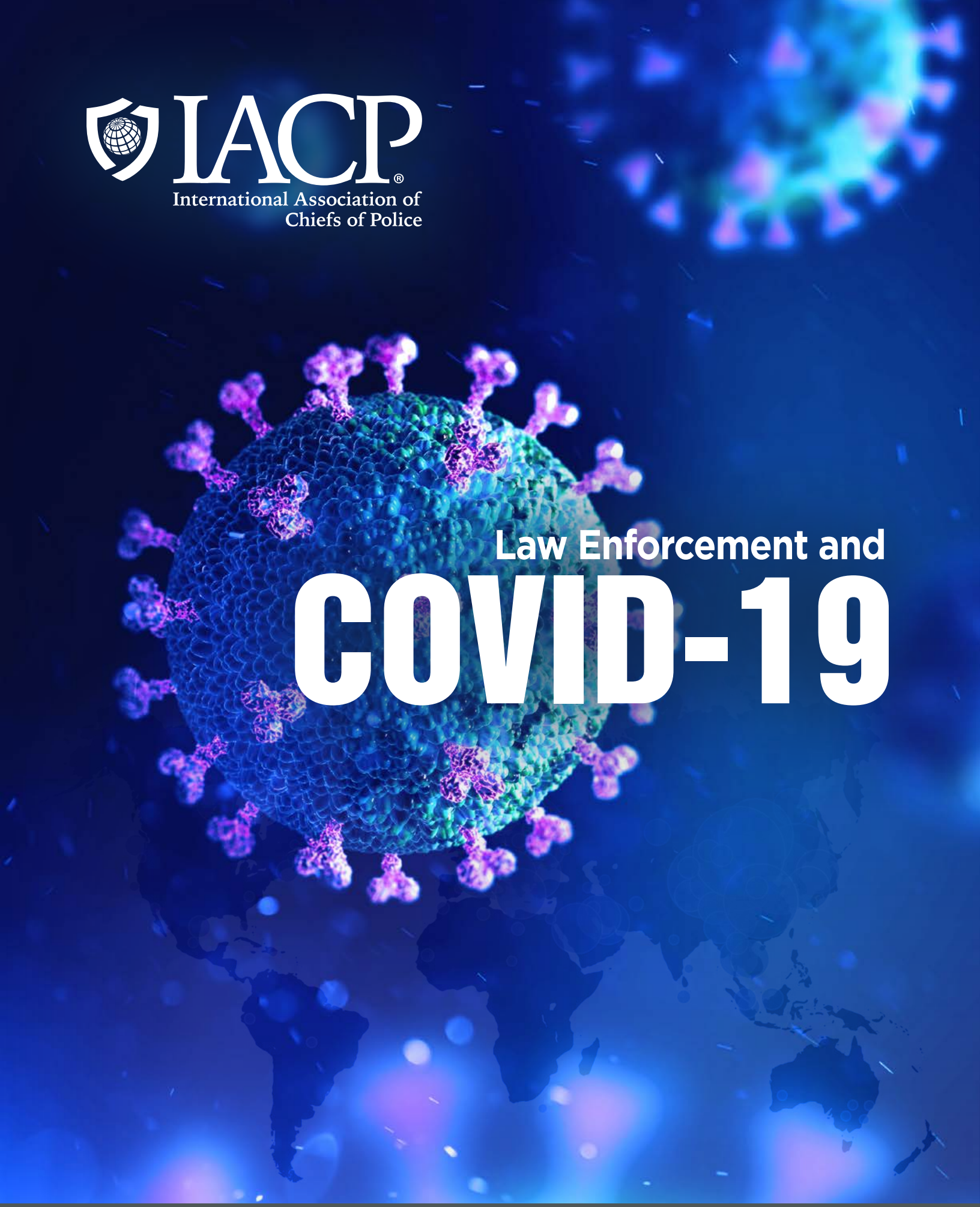
IACP®
International Association of Chiefs of Police



Law Enforcement and COVID-19

Educate Yourself. Stay Informed. Be Safe.

Contents

Letter from the IACP President 2

Letter from the COPS Director 3

COVID-19 Information for Law Enforcement: General Fact Sheet 4

Staying Healthy as a Police Officer During COVID-19 5

Law Enforcement Officer Exposure to COVID-19 6

Law Enforcement Officer Sickness with COVID-19 12

Organizational Readiness: Ensuring Your Agency is Prepared for COVID-19 ... 14

Law Enforcement's Role in Enforcing Public Health Protections 16

Alternative Methods for Delivering Essential Law Enforcement Services 18

Considerations for Law Enforcement Encountering COVID-19-Related Deaths 20

Officer Wellness and Resiliency During the COVID-19 Pandemic 22

Health and Safety for Law Enforcement Families 24

Visit
https://www.theiacp.org/resources/document/law-enforcement-information-on-covid-19
for the latest IACP COVID-19 resources

Dear IACP Members:

It goes without saying that the world is facing the toughest battle many of us have witnessed in our lifetimes. With information, policies, and guidance rapidly evolving, the novel coronavirus (COVID-19) impacts the lifeblood of every community.

The IACP stands ready to ensure its members have the tools and resources needed to keep you, your officers, and your communities safe as you deal with emerging issues like the spread of COVID-19. As the number of COVID-19 cases across the globe increases, agencies must have the proper knowledge and resources to maintain a healthy workforce as officers continue to serve their communities on the front lines of the pandemic response.

To that end, the IACP has launched a centralized clearinghouse of resources related to COVID-19 to provide you with the most up-to-date information available, including a collection of global resources for our members worldwide.

In this insert, you will find a snapshot of these resources, including the following:

- COVID-19 Information for Law Enforcement: General Fact Sheet
- COVID-19: Staying Healthy as a Police Officer
- Organizational Readiness: Ensuring Your Agency is Prepared for COVID-19
- COVID-19: Health and Safety for Law Enforcement Families
- COVID-19: Law Enforcement's Role in Enforcing Public Health Protections
- COVID-19: Alternative Methods for Delivering Essential Law Enforcement Services

In addition to these resources, the IACP has launched a COVID-19 Response Discussion Group, an online community for IACP members to ask questions, engage with others, and share resources and information regarding the coronavirus and its impact on the policing profession. This Higher Logic discussion group can be found on the IACP website. This platform is limited to IACP members and requires IACP login information to access.

We would like to graciously thank the U.S. Department of Justice's Office of Community Oriented Policing Services (COPS Office) for their support of this COVID-19 supplement to this issue of *Police Chief.* Through the work of the Collaborative Reform Initiative Technical Assistance Center (CRI-TAC), funded by the COPS Office, and led by the IACP and nine other leading law enforcement stakeholder associations, CRI-TAC has provided rapid support and additional resources to meet your unique needs during this time.

I'd like to draw your attention to the CRI-TAC COVID 19 Library of Resources and the following CRI-TAC COVID-19 related response tools in this supplement:

- Law Enforcement Officer Exposure to COVID-19
- Law Enforcement Officer Sickness with COVID-19
- Officer Wellness and Resiliency During the COVID-19 Pandemic
- Considerations for Law Enforcement Encountering COVID-19 Related Deaths

I encourage you to review the material included in this supplement and to explore IACP's online resources as we confront this challenge.

Thank you and stay safe.

Chief Steven Casstevens
IACP President

Dear colleagues:

As the director of the U.S. Department of Justice's Office of Community Oriented Policing Services (COPS Office), my top priority is supporting my colleagues in state, local, and tribal law enforcement agencies as they carry out their vital public safety missions. After spending 34 years in active law enforcement, it is my personal goal to give back to the profession that has done so much for me personally and my family.

Now, during these difficult times, the COPS Office is here to support the field in a variety of ways. Through the COPS Office's premier technical assistance center, the Collaborative Reform Initiative for Technical Assistance Center (CRI-TAC), we are mobilizing to meet those needs. CRI-TAC, led by the International Association of Chiefs of Police (IACP) and nine leading law enforcement stakeholder associations—the Fraternal Order of Police; FBI National Academy Associates, Inc.; International Association of Campus Law Enforcement Administrators; International Association of Directors of Law Enforcement Standards and Training; Major County Sheriffs of America; National Organization of Black Law Enforcement Executives; National Association of Women Law Enforcement Executives; National Sheriffs' Association (NSA); and National Tactical Officers Association—launched the COVID-19 Library of Resources. This directory is a searchable library of agency policies, standard operating procedures, fact sheets, press releases, special orders, training documents, and other COVID-19–related materials. This tool will allow law enforcement to share important guidance on issues such as risk mitigation, communication, and officer safety. Working with our CRI-TAC partners, we are developing other resources to meet the needs of law enforcement and fill in the gaps. Those resources are being posted in the library as they are completed, and we encourage you to check the library regularly.

In addition, we are working closely with our CRI-TAC partner, the NSA, to provide resources and assistance to sheriffs and jail administrators on COVID-19 through the launch of a COVID-19 information clearinghouse, as well as facilitating conference calls and hosting webinars to promote information-sharing with the field.

We are also actively documenting the impact of the virus on local law enforcement, including crime, officer safety, officer stress, equipment needs, and other public safety issues. If you have a story to share, please email COVID19@theiacp.org.

Resources

- **CRI-TAC:** collaborativereform.org
- **IACP COVID-19 Library of Resources:** myIACP.org/covid19libraryofresources
- **NSA COVID-19 Information Clearinghouse:** sheriffs.org/coronavirus
- **COPS Office Law Enforcement Mental Health and Wellness Program Resources:** cops.usdoj.gov/lemhwaresources
- **COPS Office OSW Website and Resources:** cops.usdoj.gov/officersafetyandwellness

CRI-TAC is designed as an important set of federal resources that puts law enforcement agencies in the driver's seat and provides support and assistance using a "by the field, for the field" model. If you are looking for rapid, tailored technical assistance on addressing COVID-19 or any other law enforcement issue, we are prepared to assist. To learn more and submit a request, please visit cops.usdoj.gov/collaborativereform.

Finally, we are proud to collaborate with the IACP and the rest of the CRI-TAC partners on this important special supplement to the May *Police Chief* magazine. Bringing attention to officer safety and wellness (OSW) has been an important part of the COPS Office's work over the years. We support innovative OSW projects from the field, host meetings, develop resources, and continue to promote officer safety and wellness efforts.

Although many of the events during this year's Police Week have been canceled or postponed, it is important now, more than ever, to recognize the most valuable resource a law enforcement agency has: its people. As we address COVID-19, it is important that we ensure our officers and deputies have the support they need. I hope that this special issue, along with the COPS Office resources and technical assistance, meets that need.

I thank you all for your service. Please be safe.

Sincerely,

Phil Keith, Director
Office of Community Oriented Policing Services

COVID-19 Information for Law Enforcement: General Fact Sheet

Educate Yourself. Stay Informed. Be Safe.

What is COVID-19?

Coronavirus Disease 2019 (COVID-19) is the name given by the World Health Organization for a new respiratory disease first identified in Wuhan, China, in December 2019. It is a pandemic impacting countries all over the world. Coronaviruses are a family of viruses found in people and animals causing a range of illnesses from the common cold to severe respiratory infection. Due to the increased availability of testing, more COVID-19 infections are being identified every day. As it is a newly-identified virus, this is an emerging and rapidly-evolving situation and new information becomes available daily. Stay updated.

How does the COVID-19 Virus Spread?

The virus is thought to spread mainly by "person-to-person" contact. This means close contact within six feet and through respiratory droplets produced when an infected person coughs or sneezes.[1] While humans are thought to be most contagious when symptomatic, the virus can spread even when an infected person is not showing symptoms.[2] It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching his/her mouth, nose, or possibly eyes, but this is not thought to be the main way the virus spreads.[3,4]

What are COVID-19 Symptoms?

Symptoms of a COVID-19 infection may appear 2-14 days after being exposed to the virus. Symptoms range from mild to severe respiratory illness.[5] The most common symptoms include:[6,7]

- Fever
- Cough
- Shortness of breath or difficulty in breathing
- Tiredness/fatigue

While less common, individuals with COVID-19 may also experience[8]:

- Aches and pains
- Sore throat
- Nasal congestion
- Runny nose
- Diarrhea

Vulnerable Populations

Current COVID-19 cases and prior coronavirus infections suggest that the most vulnerable populations include[9]:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- Individuals who are immunocompromised or have pre-existing medical conditions, such as:
  - Heart disease
  - Lung disease
  - Diabetes

Treatment and Recovery

- The overwhelming majority of people infected with COVID-19 experience mild symptoms and recover from the disease without needing special treatment.[10,11]
- There is no specific antiviral treatment or vaccine for COVID-19.[12]
- Individuals with COVID-19 typically successfully receive treatment to relieve systems.[13]

Live Update of Global Cases of COVID-19

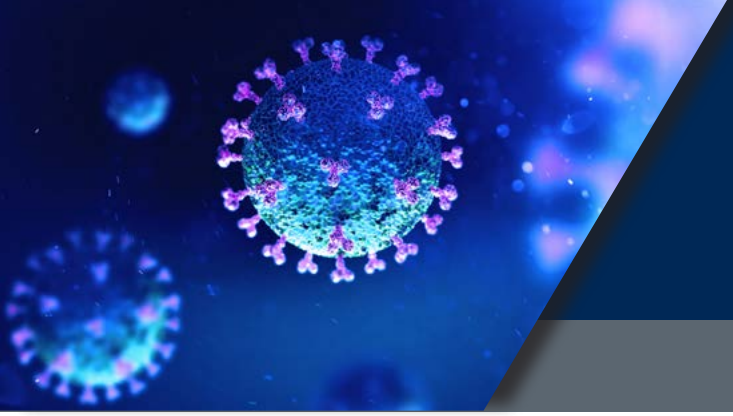
https://www.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6

COVID-19 Resources:

https://www.cdc.gov/coronavirus/2019-ncov/index.html

https://www.ecdc.europa.eu/en/novel-coronavirus-china

1 https://www.who.int/news-room/q-a-detail/q-a-coronaviruses
2 https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf
3 https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public
4 https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html
5 https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
6 https://www.who.int/news-room/q-a-detail/q-a-coronaviruses
7 https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf
8 https://www.who.int/news-room/q-a-detail/q-a-coronaviruses
9 https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html
10 https://www.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6
11 https://www.who.int/news-room/q-a-detail/q-a-coronaviruses
12 https://www.who.int/images/default-source/health-topics/coronavirus/myth-busters/mythbuster-4.png
13 https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html



IACP
International Association of Chiefs of Police

COVID-19: Staying Healthy as a Police Officer

Educate Yourself. Stay Informed. Be Safe.

Take the following steps to protect yourself and reduce the likelihood of contracting COVID-19.

- **Practice proper hand hygiene** by promptly washing or sanitizing hands after coughing, sneezing, or physically interacting with others. Wash your hands for at least 20 seconds with soap and water.
- **Avoid touching your face** (eyes, nose, and mouth).
- **Cover your mouth and nose** with your bent elbow or tissue when you cough or sneeze. Make sure to dispose of the tissue immediately.[1] Wash your hands with soap immediately after sneezing or coughing.
- **Avoid close physical contact** with others, including shaking hands and hugging.
- Maintain at least **6 feet distance** between yourself and anyone who is coughing, sneezing, or talking, when possible.[2]
- Promptly **disinfect your gear** including your duty belt after physical contact with any individual.[3]
- Keep **disinfectant wipes and hand sanitizer** in an easily accessible place while on-duty.
- Wear a **mask** if coming into contract with someone who has the COVID-19 virus and make sure to know how to properly use and dispose of it.
- Educate yourself and participate in training on the proper use of **Personal Protective Equipment (PPE)** for respiratory protection, if available at your agency. Ensure only trained personnel wearing appropriate PPE have contact with individuals who have or may have COVID-19.
- Make sure to know your **agency's plans and protocols** for exposure control.
- **Seek medical care early** if you have a fever, cough or difficulty breathing.

COVID-19-infected droplets may be able to live on nearly any surface.[4] Consider sanitizing items you frequently touch during a shift:

- Phone
- Laptop
- Clipboard
- Patrol car equipment
  - Steering wheel
  - Gear shift
  - Dispatch radio module
  - Door handles and edges

Insert Local Agency Name

Contact

Reporting Procedures

What to do if you get sick

Resources for Law Enforcement:

https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public

https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html

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

1 https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public
2 https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html
3 https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html
4 https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf

CRI-TAC Collaborative Reform Initiative
TECHNICAL ASSISTANCE CENTER
A Program of the COPS Office

Law Enforcement Officer Exposure to COVID-19

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can be severe and life-threatening in some individuals. It is easily spread from person to person. The guidance below outlines information for law enforcement in assessing exposure risk to COVID-1.

Exposure Risk Levels with Considerations for Agency Actions:[1-3]

As defined by the Centers for Disease Control and Prevention (CDC), exposure risk is grouped into categories ranging from high to none. The information below provides guidance for agencies to identify exposure risk and outlines purposeful action for agencies to consider following personnel exposure to COVID-19.

CDC High Risk Exposure

- Living in the same household as, being an intimate partner of, or providing care in a nonhealthcare setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection ***without using recommended precautions.***
- Direct exchange of secretions to mucus membranes from laboratory-confirmed COVID-19 infection {e.g. cough into face with no protective personal equipment (PPE)}.

Considerations for Agency Actions in Response to High Risk Exposure:

➔ To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers such as law enforcement personnel may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

➔ Officers who have had an exposure to COVID-19 but remain asymptomatic should adhere to the following practices prior to and during their work shift:

- **Pre-Screen:** Employers should measure the individual's temperature and assess symptoms prior to the start of their shift.
- **Regular Monitoring:** Individuals should self-monitor in accordance with their employer's occupational health policy.
- **Wear a Mask:** Individuals should wear a face mask at all times while in the workplace for 14 days following the last exposure.
- **Social Distance:** The individual should maintain six feet and practice social distancing as work duties permit.
- **Disinfect:** The individual should routinely clean and disinfect all areas, including shared equipment.

➔ In the event the officer becomes sick during the day, and develops symptoms consistent with COVID-19, they should be sent home immediately and follow guidance for ***Law Enforcement Sickness with COVID-19***. Information on any individual they had contact with during the time they had symptoms, and two days prior, should also be identified and considered exposed.[4]

1 https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html
2 Officer/Personnel Exposure Plan: Procedures for Possible or Confirmed COVID-19 Exposure (Dallas Police Department)
3 https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf
4 https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf

CDC Medium Risk Exposure

- Close contact with a person with symptomatic laboratory-confirmed COVID-19.
- Being seated in a department vehicle with a partner who is symptomatic and has a laboratory-confirmed COVID-19 infection.

Considerations for Agency Actions in Response to Medium Risk Exposure:

➔ Follow Considerations for Agency Actions in Response to High Risk Exposure outlined above.[5]

CDC Low Risk Exposure

- Being in the same indoor environment (e.g., a detail room, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact. See below for definition of close contact.

Considerations for Agency Actions in Response to Low Risk Exposure:

➔ The CDC recommends that individuals with low risk exposure do not require restrictions from work.[6]

➔ These individuals should check their temperature twice daily and remain alert for respiratory symptoms consistent with COVID-19.

➔ In the event the individual develops symptoms consistent with COVID-19, they should immediately self-isolate and follow guidance in the tool titled ***Law Enforcement Officer Sickness with COVID-19.***

CDC No Identifiable Risk Exposure

- Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not meet any of the high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room.

Considerations for Agency Actions in Response to No Identifiable Risk Exposure:

➔ The CDC recommends that individuals with no identifiable risk do not require restrictions from work.[7]

Definition of Close Contact

- Prolonged contact within 6 feet with a confirmed COVID-19 person.
- Prolonged contact within 6 feet with a symptomatic person (presenting with fever and respiratory complaints) who has traveled to an affected region within the last 14 days.

Considerations:

➔ There is no consensus on the definition of "prolonged contact" across public health agencies. What is known is that prolonged contact depends on not just distance and duration but also how much personal protective equipment the officer is wearing (if any), how contagious the infected person is, and how susceptible to infection the individual may be.

5 https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf
6 Ibid.
7 https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html

COMMUNICATE

- Law enforcement executives should communicate on a regular basis about developments in response to COVID-19. This includes changes in department policy or procedure in responding to calls for service, medical-aid calls, calls to a hospital or medical facility, traffic enforcement, and more.
- Law enforcement agencies should ensure that changes in policy or procedure are clearly communicated to, and in collaboration with, community stakeholders. Community stakeholders should include public safety groups such as employee representative groups, department of corrections, surrounding law enforcement organizations, judicial offices, other first responder jurisdictions, Fire, EMS, etc., as well as community groups, neighborhood watches, faith-based groups, etc.
- Law enforcement agencies should work with their human resources department to identify a mechanism for tracking the number of law enforcement personnel out of work resulting from the potential contraction of COVID-19.
- Supervisors should provide clear guidance to personnel regarding protocol for sick leave usage in the event an officer becomes ill and unable to work.

IMPLEMENTATION STRATEGIES

- Monitor and follow all guidance provided by the CDC and your local and state/provincial public health agencies.
- Expand law enforcement response to include telephone reporting and provide guidance for officers to complete a telephone report. Telephone reports are intended and should be employed for offenses that do not require a police response due to violence, life-safety concerns, crimes-in-progress, or the need to collect evidence.
- Restrict or eliminate public access to police facilities in order to minimize exposure of police personnel to COVID-19.
- Implement **virtual or remote roll calls and shift changes** to avoid clustering of people, if possible. Utilize outdoor/open air meetings when weather permits.
- Provide proper training for use of Personal Protective Equipment (PPE) for respiratory protection, if available. Encourage agency personnel to practice regular handwashing and maintaining a distance of at least six feet to provide protection from transmission of COVID-19.
- Allow adequate time for officers to decontaminate after public contact.
- Clean and disinfect equipment, common areas, and transport vehicles frequently.
- Consider postponement or alternative methods to hold meetings with community groups.
- Allow non-traditional work-from-home for less-essential staff.
- Explore alternative housing options for law enforcement personnel on a case-by-case basis to limit potential exposure of COVID-19 to at-risk family members.
- Consider easy wash and wear uniforms for uniformed officers and relaxed casual wash and wear clothing for detectives and others who normally wear more formal clothing.

DISINFECT

- Officers should avoid direct contact with individuals who may have COVID-19 until they have the appropriate PPE. Maintaining a distance of at least six feet may provide protection from transmission of COVID-19.
- Officers should understand and practice with PPE so that they can rapidly and safely apply and carefully remove PPE without cross-contamination.
- In the event an officer becomes exposed to an ill suspect or member of the public with a fever and respiratory illness, the officer should:
  - Wear a face mask at all times while in the workplace for 14 days after last exposure.[8]
  - Clean and disinfect his/her duty belt and gear with a household cleaning spray or wipe prior to reuse.
  - Follow standard operating procedures for the containment and disposal of used PPE.
  - Follow standard operating procedures for containing and laundering clothes. This includes avoiding shaking the clothes.[9]
  - Follow guidance for high-risk and medium-risk exposure.

To access tools and resources to assist in informing your agency response to COVID-19, visit the CRI-TAC COVID-19 Library of Resources, a compilation of resources by the field of law enforcement, for the field of law enforcement.

8 https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

9 https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html

	IF...	THEN...	LOCAL AGENCY RESPONSE
CDC HIGH-RISK EXPOSURE	■ Living in the same household as, being an intimate partner of, or providing care in a nonhealthcare setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection without using recommended precautions. ■ Direct exchange of secretions to mucus membranes from laboratory-confirmed COVID-19 infection {e.g. cough into face with no protective personal equipment (PPE)}.	■ To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers such as law enforcement personnel may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. ■ Officers who have had an exposure to COVID-19 but remain asymptomatic should adhere to the following practices prior to and during their work shift: o **Pre-Screen:** Employers should measure the individual's temperature and assess symptoms prior to the start of their shift. o **Regular Monitoring:** Individuals should self-monitor in accordance with their employer's occupational health policy. o **Wear a Mask:** Individuals should wear a face mask at all times while in the workplace for 14 days following the last exposure. o **Social Distance:** The individual should maintain six feet and practice social distancing as work duties permit. o **Disinfect:** The individual should routinely clean and disinfect all areas, including shared equipment. ■ In the event the officer becomes sick during the day, and develops symptoms consistent with COVID-19, they should be sent home immediately and follow guidance for ***Law Enforcement Sickness with COVID-19***. Information on any individual they had contact with during the time they had symptoms, and two days prior, should also be identified and considered exposed.[10]	

10 https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf

	IF...	THEN...	LOCAL AGENCY RESPONSE
CDC MEDIUM-RISK EXPOSURE	■ Close contact with a person with symptomatic laboratory-confirmed COVID-19. ■ Being seated in a squad car with a partner who is symptomatic and has a laboratory-confirmed COVID-19 infection.	■ To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers such as law enforcement personnel may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. ■ Officers who have had an exposure to COVID-19 but remain asymptomatic should adhere to the following practices prior to and during their work shift: o **Pre-Screen:** Employers should measure the individual's temperature and assess symptoms prior to the start of their shift. o **Regular Monitoring:** Individuals should self-monitor in accordance with their employer's occupational health policy. o **Wear a Mask:** Individuals should wear a face mask at all times while in the workplace for 14 days following the last exposure. o **Social Distance:** The individual should maintain six feet and practice social distancing as work duties permit. o **Disinfect:** The individual should routinely clean and disinfect all areas, including shared equipment. ■ In the event the officer becomes sick during the day, and develops symptoms consistent with COVID-19, they should be sent home immediately and follow guidance for ***Law Enforcement Sickness with COVID-19***. Information on any individual they had contact with during the time they had symptoms, and two days prior, should also be identified and considered exposed.[11]	

11 https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf

	IF...	THEN...	LOCAL AGENCY RESPONSE
CDC LOW-RISK EXPOSURE	■ Being in the same indoor environment (e.g., a detail room, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact. See page 2 for definition of close contact.	■ The CDC recommends that individuals with low risk exposure do not require restrictions from work.[12] ■ These individuals should check their temperature twice daily and remain alert for respiratory symptoms consistent with COVID-19. ■ In the event the individual develops symptoms consistent with COVID-19, they should immediately self-isolate and follow guidance for ***Law Enforcement Sickness with COVID-19***.	
CDC NO IDENTIFIABLE RISK EXPOSURE	■ Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not meet any of the high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room.	■ The CDC recommends that individuals with no identifiable risk do not require restrictions from work.[13]	

12 https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html

13 Ibid.

This publication was supported by cooperative agreement number 2017-CR-WX-K001 awarded by the U.S. Department of Justice, Office of Community Oriented Policing Services. The opinions contained herein are those of the author(s) or contributor(s) and do not necessarily represent the official position or policies of the U.S. Department of Justice. References to specific individuals, agencies, companies, products, or services should not be considered an endorsement by the author(s) or the U.S. Department of Justice. Rather, the references are illustrations to supplement discussion of the issues.

CRI★TAC Collaborative Reform Initiative
TECHNICAL ASSISTANCE CENTER
A Program of the COPS Office

Law Enforcement Officer Sickness with COVID-19

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can be severe and life-threatening in some individuals. It is easily spread from person to person. The guidance below outlines information useful to law enforcement in the event officers contract COVID-19.

ACT

If an officer:

- Experiences COVID-19 symptoms, such as cough, fever, or muscle aches and pains, he/she should report this immediately to his/her supervisor or the designated agency contact.
- Displays COVID-19 symptoms, including cough, fever, or muscle aches and pains, he/she should be removed from the workplace immediately.
- Believes they have been exposed to COVID-19 and develops symptoms, such as a fever, cough or difficulty breathing, he/she should refrain from returning to work and contact their healthcare provider for medical advice.

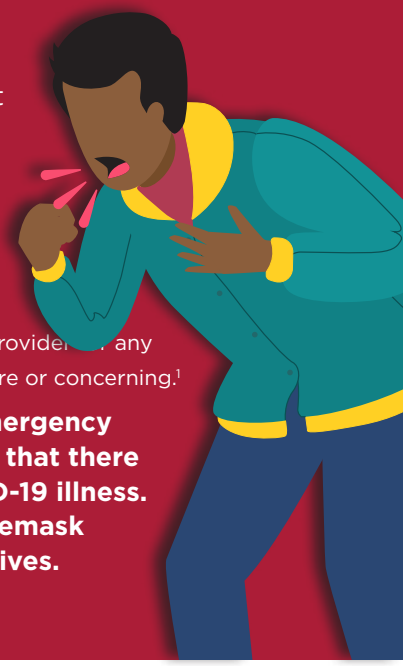
When to Seek Medical Attention

Seek emergency medical attention immediately for any of the following warning signs include*:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.[1]

Call 911 in a medical emergency and notify the operator that there is a possibility of COVID-19 illness. If possible, put on a facemask before medical help arrives.



TEST

Agencies should work closely with the local health department and healthcare facilities to:

- Establish a process for COVID-19 testing of law enforcement personnel.
- Communicate to agency personnel how to get tested for COVID-19.
- Advocate for priority access to testing for law enforcement personnel.

ISOLATE

- Individuals with confirmed COVID-19 should follow the guidance of healthcare providers and their local public health agency.
- If confirmed positive for the COVID-19 virus, or if testing is not available, an officer should take the following steps:[2]
  - Notify supervisor or the designated agency contact.
  - Stay at home except to get emergency medical care.
  - Separate from other people at home, including pets (also known as "home isolation").
  - Contact healthcare provider and call ahead before visiting a healthcare provider.
  - Wear a facemask, if available, when you are around other people (including before you enter a healthcare provider's office).
  - Cover coughs and sneezes.
  - Clean your hands with soap often (at least 20 seconds).
  - Avoid sharing personal household items.
  - Clean all "high-touch" surfaces every day.
  - Monitor symptoms daily.

1 https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

2 https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

RETURN TO WORK

The decision to discontinue "home isolation" and return to work should be made in consultation with agency leadership, healthcare providers, and state and local public health departments.[3] CDC provides the following guidance on discontinuing home isolation:

Individuals who have stayed home (home isolated) can stop home isolation under the following conditions:

- If you will not have a test to determine if you are still contagious, you can leave home after these three things have happened:
  - You have had **no fever for at least 72 hours** (that is three full days of no fever without the use of medicine that reduces fevers)

    AND
  - Other symptoms have improved (for example, your cough or shortness of breath have improved)

    AND
  - At least **7 days have passed** since your symptoms first appeared
- If you will be tested to determine if you are still contagious, you can leave home after these three things have happened:
  - You no longer have a fever (without the use of medicine that reduces fevers)

    AND
  - Other symptoms have improved (for example, your cough or shortness of breath have improved)

    AND
  - You received **two negative tests in a row, 24 hours apart**. Your doctor will follow CDC guidelines.

Individuals with laboratory-confirmed COVID-19 who have not had any symptoms may discontinue home isolation when at least 7 days have passed since the date of their first positive COVID-19 diagnostic test and they have had no subsequent illness.

COMMUNICATE

- Encourage officers to document and communicate information related to contraction of COVID-19 to his/her immediate supervisor. This information may include the suspected date and location of exposure as well as individuals with whom they have been in close contact with since the potential exposure. Documentation is extremely important for the officer and the agency.
- Communicate with agency personnel when an officer contracts COVID-19. This will allow the agency to determine if any other personnel have had close contact with officer who tested positive for COVID-19.
- Promote wellness checks in order to address any needs of officers and family members, to include peer support and family support. See COVID-19: Health and Safety for Law Enforcement Families.

CONSIDER

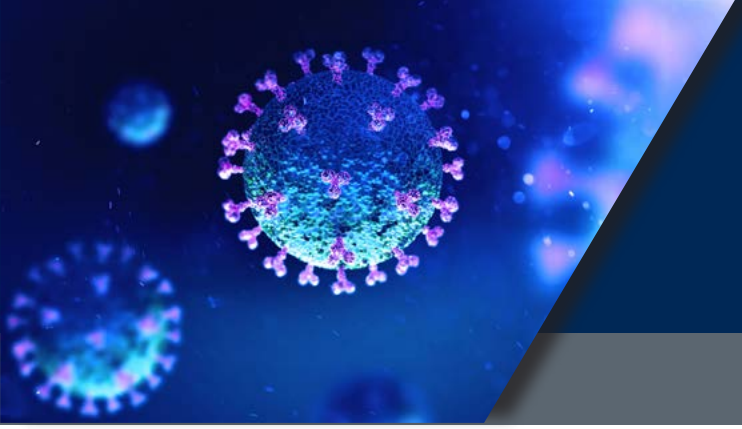
- Removing barriers to enable staff to come forward to report medical conditions that may put them at higher risk for severe illness if infected with the virus.
- Shifting these individuals with a higher-risk for severe illness to work activities with less likelihood for exposure to the virus.
- Monitoring officers' temperatures or other health screening mechanisms before the start of each shift, if resources allow. A temperature of 100.[4] degrees is the suggested threshold for what constitutes a fever symptomatic of a reportable illness.[4]

To access tools and resources to assist in informing your agency response to COVID-19, visit the CRI-TAC COVID-19 Library of Resources, a compilation of resources by the field of law enforcement, for the field of law enforcement.

3 Ibid.

4 https://www.cdc.gov/quarantine/air/reporting-deaths-illness/definitions-symptoms-reportable-illnesses.html

This publication was supported by cooperative agreement number 2017-CRWX-K001 awarded by the U.S. Department of Justice, Office of Community Oriented Policing Services. The opinions contained herein are those of the author(s) or contributor(s) and do not necessarily represent the official position or policies of the U.S. Department of Justice. References to specific individuals, agencies, companies, products, or services should not be considered an endorsement by the author(s) or the U.S. Department of Justice. Rather, the references are illustrations to supplement discussion of the issues.



IACP
International Association of Chiefs of Police

Organizational Readiness: Considerations for Preparing Your Agency for COVID-19

Educate Yourself. Stay Informed. Be Safe.

As the number of cases of Coronavirus Disease 2019 (COVID-19) increases globally, law enforcement agencies should be prepared for the likelihood that the virus will impact their communities. The following checklist of considerations is offered as guidance to law enforcement agencies without an established emergency operations plan, and as additional points of consideration for agencies with an established emergency operations plan.

- ☐ **Communicate clearly, consistently, and frequently with agency staff about changing policies and procedures.**
  - Prepare officers to answer questions about testing kit availability, travel restrictions, quarantine and isolation, and personal safety measures including who the public should call for such information.
  - Designate a command staff leader or team to spearhead coordination with external agencies and disseminate information to agency staff.
- ☐ **Provide training to all employees and ensure proper utilization of personal protective equipment (PPE) and cleaning supplies.**
  - Educate officers on techniques to minimize exposure to infectious disease, to include immunization, use of sick leave, social distancing, and proper use of PPE such as wear, removal and disposal.
  - Put together Go-Bags that include PPE for officers and first aid supplies for response to community members.
  - Increase the frequency of disinfecting patrol cars, holding cells, locker rooms, break rooms, and other agency facilities to reduce exposure to the virus.
  - Utilize PPE optimization strategies as access to such supplies dwindle. See CDC's Strategies to Optimize the Supply of PPE and Equipment.
- ☐ **Develop a contingency plan for staffing shortages.**
  - Prepare for officers to call out of work out of an abundance of caution or because they or a family member is ill.
  - Encourage officers to stay home if they feel ill or suspect they have COVID-19.
  - Consider alternative staffing methods such as shared service provision with neighboring agencies, swing shifts, mandatory overtime, cancellation of leave and non-essential travel, and repurposing of officer flex time.
  - Cross-train personnel for temporary duty reassignment to assure proper coverage of essential duties.
  - Evaluate what services require an on-scene police presence versus those that can be handled by alternative means such as by phone or online.
  - Organize a network of off-duty personnel who are on-call and ready to report for duty, if a shift has a critical shortage of officers.
  - Offer telecommuting for less-essential staff to ensure proper job coverage.
  - Conduct load testing of IT and security systems to ensure resources can withstand a sudden increase in remote access to agency technologies.
- ☐ **Communicate clearly and consistently to the public as information emerges.**
  - Coordinate with national, state, tribal, and local authorities to ensure accurate and consistent information.
  - Utilize the agency's Public Information Officer (PIO) to provide information in a timely manner.
  - Communicate to combat disinformation about COVID-19 and raise awareness of potential virus-related scam efforts.
  - Highlight effective practices and communicate guidance from the U.S. Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) as updates are offered.
  - Provide accessible information for where people can go to be tested for COVID-19 in your community.
- ☐ **Coordinate with federal/national, state, tribal, and local government agencies as well as the private sector.**
  - Maintain consistent communications with the local health department and emergency services to keep officers informed of the most up to date response protocol.
  - Coordinate with government agencies responsible for maintaining critical infrastructure (e.g. water, power, transportation) to understand their contingency plans and potential for increased burden on emergency services.
  - Determine whether your agency is eligible for federal/national or state funding to aid in emergency response.

- [ ] **Modify standard agency procedures as needed to reflect current response needs.**
  - Be prepared for community requests to evolve and reflect the needs of COVID-19 patients, including but not limited to transport to hospitals, wellness checks, and delivery of critical items like medication.
  - Officers may be required to enforce revised local or regional public health ordinances, such as mandatory quarantines, isolation, or travel restrictions.
  - Train personnel on proper handling of the deceased. Law enforcement may find themselves attending to such scenes without the assistance of a medical examiner.
  - Maintain agency response and outreach to victims of crime. Ensure sworn and non-sworn officers are aware of the increased risk victims may face due to COVID-19.
  - Provide testing and coordinate treatment to limit the spread of COVID-19 within a jail or prison, if your agency oversees correctional facilities. Consider adjusting protocols to reduce the number of detainees.
- [ ] **Utilize incident command systems (ICS) to aid in agency response.**
  - Ensure your agency's established incident command system can be activated if needed to assist in command and control, as well as the coordination of limited resources.
  - Identify which roles and duties are mission critical, if your agency does not have an incident command system.
  - Designated a command-level staff person to oversee and manage the overall agency response.
- [ ] **Create a plan for critical incident stress management.**
  - Address officer physical and emotional well-being. Increased pressures and continued obligations outside of work, along with the potential of loved ones falling ill, will create stress, fear, and anxiety.
  - Activate support services for officers and their families.
  - Encourage personnel to develop plans should they be away from their families for extended periods of time.
  - Create additional awareness of employee assistance programs (EAP).
- [ ] **Communicate proper procedures regarding isolation and detention of community members.**
  - Provide information about detaining or isolating a person who is perceived as having an infectious disease, to include how to handle situations when a person fails to comply.
  - Clarify when officers have the authority to enforce quarantine orders.
  - Stipulate policy for how to handle arrests, potentially recommending that offenders be summoned to court instead of police headquarters.
- [ ] **Collect data and document response protocols for future review and assessment, if practical.**
  - While pandemics rarely occur, an agency can learn a lot about its emergency response by studying past efforts.
  - Data collection for law enforcement may include the number of COVID-19-related calls for service, outcomes of incident command system activation, staffing numbers and call outs, health and wellness measures of officers, etc.

IACP Resources:

IACP COVID-19 Policy: Considerations Document

IACP Model Policy on Pandemic Flu

Law Enforcement's Role in Enforcing Public Health Protections

Alternative Methods for Delivering Essential Law Enforcement Services

IACP Model Policy on Communicable Disease Prevention

IACP Model Policy on Incident Command

IACP COVID-19 Resource Center

Additional Resources:

What Law Enforcement Personnel Need to Know about Coronavirus Disease 2019 (COVID-19)

Pandemic Planning for an Influenza Pandemic: Case Studies and Recommendations from the Field

Law Enforcement Preparedness for Public Health Emergencies: An Executive Summary of the Resources Series

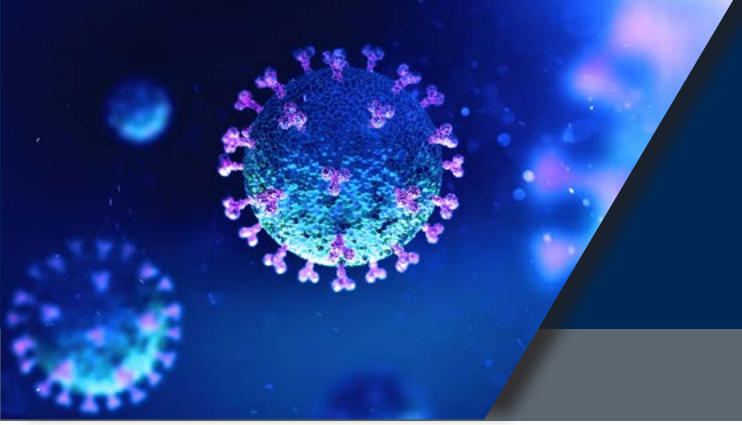
Risk Management for Novel Coronavirus (COVID-19)

Defending Against COVID-19 Cyber Scams

Washington State Jails Coronavirus Management Suggestions

American Jail Association COVID-19 Resources

National Sheriff's Association Coronavirus Information



IACP
International Association of Chiefs of Police

COVID-19: Law Enforcement's Role in Enforcing Public Health Protections

Educate Yourself. Stay Informed. Be Safe.

With the outbreak of an infectious disease, officers may be required to respond to calls for service related to public health orders, mandatory quarantines, and the protection of medical resources. This information is meant to help police departments better understand their authority in such situations, along with methods to reduce risk and exposure.

Types of Public Health Orders:

- Curfew – regulates times during which a person is required to stay indoors.
- Social distancing – maintaining distance between people to avoid the spread of disease.
- Quarantine – restricts the movement of people who show symptoms or are potentially infected by a disease.
- Self-quarantine – the voluntary act of putting oneself in quarantine.
- Isolation – separates sick people from those who are not.
- Shelter-in-place (stay at home) – requires individuals stay in a safe, non-public location (home) except for essential activities and work, until told otherwise.

How to Prepare for Public Health Related Enforcement Activity:

- Provide frequent, accurate, and timely information to the public regarding enforcement orders. Effective partnerships between the police and communities will ensure higher levels of compliance, especially regarding voluntary quarantine and social distancing.
- Ensure proper use of personal protective equipment (PPE) and develop enforcement plans that limit risk and exposure to disease.
- Provide officers with appropriate contact information to public health personnel should they encounter an individual demonstrating symptoms.
- Ensure coordination between police departments and sheriff's offices. With many courts closing to the public and moving to a virtual environment, this may allow police departments to leverage resources from sheriff's departments and other agencies.
- Local police departments will be called upon for first response during a pandemic but will be expected to coordinate with other jurisdictions and municipalities.

Protection and Security:

- Provide training to officers to ready them for modified calls for service, such as those related to the protection and security of medical resources, and the enforcement of quarantine orders. Consider creating a Public Health Response Team that includes officers from different units.
- Officers may be required to provide duties outside normal calls for service regarding the protection and security of medical resources to include:
    - Guarding distribution chains and distribution sites of protective equipment and supplies from the strategic national stockpile.
    - Providing protective services to hospital emergency rooms, temporary treatment shelters, and triage centers during patient surges.
    - Providing additional preventive patrol or other measures to targets of opportunity resulting from the emergency (such as pharmacies and supermarkets), to include hoarding and price gauging of critical medical resources.
    - Providing added security to critical infrastructure components (such as utilities and telecommunication facilities).

Enforcing Public Health Orders and Quarantines:

- Shelter-in-place (or stay at home) orders are issued at the state or country level but sometimes may come from local governments. Law enforcement has not typically had to engage in enforcement of public health orders in the past. Agencies should work closely with their public health partners at the state and local level to gain a clear understanding of the specific order(s) and penalties for violations as well as how best to respond to violations at the local level.[1]
- In the United States, local police officers generally have the authority to enforce existing quarantine or shelter-in-place orders. As the virus spreads, officers may be called upon to help in the enforcement of public health orders and quarantine efforts.
- Should a person fail to comply with a quarantine order, the responding officer holds legal precedence to enforce compliance. The officer should maintain a copy of the order and a clear understanding of how it is to be enforced.
- In the event that someone appeals a public health order, be prepared should the court proceedings occur outside of the physical courthouse, via videoconferencing or other technology.

Absence of Public Health Orders:

- In cases where a quarantine order does not exist, but a person is symptomatic, or is perceived as having contracted the disease, swift action is necessary. Officers should work with public health personnel to assess the medical state of the individual. Laws for imposing quarantines vary, so check your own state or country's laws and procedures. The National Conference of State Legislatures has published the State Quarantine Laws and Regulations in the United States.
- In the United States, the Federal government may impose isolation and/or quarantine based on the authority it's granted in the Commerce Clause of the U.S. Constitution, and the CDC is authorized to detain individuals carrying communicable diseases, in some cases. Officers should work with the CDC and federal resources to obtain an emergency quarantine order, if applicable.[2]
- Quarantine laws vary across the globe. Consult the applicable rules and regulations within your country, state, and/or jurisdiction. INTERPOL COVID-19 Pandemic Guidelines for Law Enforcement

Additional Resources:

IACP Organizational Readiness: Ensuring Your Agency is Prepared for COVID-19

COVID-19 Response Policy: Considerations Document

What Law Enforcement Personnel Need to know about COVID-19

CDC Legal Authorities for Isolation and Quarantine

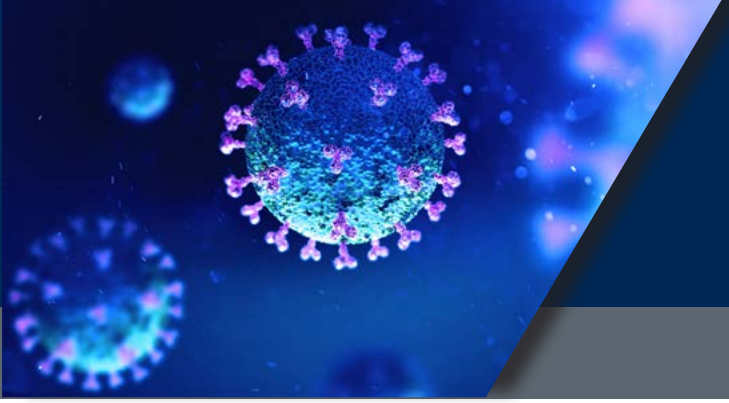
WHO Considerations for quarantine of individuals in the context of containment for coronavirus disease (COVID-19)

Communication and Public Health Emergencies: A Guide for Law Enforcement

State Quarantine Law and Regulation published by the National Conference of State Legislatures

1 https://bja.ojp.gov/sites/g/files/xyckuh186/files/Publications/PERF_Emer_Comm.pdf

2 https://www.cdc.gov/quarantine/aboutlawsregulationsquarantineisolation.html.



IACP
International Association of Chiefs of Police

COVID-19: Alternative Methods for Delivering Essential Law Enforcement Services

Educate Yourself. Stay Informed. Be Safe.

In light of the public health risk that Coronavirus Disease 2019 (COVID-19) presents and the pressing need for law enforcement agencies to be engaged on both the public health and public safety fronts, agencies should carefully consider whether discretionary interactions with the public can be minimized and arrests limited to offenses that are immediate public safety risks. Agencies should also consider revised practices for mandatory interactions in the field such as those for detention, transport, and booking. Regardless of policy or protocol changes during the COVID-19 pandemic, law enforcement agencies will continue to uphold the rule of law to maintain public safety, prevent victimization, and support vulnerable communities.

As the number of COVID-19 cases increases globally, law enforcement agencies should be prepared for the likelihood that the virus will impact their communities. Guidance from the World Health Organization and Centers for Disease Control have stated the critical importance of social distancing, frequent and thorough handwashing with soap and water or using alcohol-based sanitizer, and both self-quarantining and seeking treatment from medical professionals if people experience symptoms.[1] Due to physical and contraband regulations, some jails may have limited ability to fully enact these precautions, putting the jail population and those who work in them at particularly high risk.

The following document outlines considerations for law enforcement agencies on triaging calls for service and limiting the spread of the virus. Each agency should determine what incidents are critical for enforcement and those incidents for which enforcement can be suspended. If agencies suspend or modify enforcement during this time, they should provide all changes in protocol to sworn staff, nonsworn staff, justice system stakeholders, and community partners and have clear messaging to the community that serious and violent offenses will still be fully enforced.

Triaging Calls

- Prioritization of calls for service:
  - Consider modifications to the department's call prioritization system that would allow for significantly deferred response, or the use of alternative responses to certain types of calls for service (such as suspension of all responses to nuisance offenses, alarm activations, and minor thefts).
- Differential response to calls for service:
  - Encourage resolution of minor incidents over the phone, when possible, especially crimes where the chances of collection of evidence is minimal and officer's presence on scene is not required. Consider expanding the duties of the community service desk and community service officers and Internet reporting of minor property crimes and other misdemeanors or nonviolent crimes.
- Consider diverting non-emergency concerns to a 24/7 hotline, non-emergency number, or online portal that is frequently monitored. These concerns may include, but are not limited to general questions regarding COVID-19, noise concerns, loitering, vandalism, etc.
  - Advertise this hotline on all available mediums, including but not limited to social media, law enforcement agency homepage, local media, and local news.
- Consider allowing members of the public to file a report or complaint online for non-emergency incidents, such as lost property, lost vehicle tags, theft/theft from auto when there is not a risk of credit card fraud or identity theft, destruction or damage to property.
  - Advertise this website on all available mediums, including but not limited to social media, law enforcement agency homepage, local media, and local news.

1 https://www.cdc.gov/coronavirus/2019-ncov/prepare/transmission.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Ftransmission.html; https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public

Traffic Enforcement

- Determine what violations are core to upholding public safety and consider limiting traffic enforcement for non-critical concerns, such as parking violations, expired tags, and missing headlights, etc.

Probation/Parole Violations and Bench Warrants

- In conjunction with probation and parole departments and courts, carefully consider alternative methods, such as postponement or suspension, in place of physically detaining people for violations of probation and parole, as well as bench warrants, for those who do not pose an immediate risk to public safety.

Misdemeanor Enforcement

- In conjunction with other system stakeholders especially holding facilities as well as partners from the public and behavioral health systems, create ways to address misdemeanors that are low-level, nonviolent offenses through alternatives to arrest, including citation, summons, or ticket in lieu of arrest and front-end diversion to community-based resources.

Felony Enforcement

- While violent felonies should still be enforced, nonviolent felonies may not present an immediate threat to the public. Agencies, in partnership with their prosecutorial partners, must carefully weigh the threat to public health and the threat to public safety when determining if, and which, felonies may receive a citation, summons, or ticket in lieu of arrest.

Example Policies and Procedures

- Law enforcement agencies across the globe are carefully considering how best to support both public health and public safety in their communities. Visit IACP's ***COVID-19 Library of Resources*** https://www.myiacp.org/COVID19libraryofresources to find example policies and procedures from agencies across the globe for alternatives to arrest prior to, and during, the COVID-19 pandemic.

CRI★TAC Collaborative Reform Initiative
TECHNICAL ASSISTANCE CENTER
A Program of the COPS Office

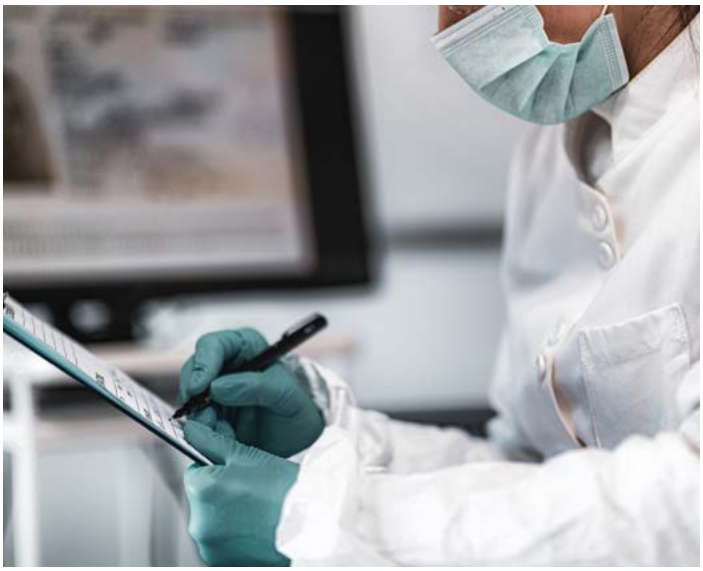
Considerations for Law Enforcement Encountering COVID-19-Related Deaths

As concerns of COVID-19 continue to spread throughout local communities, law enforcement agencies should prepare officers for the unfortunate situation of encountering a COVID-19-related unattended death. Where feasible, officers should not be responsible for touching or removal of a dead body where COVID-19 is suspected. Rather, EMS personnel, funeral directors, and medical examiners should be involved. The following considerations are specific to COVID-19 deaths where law enforcement is responding without the assistance of a medical examiner.

COORDINATE

Law enforcement agencies should proactively:

- Communicate protocols about exposure risk to personnel.
- Implement screening questions for calls for service related to deaths for COVID-19 to determine risk for officers in advance.
- Ensure proper infectious disease reporting. Communicate the risk of exposure with public health departments, hospitals, coroners, medical examiners, funeral directors, and anyone else involved in transportation of a deceased infected individual to minimize risk of exposure.
- Communicate the circumstances of the death to those involved in transportation of a deceased infected individual to allow for appropriate allocation of resources (i.e. PPE, staff support, etc.).



PROTECT

Law enforcement agencies should be sure to provide training to all personnel on proper application and removal of PPE as well as proper hand-washing techniques. Follow your agency policy or Centers for Disease Control and Prevention (CDC) guidance. Officers who encounter or come into contact with a deceased individual suspected of having COVID-19 should:

- Avoid disturbing the body. Based on what is now believed, the virus is transmitted through the air or when touching contaminated surfaces. Because the body is not producing air exchange or actively coughing, the need to use some PPE items may be less urgent. However, risk remains until the last gust of air has been expelled from the body (which may be post-mortem).
- Officers should use Personal Protective Equipment (PPE) if available, in accordance with agency policy. PPE might include:
  - Respirator (such as an N-95 or higher) or other appropriate mask
  - Non-latex gloves
  - Protective glasses or goggles
  - Impermeable suit or gown
  - Rubber boots
- Use caution when removing PPE and follow standard operating procedures for PPE disposal. See Centers for Disease Control and Prevention (CDC) guidance.
- Use extra precaution when entering homes or businesses.
- Follow guidance in document titled ***Law Enforcement Officer Exposure to COVID-19***.

Communicating with Families

Suspected COVID-19 deaths may result from symptoms of the virus or complications related to underlying health conditions. As such, the cause of death should be considered "suspected" until confirmed by a Medical Examiner, which may take some time. Family members at the scene of the death will likely have questions and experience a range of emotions. Officers should:

- Use calm, clear, and direct language when speaking with the deceased's loved ones.
- Presume all inhabitants within living space to be carriers regardless of absent symptoms.
  - Maintain six feet of separation during interviews.
  - Consider conducting interviews of family or housemates outside with good air exchange.
  - Ask screening questions of anyone present in the living space to promote the safety of the officers.
- Encourage the family to safely de-contaminate the home and any surfaces that the deceased individual may have been in contact with.
  - Be sure to suggest using a cleaning agent listed by the Centers for Disease Control and Prevention (CDC) and/or the Environmental Protection Agency (EPA) to destroy the virus.
  - Suggest the family consider wearing PPE during cleaning or contracting a professional cleaning company to reduce their own risk of exposure to the virus.
- Encourage the family to follow CDC guidelines for self-quarantine, if applicable.

Media Relations

If media representatives reach out to the police agency after learning of a possible COVID-19 related death, the policy agency should refer the media official to the appropriate public health department. If the appropriate public health department requests it, agencies may choose to hold a briefing or press conference in conjunction with medical officials and other public health officials to alert the community of a COVID-19-related death. In any instance, it is important to respect the deceased individual's privacy and personal information, as well as any wishes for privacy by the family.

Resources Specific to COVID-19 Deaths

- CDC Postmortem Guidance
- CDC Coronavirus Guidance for Funeral Directors
- OSHA Control and Prevention

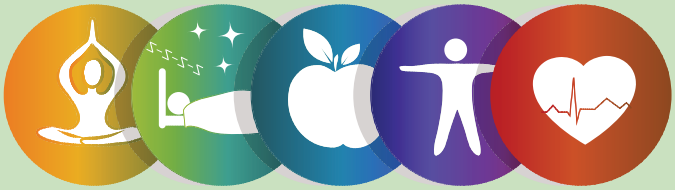
To access tools and resources to assist in informing your agency response to COVID-19, visit the CRI-TAC COVID-19 Library of Resources, a compilation of resources by the field of law enforcement, for the field of law enforcement.

IACP International Association of Chiefs of Police

COPS Community Oriented Policing Services U.S. Department of Justice

This publication was supported by cooperative agreement number 2017-CRWX-K001 awarded by the U.S. Department of Justice, Office of Community Oriented Policing Services. The opinions contained herein are those of the author(s) or contributor(s) and do not necessarily represent the official position or policies of the U.S. Department of Justice. References to specific individuals, agencies, companies, products, or services should not be considered an endorsement by the author(s) or the U.S. Department of Justice. Rather, the references are illustrations to supplement discussion of the issues.

CRI-TAC Collaborative Reform Initiative
TECHNICAL ASSISTANCE CENTER
A Program of the COPS Office



Officer Wellness and Resiliency During the COVID-19 Pandemic

The COVID-19 pandemic presents unique challenges for law enforcement officers and deputies. During this time, you should prioritize your mental and physical wellness.

Stress During a Pandemic

- It is important to remember that everyone reacts differently to stressful situations. How an individual might respond depends on their background and personality, as well as the community they live in. First responders may react more strongly to a crisis such as COVID-19 due to the responsibility of maintaining public safety, the risk of exposure through interactions with the community, and the concern of exposing family members to the virus, among other stressors.

Pay Attention to Your Emotional Health

- With the evolving nature of this crisis upending daily routines and adding stress to everyday life, it is essential to pay attention to your mental and emotional health. Taking care of your health can help you think clearly and react to urgent needs in a timely manner, both at work and at home. While the current situation may seem overwhelming and out of control, focusing on the things you can control can help reduce stress.

How to Mitigate Stress and Cope with Changes and Uncertainty

- **Stay informed** by learning the most up to date facts about COVID-19 and understanding the steps you need to take at home and on the job to protect yourself and your family from catching or spreading the virus.
- **Take care of your body** by maintaining healthy habits such as eating nutritious food, exercising regularly, and getting plenty of sleep as well as steering clear of nicotine and excessive alcohol intake.
- **Connect with others** by maintaining social relationships with those close to you. Set aside time to connect virtually or over the phone to keep your support system informed and strong. To stay connected with the community you serve, consider using social media or virtual town halls.
- **Practice mindfulness** by taking short breaks to reset and recognize what you need to do to cope with your emotions. Mindfulness activities include finding time for yourself, practicing deep breathing, and participating in activities that you normally enjoy.
  - Exercise or go for a walk
  - Watch a movie
  - Listen to music
  - Read a book
  - Spend time with loved ones
  - Meditate or practice yoga
  - Be creative through art
  - Keep a journal of your thoughts
- **Avoid too much exposure to news** by taking a break from news updates related to COVID-19, this includes social media too. Staying informed is important, but too much information can become overwhelming and impact overall family wellness at home. Limit your exposure to news updates by refraining from turning on the news at home or setting a time frame where you will disconnect from news for the day.
- **Seek help when needed** by talking with those around you, such as your fellow officers, command staff, executive leadership, chaplains, family, a psychologist, and anyone you can confide in.[1] Remember that you are not alone.

Following a natural disaster, 12% of individuals with low social support developed PTSD compared to 2.5% of individuals with high social support.[2]

1 https://emergency.cdc.gov/coping/selfcare.asp

2 https://www.ncbi.nlm.nih.gov/pubmed/17606382

Be Mindful of Those Around You

- If you feel edgy or stressed, those around you are too. Remember to practice empathy and compassion and support others because they might respond to stress differently than you.
- Having patience is important for both the officer and their loved ones. The day-to-day law enforcement job stressors, coupled with anxiety from family members about their loved one in the field or coping with additional family members and children in the home, can enhance the already-existing worries associated with COVID-19. Remind yourself to be patient and listen to one another.
    - Deliberate breathing can reduce negative feelings including hostility, guilt, and irritability and reduce physiological markers of stress.[3]
- Check on those in your support system, because even while stuck in tight quarters or out on the streets, it may become difficult to stay connected to colleagues, family, and friends.
    - Among police, social support from colleagues is associated with less psychological distress in the face of traumatic events.[4]

Reflecting daily on what you are grateful for can help people to sleep 31 minutes longer per night.[7]

- Life right now is fundamentally different, so practicing gratitude can pay dividends. Focus on the good in your life and not the negatives that are out of your control.[5]
    - Keeping a gratitude journal has been shown to increase well-being while significantly lowering depressive symptoms.[6]

Agency and Community Resources

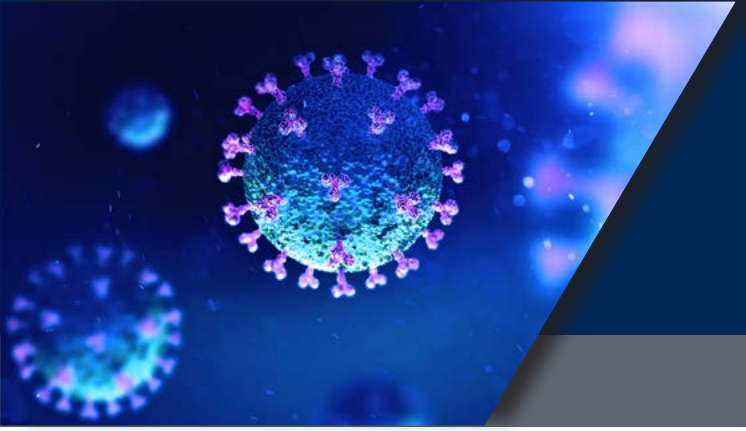
[For example add contact information for Employee Assistance Programs or Peer support Programs]

3 https://www.ncbi.nlm.nih.gov/pubmed/28626434
4 https://www.ncbi.nlm.nih.gov/pubmed/25476966
5 http://www.mindfuljunkie.com/
6 https://www.ncbi.nlm.nih.gov/pubmed/16045394
7 https://greatergood.berkeley.edu/images/application_uploads/Emmons-CountingBlessings.pdf

IACP® International Association of Chiefs of Police

COPS Community Oriented Policing Services U.S. Department of Justice

This project was supported, in whole or in part, by cooperative agreement number 2017-CR-WX-K001 awarded by the U.S. Department of Justice, Office of Community Oriented Policing Services. The opinions contained herein are those of the author(s) or contributor(s) and do not necessarily represent the official position or policies of the U.S. Department of Justice. References to specific individuals, agencies, companies, products, or services should not be considered an endorsement by the author(s) or the U.S. Department of Justice. Rather, the references are illustrations to supplement discussion of the issues.



IACP
International Association of Chiefs of Police

COVID-19: Health and Safety for Law Enforcement Families

Educate Yourself. Stay Informed. Be Safe.

The Coronavirus Disease 2019 (COVID-19) outbreak presents unique challenges for law enforcement families. Healthy practices start at home and are vital in preventing officers and their families from catching the virus.

Understanding the Virus

COVID-19 is a respiratory disease first identified in Wuhan, China, in December 2019 and now identified in more than 180 countries across the globe. Coronaviruses are a family of viruses found in people and animals causing a range of illnesses from the common cold to severe respiratory infection. COVID-19 is called a novel strain of coronavirus because it has never been identified in humans before. As it is a newly-identified virus, this is an emerging and rapidly-evolving situation and new information is becoming available daily.

- The most common symptoms include a dry cough, fever, and shortness of breath.[1] Less common symptoms may include nausea, fatigue, sore throat, chills, and nasal congestion.
- At-risk populations include older adults and those with pre-existing medical conditions such as heart disease, lung disease, and diabetes.

Talking to Children about COVID-19

Children may experience fear and uncertainty about the virus. They may also have fears about their parents reporting for duty during the outbreak. Take time to have a conversation with your child and answer questions he/she may have. Having age-appropriate discussions about the risks and prevention/mitigation behaviors help to normalize behavior and not increase family anxiety. Consider the following when talking about COVID-19 with children[2]:

- Ask your child what he/she knows about COVID-19 and clarify any misinformation. Understand that children may hear rumors or misinformation from their friends, peers, news, television, or from social media.
- Re-assure your child that the risk for younger age groups without pre-existing medical conditions is relatively low[3] and that of those people who do contract the virus, most experience only mild symptoms and recover at home from the infection.[4]
- Adapt your language to your child's comprehension level. When talking about COVID-19, consider the child's maturity and ability to understand what you're saying.
- Understand that fear and unease may be expressed in different ways by children.
- Explain that routines and schedules may temporarily change and why that may happen.
- Explain how the virus spreads and how germs can easily move from person to person and even from surface to surface.

Explaining Basic Hygiene Practices to Children

- Practice proper hygiene together.
- Teach your child to wash his/her hands with soap and water for at least 20 seconds. Encourage younger child to sing their ABCs if they struggle to count to twenty. Challenge older children to come up with a song to sing for at least 20 seconds while they wash their hands.
- Encourage good hygiene, such as promptly washing or sanitizing hands after coughing, sneezing, or physically interacting with others.
- Point out when your child is touching his/her face and gently discourage poor habits that could contribute to the transmission of the virus. Make this a fun challenge with children to avoid causing stress or fear about "getting caught" but rather frame it as a family game to increase the practice of good hygiene.

How Agencies Can Support Law Enforcement Families

Family members of law enforcement officers reporting for duty may experience fear and distress that their officer may be exposed to the virus because of their profession. Family members may also be distressed at having their officer away from home for prolonged periods of time. Agencies can be proactive in communication to ease these fears and ensure officers have a strong support system to return home to.

- Establish a clear path of regular and frequent communication to law enforcement families, such as an email list, dedicated social media account, or online group.
- Share proactive steps and safety protocols being taken to ensure the health and well-being of officers and their families, including information on healthcare, mental wellness, and/or Employee Assistance Programs (EAP).
- Engage with family or spousal support groups to disseminate official agency messaging to family members.

1 https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html
2 https://www.nctsn.org/sites/default/files/resources/fact-sheet/outbreak_factsheet_1.pdf
3 https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/children-faq.html
4 https://www.cdc.gov/coronavirus/2019-ncov/community/home/faq.html

Officers at Home

Officers are exposed to numerous individuals and environments while on duty. Before returning home, officers should:

- Sanitize duty belts and any equipment that's frequently touched.
- Change out of uniform at the end of a shift while still at the station or immediately after returning home prior to interacting with family members.
- Visually practice good hygiene upon entering the home so children see parents washing hands, changing clothes, etc. to model good behavior. Reinforce it as routine to help minimize children's anxiety.

Illness at Home

Officers should also create a family emergency plan to include collecting key phone numbers, stocking up on necessary medications and supplies, charging up equipment, etc. Get regular up-to-date information about local COVID-19 activity from public health officials in your community. Remember to consider members of your household that may be at greater risk such as older adults and people with severe chronic illnesses.[5]

If you or a family member has been exposed to COVID-19 and develops a fever and symptoms of respiratory illness, such as cough or difficulty breathing,[6] take the following actions:

- Call your healthcare provider immediately.
- Stay home except to get medical care.
- Isolate in a room from the rest of family members (including pets). To limit anxiety in children, reinforce that this is a normal thing to do to keep the rest of the family healthy as part of basic disease isolation, similar what families already practice for the flu, cold, etc.
- Make sure to follow your agency's protocols relating to sick leave.

Remaining at home during sickness will prevent the virus from spreading to community members.

Insert Local Agency Name

Contact

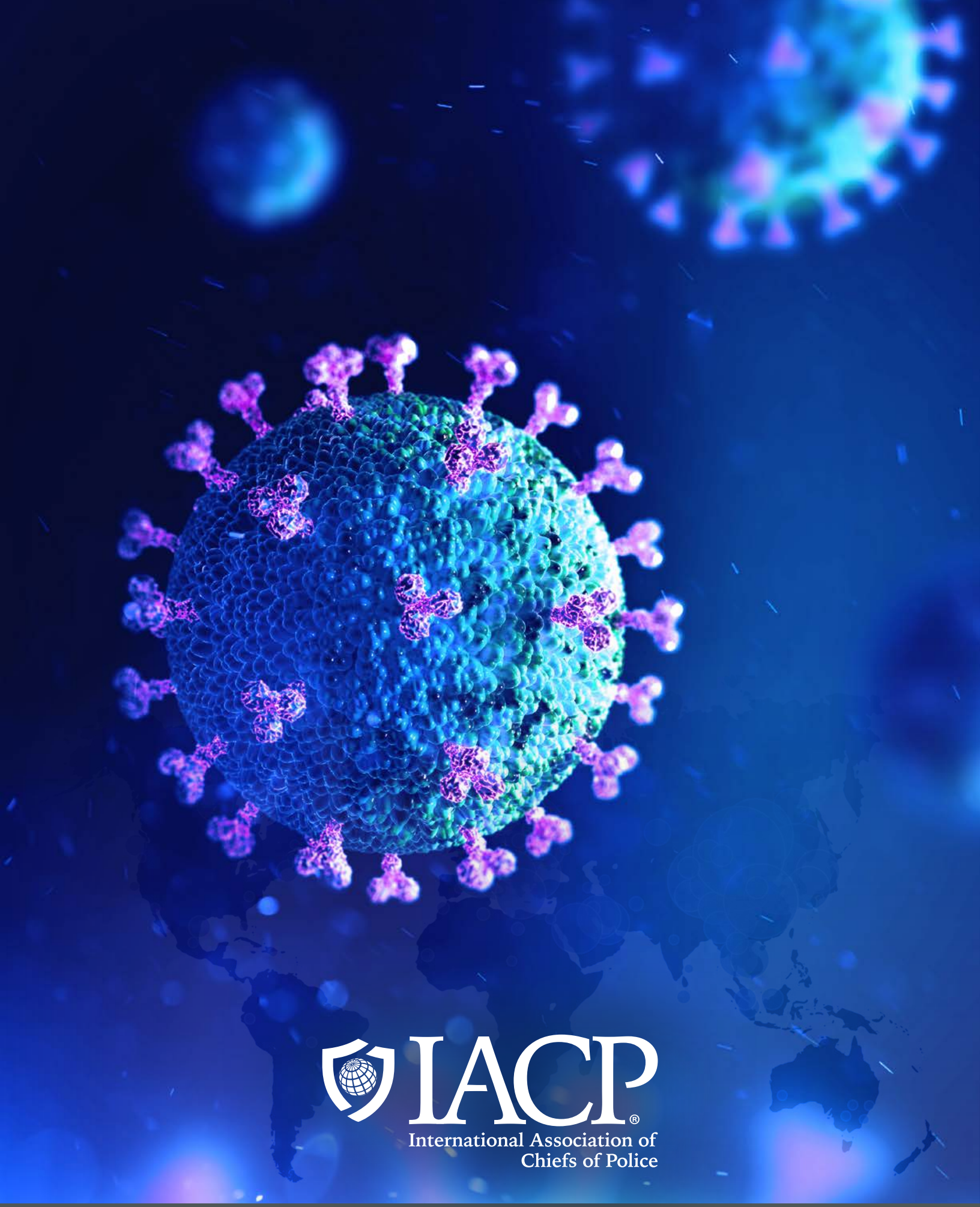
Social Media

Support Groups

Agency Points of Contact for Families
(healthcare, mental wellness, Employee Assistance Programs (EAP)

5 https://www.cdc.gov/coronavirus/2019-ncov/community/home/checklist-household-ready.html

6 https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html



IACP®
International Association of
Chiefs of Police