agents of MERS, SARS and COVID-19.
- ▶ **Airborne Pathogens** – Disease or illness-producing agents such as viruses or bacteria that generally can't be seen but are transmitted/floating in the air.
- ▶ **Alternative Response (AR)** – Officers assigned desk duty to complete low priority calls for service taking reports via telephone.

COVID-19 SIGNS & SYMPTOMS



People may be sick with the virus for 1 to 14 days before developing symptoms. The most common symptoms of coronavirus disease (COVID-19) are fever, tiredness, and dry cough.

People may experience:

- ▶ Cough
- ▶ Fever
- ▶ Tiredness
- ▶ Loss of taste and smell and
- ▶ Difficulty breathing (severe cases)

PROTECT YOURSELF AND OTHERS



The following measures should be taken to reduce the potential risk of police personnel being infected with Coronavirus (COVID-19).

Upon declaration of a Pandemic/Epidemic:

- ▶ Review current policy and make necessary updates.
- ▶ Standard Operating Procedures by nature are “living manuals” and must be kept up to date. Pandemics change, and information gathered in response to an outbreak requires protocols to adapt.

UPON DECLARATION

- ▶ Complete Pandemic/Epidemic Checklist
- ▶ The checklist will ensure critical areas are not overlooked



PANDEMIC/EPIDEMIC PREPAREDNESS CHECKLIST



This Checklist will immediately be completed by the Patrol Commander and forwarded to the Chief of Police.

- ___ 1. Reviewed SOP for necessary updates with copy issued to all personnel.
- ___ 2. PPE Inventory - Personnel have necessary equipment.
- ___ 3. Hand sanitizer supplied throughout building.
- ___ 4. State Department of Health, State Attorney General, and Governors directives reviewed with staff and supervisors - Copies issued to all personnel.
- ___ 5. Updated copy of CDC Law Enforcement Guidelines - Issued to all personnel.
- ___ 6. Sign stating the "Police Department Closed" to traffic due to pandemic with number listed to call for non-emergency police reports has been placed on entry door.
- ___ 7. SRO's reassigned to patrol.

CHECKLIST CONTINUED

___ 8. Detectives placed on modified duties.

___ 9. Contacted Fire Chief concerning potential decontamination of personnel.

___ 10. Necessary PPE is on hand – (*not limited to*) Gloves, masks, eye protection - includes face shields and goggles; and clothing - includes gowns, aprons, head coverings and shoe covers.

___ 11. PPE ordered with _____ expected delivery date.

___ 12. Clean up chemicals and hand sanitizer are on hand.

___ 13. Clean up chemicals and hand sanitizer purchased.

___ 14. Hazardous waste bins placed in building for disposal of used PPE.

PERSONAL PROTECTIVE EQUIPMENT (PPE) AND CLEANING SUPPLIES

- Ensure that all necessary PPE and supplies are ordered.
- Due to shortages at these times critical supplies such as M95 mask, face shields, gloves and hand sanitizer should be kept in stock.



PRACTICE



-
- ▶ All personnel should practice all Social Distancing Guidelines as recommended by the CDC (six feet apart or more).
 - ▶ Wash hands often, use hand sanitizer, and practice sanitary measures as recommended by CDC.
 - ▶ If you have touched anything such as doorknobs, desktops, paperwork, money, etc., do not touch your face until you sanitize your hands.
 - ▶ Routinely clean commonly touched surfaces and sanitize all areas of your workspace(s) and equipment, including patrol vehicle.

KNOWN EXPOSURE

- ▶ If an employee experiences a known exposure and/or is exhibiting symptoms, employee will immediately contact their supervisor, and is to voluntarily go home (self Isolate) and/or will be sent home.



COVID-19:
Reporting Illness and
Exposure

CONFIRMED POSITIVE



- ▶ If an employee is diagnosed/confirmed positive with the virus, their work area must be disinfected before allowing additional employees access.
- ▶ Any vehicles should be shut down and disinfected before allowing another employee to use the vehicle.

SOCIAL DISTANCING INCLUDES

- ▶ Limiting the number of personnel in close contact at the station. Confine your activities to your assigned section. If you don't work in dispatch, the jail, records, patrol, CID, Special Ops, or the Administrative offices, then don't hangout out in those areas.



ADDITIONAL MEASURES

- ▶ Immediately reduced responses to traffic collision events on both private property and roadways. Officers should only be dispatched to collisions that involve injury, disabled vehicles blocking roadways, or combative subjects.
- ▶ Dispatchers should be directed to instruct involved parties to exchange drivers/vehicle and insurance information. Dispatch can provide motorist a CAD-generated event number for insurance purposes.
- ▶ All patrol shifts will be placed on modified roll call. Officers will not meet in the squad room prior to shift. All pass-on information conducted in regular roll call should be done via the Mobile Data Terminal (MDT) in each patrol vehicle.

ALTERNATIVE RESPONSE (AR)

Alternative Response (AR) is established. Two officers per shift will be assigned to desks in victim interview rooms and completed Incident/ Offense Reports via telephone. Criteria for AR to be assigned by Dispatch include:

- a. Victim only calls where there are no injuries, suspect, or offender present.
- b. Burglaries with no forced entry or apparent scene to process, exceptions are scenes with actual physical evidence for collection beyond fingerprints.
- c. Theft reports and shoplifting reports.

REASSIGNMENTS

- ▶ School Resource Officers will be reassigned to the Patrol Division, once schools are cancelled, or other duties as assigned.
- ▶ Detectives will be placed on modified duties.

LIMITED ENFORCEMENT



- ▶ Sworn personnel are directed to use discretion on criminal offenses that do not absolutely require a physical arrest. When applicable, sworn personnel are instructed to complete a case report and follow-up on the action by swearing to an arrest warrant later. The exception is domestic violence and violent felonies. These do require an arrest and officers should wear their PPE at these times.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

- ▶ When available, disposable mask (Surgical Masks, not N95 masks) should be placed on all arrestees with their hands cuffed behind their backs prior to being transported in a patrol vehicle. If available, spit nets should also be used when necessary.



TRAFFIC ENFORCEMENT



- ▶ Sworn personnel are instructed to enforce only dangerous moving violations on city roadways. To limit contact, non-dangerous equipment violations and administrative violations are not to be enforced.

CDC LAW ENFORCEMENT GUIDELINES

- ▶ The most up to date handout for law enforcement from the CDC will be printed for all personnel.



Law Enforcement
Guidelines for
COVID-19

INFORMATION UPDATES

- ▶ Command Staff will participate in daily conference calls via EMA on the current status of the virus, health care system, and other public safety and stakeholder operations.



DECONTAMINATION

- ▶ Command Staff will coordinate with Fire and Rescue to provide decontamination of officers and equipment in response to confirmed or suspected exposure.



LIMIT ACCESS TO POLICE DEPARTMENT

- ▶ Do not let anyone into the station beyond the lobby unless necessary.
- ▶ A sign will be posted on the entry door of the police department with a number to call notifying the public to return home and call in order to make a non-emergency report.



WARRANTS



- ▶ If someone comes to the station to turn themselves in pursuant to a warrant. Serve the warrant and allow them to sign out via a signature bond. Quickly verify name, DOB, address and phone number then after signature bond is signed allow them to leave. Do not fingerprint arrestee and complete the arrest report stating circumstances of the arrest in the narrative.

RESPONDING TO CALLS FOR SERVICE



Responding personnel should obtain/be given as much information as possible about the incident. Communicate with dispatch/PSAP and pre-determine the following before arriving on scene.

1. Does patient have fever >100.4 or higher?
2. Does patient have symptoms such as, cough, difficulty breathing, fever, and /or body aches.
3. Has the patient traveled recently or been in large crowds?
4. Has the Patient flown, cruised or been out of the country in the past two weeks?

SLOW DOWN!

- ▶ Slow down making close contact on calls and ask questions pertinent to COVID-19. Treat this just like you would on a search prior to a transport. Don't trust that someone else has asked the proper questions, just like you wouldn't trust that somebody else did the proper search for a weapon!



QUESTIONS SHOULD INCLUDE:



-
- ▶ Do you have a fever?
 - ▶ Have you been sick, what are your symptoms?
 - ▶ Have you or anyone in your household been asked to self-quarantine?
 - ▶ Has anyone in your household been sick? What are/were their symptoms?
 - ▶ Have you been in contact with someone that has tested positive for COVID-19?

CONTACT AND COVER

- ▶ When two officers are on a call together, practice the technique of “Contact and Cover.” One officer interacts with the complainant/victim, while the other remains at least 6 feet away closely watching the area for officer safety. This not only provides good officer safety but will also limit potential exposure.



POSSIBLE COVID-19 POSITIVE

- ▶ Upon identifying a possible COVID-19 positive individual based on the pre-determined screening questions, officers should have the appropriate PPE on hand prior to interaction.
- ▶ Do not interact unless the call absolutely requires it. Supervisors will be notified anytime officers are responding to possible COVID-19 calls. If available, officers should don the following PPE:
- ▶ CDC guidelines should be followed for the donning and removal of PPE.
- ▶ The CDC guidelines are in your written policy (Attachment C)

<https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

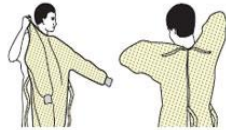
CDC Guidelines

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

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

1. GOWN

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



2. MASK OR RESPIRATOR

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



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



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

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



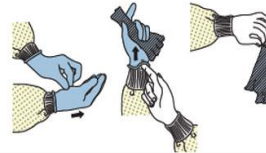
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HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

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

1. GLOVES

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



2. GOGGLES OR FACE SHIELD

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



3. GOWN

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

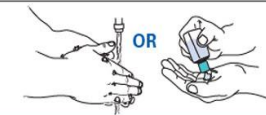


4. MASK OR RESPIRATOR

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



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



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



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

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

1. GOWN AND GLOVES

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



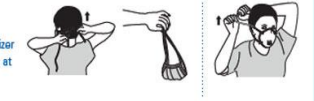
2. GOGGLES OR FACE SHIELD

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

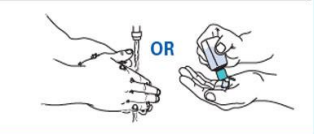


3. MASK OR RESPIRATOR

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



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



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



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DON PPE



- ▶ **Mask/Respiratory Protection:** To protect against airborne pathogens, any officer coming into close contact with a known suspected COVID-19 carrier should wear a N95 respirator and eye protection. Proper fitting is crucial, and officers should follow CDC guidelines. When N95's are unavailable, a surgical mask or appropriate face shield should be worn.
- ▶ **Eye Protection:** Officers should wear eye protection (*goggles or safety glasses*) that cover the front and sides of the face.
- ▶ **Gloves/Gowns:** Officers should wear disposable medical gloves and a gown (*fluid resistant or impermeable*) when physically transporting possible COVID-19 individuals, and other high-contact activities.

MEDICAL CALLS

- ▶ On medical calls, only enter with medical personnel if necessary. If you do enter, wear mask and gloves. If possible, observe from a distance.
- ▶ On death calls, assume the deceased has the virus and suit up in PPE.
- ▶ Limit the number of personnel who are making direct contact when interacting with suspected or known COVID-19 individuals.

REMOVING PPE



- ▶ After exposure or potential exposure to COVID-19, officers shall remove their PPE in accordance the Center for Disease Control guidance on Personal Protective Equipment. The discarded PPE should be placed in the hazardous waste bins.

IMMEDIATELY FOLLOWING A CALL, OFFICERS SHOULD:

1. If you believe you have been exposed to the virus, notify your supervisor before leaving the scene.
2. On your return to the station, place vehicle out of service until proper decontamination can be conducted. Limit officer movement through station. Officer should remain with vehicle until directed by supervisor.
3. PPE should be carefully removed without contaminating one's eyes, mucous membranes, or clothing with potentially infectious materials.
4. Discard disposable PPE in the hazardous waste bins.

FOLLOWING CALL CONTINUED

5. Re-useable PPE shall be cleaned and disinfected per the manufacturer's reprocessing instructions, or a mixture of bleach and water, hydrogen peroxide, or disinfecting disposable wipes.
6. Hand hygiene should be performed immediately after removal of PPE.
7. The soles of employee's shoes are to be sprayed with EPA-registered, hospital grade, disinfectant spray.

**An ounce of prevention is
worth a pound of cure.**

- Benjamin Franklin







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