EMERGENCY PROCEDURES W.H.O. DECLARATION OF A PANDEMIC PUBLIC HEALTH EMERGENCY PROTOCOL

WILLIAMSTOWN
POLICE DEPARTMENT
POLICY & PROCEDURE NO.
7.10

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I. GENERAL DISCUSSION

A pandemic is any disease epidemic occurring over a very wide area that affects a large proportion of the population. An influenza (flu) pandemic is considered the most probable of all disease pandemics. Pandemic influenza is a virulent human flu that causes a global outbreak of serious illness. The virus will spread easily from person to person, mostly through coughing and sneezing when people are in close proximity of 6 feet or less. Because there is little natural immunity, the disease can spread easily from person to person relatively quickly. Pandemic influenza has the potential to become global relatively quickly, for prolonged periods and could have several waves/intervals (lasting 2-3 months each) which could reoccur for a period of up to two years. Other pandemic agents are also possible.

II. ASSUMPTIONS

The rate of departmental absenteeism could be as high as 40% or more during a pandemic as a result of employee illness, or the need for an employee to care for an ill family member or child who is not in school as a

result of school closings¹. It is likely that a pandemic will lead to a major disruption of basic economic supply chains as well as public and private infrastructure. During a moderate to severe influenza pandemic, it is projected that demand for police services will be extraordinarily high.

Call takers and dispatchers may be overwhelmed with calls for assistance as well as police response units who in addition to a surge in traditional enforcement duties, may be called upon to enforce movement restrictions, quarantines, or provide security services for health and medical services and to control civil disturbances resulting from probable rationing and shortages.

It is highly unlikely that the department could expect to receive mutual aid assistance to supplement the police department's resources during a pandemic. Therefore, it is very likely that the department will be forced to reduce services as a result of personnel shortages and greater than normal demand for service to deal directly with the public health crisis.

III. **DEFINITIONS**

Coronavirus (COVID-19): Coronaviruses are a family of viruses found in people and animals causing a range of illnesses from the common cold to severe respiratory infection. The Novel Coronavirus Disease2019(COVID-19) is the name given by the World Health Organization for a new respiratory disease first identified in Wuhan, China, in December2019. As it is a newly identified virus, this is an emerging and rapidly-evolving situation and new information becomes available daily.

Disease: A condition that impairs normal functioning of a living organism.²

Quarantine: To separate and restrict the movement of people who have been or may have been potentially **exposed** to a communicable disease and are not yet ill. Quarantined persons may become ill and infectious over a certain period of time after exposure thus presenting a risk for spread of the communicable disease. A period of two (2) weeks has been recommended by the CDC for many influenzas.

Isolation: Separating people who are in fact ill and have tested positive for a particular strain of a deadly virus from other people to prevent the spread of the communicable disease.

Pandemic Influenza Preparedness, Response, and Recovery, Guide for Critical Infrastructure and Key Resources, Department of Homeland Security, September 19, 2006, Section 3.3.3

Pandemic: COVID-19 has been designated as a pandemic, defined as an outbreak of a disease that occurs over a wide geographic area and affect an exceptionally high proportion of the population.

PPE: Personal Protective Equipment such as respirators, non-permeable gloves, aprons, coveralls, shoe covers, splash and eye protection adequate to protect wearer from exposure to contaminants, bodily fluids, airborne pathogens or other disease specific transmission routes.

Self-quarantine: The voluntary act of putting oneself in quarantine. **Shelter-in-place**: Requires individuals stay in a safe non-public location (home), except for essential activities, until told otherwise.

Social distancing: Maintaining distance between people to avoid the spread of disease.

A. EXTERNAL RESPONSE MEASURES

- 1. Response to a pandemic will occur at the local level and will inevitably be ramped up to a multi-agency and multidisciplinary response. The nature of a rapidly spreading, highly contagious disease will require coordination not only between multiple municipal agencies, but also across jurisdictional lines with assistance from the State and Federal Government.
- 2. Command and control of disaster operations during a pandemic may be conducted according to the National Incident Management System's (NIMS) Incident Command Structure/System (ICS). Chain of command will be organized under the Incident Command System (ICS) which will often time operate as a Unified Command Structure with multiple disciplines as the top of the command structure (e.g., HHS, Police, Fire, EMS, Local Government CEO). As specified under NIMS, a Joint Information System or Joint Information Center (JIC) will be used to coordinate the release of timely information among all the involved agencies and jurisdictions to the residents and stakeholders of a given municipality. The website will act the primary repository of all messaging to allow for the appropriate dissemination of important updates and information and related links.
- 3. Officers may be called upon to maintain public order and to:
 - (a) Provide security for vaccine/treatment transport and vaccine distribution sites;
 - (b) Assist in enforcing public health orders;
 - (c) Provide site security as needed at medical facilities and similar venues, and

- (d) Assist with handling of any mass fatalities.
- 4. The Williamstown Police Department will work in partnership with other supporting pandemic response plans to include:
 - (a) Massachusetts Department of Public Health (DPH)

https://www.mass.gov/orgs/department-of-public-health

(b) DHHS Pandemic Influenza Plan, U.S. Department of Health and Human Services.

https://www.hhs.gov/

- (c) Massachusetts Emergency Management Agency (MEMA)
- https://www.mass.gov/orgs/massachusetts-emergency-management-agency

B. <u>INTERNAL</u> (<u>POLICE DEPARTMENT SPECIFIC</u>) RESPONSE <u>MEASURES</u>

1. The goal of pandemic planning and response within the Williamstown Police Department requires efforts directed toward keeping departmental personnel as disease free as possible and maintaining a continuity of essential operations.

2. PRE-PANDEMIC PLANNING:

- (a) **Providing Employee Training** The <u>Designated Infection Control Officer</u> (DICO) will present training to all departmental personnel that expressly addresses techniques that may be employed to minimize exposure to pandemic illnesses and other infectious diseases, encourage immunization, discourage reporting to work when sick, the proper use of Personal Protective Equipment (PPE), and encouraging personnel to have family preparedness plans in the event of a pandemic. This training will be mandatory for all employees. This training may be in the form of specialized classroom training or provided in small units at roll call.
- (b) **<u>Determine Personal Protective Equipment Needs</u>** Providing personal protective equipment is one of the most important steps for protecting personnel and is a necessary component of an effective pandemic response plan. The DICO should determine the appropriate quantity and type of personal protective equipment that will be needed by personnel during a pandemic.

The DICO shall plan for and acquire PPE well before an outbreak occurs. The DICO will make provisions for adequate storage of the equipment; routinely rotating the oldest stock of PPE out for everyday departmental use while acquiring new stock for replenishment and document PPE quantities and readiness in quarterly operational

readiness reports. The DICO has provided proper mask fitting tests for the N95 mask at Fairview Hospital on March 14th and 18th 2020.

3. OPERATIONS DURING A PANDEMIC:

- (a) <u>Law enforcement facilities</u> The goal during a pandemic is to keep the law enforcement workplace as disease-free as possible by increasing the cleaning of police facilities and reducing the possibility of having sick or exposed persons contaminating the work area and thus exposing other personnel to the disease. To address this issue, the following procedures will be in effect:
- Ensure employees understand self-protection strategies regarding
 infectious disease control by conducting additional training via internal
 emails and by posting notices and reminders throughout police department
 facilities as appropriate. Encourage agency personnel to have plans to take
 care of their families while they are assigned to critical functions for
 prolonged periods.
- Employees and visitors to the police department facility will not be allowed access to the police building if they are sick or show any signs or symptoms of illness.
 - Employees who are sick will be required to stay home rather than to report to work. Employees should stay at home at least 72 hours after they no longer have a fever or show symptoms. This should be determined without the use of fever-reducing medicines (any medicine that contains aspirin, ibuprofen or acetaminophen). Employees should constantly monitor themselves for signs of illness. If symptoms exist, it is imperative that the employee stays at home. This is an important component of protecting the health and safety of others in the workplace. Employees who test positive for COVID-19 or who show active symptoms of the virus must inform department medical personnel or other officials.
- Concentrate the efforts of custodial staff on the cleaning and sanitizing of all frequently touched surfaces within the building such as counters, door knobs / handles, telephones, copiers, vending machines, elevators, restrooms, etc. Viruses can live on hard objects up to 8 hours or longer.
- The DICO will ensure an adequate supply of personal protective equipment and alcohol-based hand sanitizers are available to all personnel. During a pandemic health emergency, latex or nitrile gloves, N95 mask and nonvented eye protection shall be worn when in hands-on contact with members of the general public known or suspected to be ill or who are in quarantine or isolation. Appropriate PPE is to be worn when in contact with their personal items or effects as well. Remove and properly dispose of gloves and N95 masks at the conclusion of the contact, or when cross-contamination may occur.

- Personnel should not use other workers phones. Personnel are encouraged to wash hands frequently with soap and water for at least 20-30 seconds. If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol content. Always cover the mouth and nose with a tissue or into your elbow when coughing or sneezing. Avoid touching of the face, eyes, nose and mouth.
- In person department in-service and outside training may be suspended during this period.
- Wherever possible, employees should maintain a social distance from each other and the public of at least <u>six (6) feet</u>. Refrain from hand shaking or other greetings involving personal contact.

Consistent with CDC guidelines and the governor's/Ma. Department of Public Health recommendations, whenever on duty officers and employees are in direct contact with another person, including while they're in the station, and are unable to maintain social distancing of within 6 feet of another person, it's highly recommended that they wear a surgical mask. All members will be issued two masks to begin with.

If you soil, destroy or run out of your PPE, see a sergeant so it can be replaced.

Social distancing shall be practiced in the Communications Center whenever possible and reasonable.

Limit time in the Communications Center to police business and only to the extent necessary

- **Cruisers** Certain functions or equipment require shared use of surfaces such as vehicle steering wheels and door handles, communications center phone keypads and handsets, cruiser microphones, handheld radar units, MDT keyboards, adjustable rear-view mirrors etc. At the completion of use or end of shift, employees shall wash all contacted surfaces with an appropriate disinfectant which is provided by the department. Disinfect cruisers after prisoners have been transported Officers should drive with windows open (at least partially) to ventilate the patrol vehicle. If exposed to COVID-19 or concerned about the possibility of exposure, arrange to take the vehicle out of service (i.e., deadline the patrol vehicle. Know the department's protocol for dead lining and, if needed, labeling a vehicle that may be contaminated. Make notification about the location of the dead lined vehicle.
 - <u>Common Areas</u> Employees should wipe down common areas such as in the report room or the lunch room prior to use. They should take extra care when using common computers or phones to ensure that

they wipe those surfaces. These areas need to be kept free of all clutter to make wiping the surfaces easier.

- <u>Contact With the Public</u> Officers should use care when dealing with members of the public, whether on radio calls or foot patrols. Use social distancing to minimize close contact. Do not shake hands, and avoid people who are coughing or sneezing. Avoid large groups if possible.
- <u>Exposure</u> Employees who have been exposed, or think they have been exposed, should report that exposure to the Chief immediately and avoid contact with others.
- <u>Hand Washing</u> Employees should make it a habit to wash their hands with warm soapy water, for at least 20 seconds, after each interaction with the public whenever possible. If necessary, officers should check with Dispatch upon clearing a call and return to the station to wash up. In the alternative, and where possible, they should use an alcohol based jell to clean their hands until they can wash them.
- **Food** Eating from a large common tray of food is an effective way to spread an illness; therefore, we shall not take these trays in until further notice.

<u>Dispatch</u> - The Dispatch window shall remain secure, if reasonable, when dealing with the public. Utilize intercom system whenever possible. Dispatchers are to wipe down their work areas at the start of each shift. This includes their computer keyboards and their phones.

Personal Protection during Potential Exposure

All staff members should make prevention a personal priority to reduce exposure and risk. Recognize that exposure can come from someone in the community who is asymptomatic. Exposure may also come from friends and neighbors. The following actions are strongly recommended:

Stay healthy to keep your immune system well-functioning. This might include actions such as getting a flu shot, encouraging family members to get flu shots, and checking with department or personal physicians to ensure that other immunizations such as tetanus, are up to date. Contracting any sort of illness could weaken one's immune system and make them more susceptible to coronavirus. Eat a healthy diet, and get an appropriate amount of sleep.

Inform department medical personnel or other officials if you have the following pre-existing condition that may increase your risk to developing more severe symptoms:

- a. Heart Disease or hypertension
- b. Lung Disease
- c. Diabetes

- d. Pregnancy
- e. Age 65 and over
- f. Immunocompromised from any other condition or illness.

Avoid touching face, nose, eyes, and mouth after handing a call for service, traffic stop, or other activity, until hands are washed or sanitized.

Carry a personal sanitizing kit on every shift. Carry disposable gloves. Carry surgical N95 masks, hand sanitizer, disinfecting wipes, paper towels, and large plastic bags. Put used items in a plastic bag and tie/seal it. Label the bag. Follow agency or health department protocols for disposal.

Avoid touching or leaning against furniture, vehicles, or other objects. Avoid using handrails.

Avoid shaking hands.

Take sick leave if feeling ill, particularly if symptoms include fever and respiratory problems. Illness of almost any type can cause immune deficiency. Do not take chances.

Know who to contact in the department or other agency if a concern or suspicion about personal exposure to COVID-19 arises.

If personal exposure to COVID-19 becomes a concern, discuss with Department command staff and then begin self-quarantine. Avoid contact with others until guided by a department official or health professional on how to proceed.

If personal exposure to COVID-19 becomes a concern, prepare a list of recent contacts including people in the community and peers. Include the location of the contacts.

Discuss risk of and response to personal exposure with family members, friends, and others who may be concerned.³ This can be done by:

- a. Offer perspective supported by evidence and agency information.
- b. Provide them with a department contact, if needed to gain additional information and support.
- c. Explaining basic hygiene practice to children
- d. Engaging in support groups to disseminate official agency messaging to family members

4. Personal Protection when Ill

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Distinguish between exposure to the COVID-19 virus and active symptoms. The following actions are strongly recommended if/when a staff member feels ill:

• Notify department medical personnel or other officials immediately.

- Seek help if you have a fever, cough, and hard time breathing. Call a doctor to find out the protocol first, in order to make sure you don't spread the virus to others. Procedures for and availability of testing kits may vary by location.
- If you are self-quarantining at home, don't go out except to see your doctor, and only <u>after calling first</u>. If you do have to go out, avoid public transportation, taxi cabs, and ridesharing.
- Cough or sneeze into the crook of your long-sleeve shirt or use a tissue and dispose of the tissue immediately into a covered bin (you should be doing this whether or not you suspect you have COVID-19 so as not to spread any illnesses).
- Clothing should be washed or dry-cleaned daily. Avoid shaking dirty clothing. On entering your home or station house, use grass or sand as a shuffle pit to clean debris from the bottom of your work shoes or boots. Do not take potentially contaminated gear past your station locker room or your home mud room. Wipe your duty belt with a sanitizer at the end of shift. Shower at the end of your shift.
- Practice social distancing from others (including but not limited to friends, family, and coworkers) to minimize the spread of the virus. This may include eating and sleeping separately from them, trying to stay in one room, and using a separate bathroom if possible.
- Wear a mask around others if you suspect that you may have the virus.
- Make sure that you, or someone at home, knows how to clean properly. Recent studies have shown that the coronavirus can live on surfaces for a few hours or up to several days. To reduce the chance of spreading COVID-19, wear disposable gloves to clean surfaces regularly with soap and water, followed by a disinfectant to kill the virus. In addition to several over the counter disinfectants that can be used, you can use options such as making a solution of 5 tablespoons of bleach in one gallon of water

or 4 teaspoons of bleach in a quart of water. Also, solutions containing at least 70% alcohol reportedly appear to be effective.⁴

5. Unified Command Structure:

- (a) The Chief of Police or his designee will serve as or appoint a representative to serve as the department's liaison to the public health emergency Unified Command structure. This person will be responsible for information exchange between the Unified Command and the Chief of Police or his designee and coordinate the department's response regarding the deployment of personnel and equipment for the UC response.
- (b) The department's UC representative will consult with the District Attorney's office and if necessary, the Attorney General's office to review procedures guiding the enforcement of community response measures and public health orders such as isolation, quarantine, forced quarantine and the apprehension, prosecution and disposition of quarantine / public health order violators.
- (c) When requested, the department will provide support to other departments and agencies, depending on available resources and input from the Unified Command, which will set priorities and guide the responses of individual agencies/sectors during a public health emergency.
- (d) Public information communications must be maintained to inform/alert citizens of changes in available services and response capabilities etc. Information should be closely coordinated with the public health unified command structure.

The Town of Williamstown Website will serve to facilitate this purpose:

6. POLICE AUTHORITY TO ENFORCE SUPERIOR COURT QUARANTINE ORDERS

A police officer has legal authority to enforce a quarantine order that has been issued by the Superior Court. The order must include clear directions on how it is to be enforced, including the police officer's role in enforcing the order. A police officer who is asked to enforce a quarantine order issued by the Superior Court should:

- Confer with supervisory personnel to develop an enforcement plan that mitigates risk to the police officer(s) and other personnel;
- Be provided with, and retain a copy of the court order for the official police report;
- Read the court order to determine what conditions it imposes on the subject of the quarantine order, and whether it provides clear instructions

on how the order is to be enforced, including the police officer's role in enforcing the order;

- Confer with the local Public Health Department or DPH, medical personnel, or EMS, to learn their assessment of the person's medical condition and the extent to which he/she may be contagious;
- Assess whether the subject of the court order may resist enforcement actions, thereby posing an increased risk to the police officer;
- Follow all safety guidance concerning the use of PPE.
- Remember: if the person is sick and may be contagious, stay at least six feet away from the person unless you are equipped with appropriate PPE.
- If the court order fails to provide clear direction on how it is to be enforced, officers should request the Health Agent, Board of Health or DPH to go back to Court to obtain a more detailed order. While waiting for a new court order to be issued, officers may act under the authority of the Community Caretaking Doctrine to detain the subject of the quarantine order, if he or she presents an imminent danger to public health and safety.

7. POLICE AUTHORITY TO ENFORCE PUBLIC HEALTH QUARANTINE ORDERS

When facing a situation in which the subject of a quarantine order is violating, or is threatening to violate a quarantine order issued by a Board of Health or DPH, the police officer should request the Board of Health or DPH to apply to the Superior Court for a court order that provides clear instructions on how the order is to be enforced, including the role of the police officer. As mentioned above, in limited circumstances, a police officer may act under the authority of the Community Caretaking Doctrine to detain the subject of a quarantine order who presents an imminent danger to public health and safety.

8. POLICE AUTHORITY TO DETAIN OR ISOLATE IN THE ABSENCE OF A QUARANTINE ORDER

COMMUNITY CARETAKING DOCTRINE:

When acting in furtherance of his or her community caretaking responsibilities, a police officer has authority to act to render aid and prevent serious injury to people or property. The Supreme Judicial Court has concluded that the constitution does not require a police officer to sit idly by if immediate action is needed to prevent serious harm to people or property. If a police officer acts in furtherance of his community caretaking responsibility, he has authority to take immediate action to render aid, assess and respond to situations posing an imminent serious threat to life or property, and otherwise protect the public health and safety from imminent harm.

Four conditions must be present for a police officer to act under the community caretaking doctrine that otherwise might be considered an unlawful search and seizure under the 4th Amendment and Article 14 of the Massachusetts Declaration of Rights:

- 1. The police officer must have reasonable grounds to believe that an emergency exists that presents an <u>imminent and serious threat to life</u> or property;
- 2. The police officer must in fact take immediate action delay in acting suggests that immediate action was not necessary. However, it may be reasonable to delay action in order to bring appropriate emergency personnel and resources to the scene or protect the safety of the police officer;
- 3. The police officer's conduct must be <u>motivated by a desire to render aid</u> <u>or protect the public</u>, rather than to gather evidence of a crime, apprehend a criminal, or otherwise exercise his law enforcement authority;
- 4. The police officer's actions must be reasonable considering the emergency, and be no broader than necessary to alleviate the emergency at hand.

Under appropriate circumstances and when reasonably necessary, the community caretaking doctrine permits a police officer dealing with a public health emergency to forcibly isolate people who pose a serious threat to others because of their exposure to contagions. Although a competent person may refuse emergency medical treatment, the police may nonetheless isolate him if he poses an immediate threat to others because of his exposure to a dangerous or deadly contagion.

Detaining or Isolating a Person Who May Have Highly Contagious, Dangerous/Deadly Diseases:

In the absence of a Superior Court quarantine order, a police officer may exercise his authority under the community caretaking doctrine to detain, isolate or quarantine a person who may have a highly contagious dangerous or deadly diseases under the following circumstances:

• The police officer must first determine that the person presents an imminent and serious threat to public health. In most instances, a police officer does not have the necessary experience and expertise to assess the likelihood that a person has a highly contagious dangerous/deadly disease and the threat the person presents to public health. Accordingly, a police officer must rely on the expertise and judgment of medical or public health personnel. If not already on scene, a police officer should summon EMS, and if necessary, request that the public health agent, Board of Health member, State DPH or other medical personnel come to the scene. Onscene personnel (police or EMS) should immediately contact the DPH Epidemiology Program at 617-983-6800 and public health personnel will

assess whether the individual meets the criteria for consideration as a suspect case of a highly contagious dangerous or deadly disease. Additionally, on-scene personnel may request assistance by calling MEMA's Communications Center at 508-820-2000.

- A police officer should rely on the determination of EMS, public health, or other medical personnel that a person does or most likely has a highly contagious, dangerous/deadly disease and poses an imminent and significant threat to public health by refusing to voluntarily isolate or quarantine themselves. This determination should preferably be presented to the police officer in writing prior to the police officer taking any action to detain or isolate the person. In any case, the determination should be reduced to writing before or as soon as possible after the police officer acts and be included in the officer's official report.
- In most cases, a person who is asymptomatic (not yet sick) but may have been exposed to a highly contagious, dangerous/deadly disease and may develop symptoms soon, does not present the type of imminent public health threat that justifies police action under the community caretaking doctrine. When dealing with an asymptomatic person who is refusing to comply with an isolation or quarantine order that has been issued by a local health agent, Board of Health or State DPH, the advisable course of action is for public health officials to seek an emergency order from the Superior Court that provides clear direction to the police. But, if after consulting with EMS, medical or public health personnel, and considering the facts and circumstances of the situation, the police officer has a reasonable belief that the person presents an imminent and significant danger, the officer may take immediate action after consulting with their supervisor, and in accordance with this General Order. Such action includes ordering the person to isolate himself or herself in a residence or other location. If necessary, the police officer may forcibly restrain, detain or isolate the person. A police officer should not approach within six feet of such a person without proper PPE. Contact should only be made if the officer is wearing appropriate PPE and is trained and practiced in donning, doffing, and using PPE.
- The police officer should employ the least restrictive and intrusive means of restraining, detaining or isolating the person, such as isolating the person within his home or car, and only for so long as it takes for Public Health officials to apply for an emergency order from the Superior Court that provides clear direction to the police.
- The police officer's actions must be reasonable considering the situation and be no broader than necessary to protect the public from the threat.

8. Miscellaneous

a. All employees shall review and seek guidance from the department's OSHA Exposure Control Program. (4.53)

b. Work schedules and shift hours beyond the normal shifts are subject to change with little or no advance notice to meet needs and maintain operational effectiveness.

9. Medical Calls

- a. Effective immediately WPD officers will not respond on medical calls with the following exceptions:
 - Unresponsive / Not Breathing
 - CPR in Progress
 - Serious Trauma/Bleeding
 - Overdoses
 - Any other call at the discretion of the desk officer or OIC
 - As requested by WFD/NBEMS
- c. When responding to a medical call and it is deemed appropriate, officers shall don personal protective equipment (PPE) which include but not limited to:
 - a. N95 Mask
 - b. Eye Protection
 - c. Gloves

10. Addendums

- a. The following addendums have been attached to this policy
 - 1. Quick Reference Guide Responding to COVID-19 Incident
 - 2. Station Protocols for Exposure Mitigation

11. Calls for Service and Operations While on Patrol

As with other emergencies and natural disasters, consideration must be given to how law enforcement will function during the emergency. In order to maintain a high level of public safety it is essential that law enforcement consider how operations will impact close contact spread of COVID-19 and what steps law enforcement can consider to aid in controlling the virus.

1. Law enforcement operations will generally be limited to those calls of a serious nature where there is an immediate need for investigation i.e., murder, rape, robbery, arson, kidnapping or where there is a threat of injury to a person i.e., domestic assault, assault in progress, murder, rape, robbery, arson, kidnapping etc. Note this is not meant to be an exhaustive list but should convey the idea that if no person is in danger, then law enforcement should limit or eliminate in-person responses that expose officers.

- 2. When identification is required, have the subject show you his/her identification without taking it from them, so that the officer does not physically touch the document. Take a photo of the card or document with a department-issued phone to verify information on the MDT or radio. Delete the photo after a warning or citation is issued (or other paperwork/forms are complete).
- 3. Pro-active enforcement will be limited. During person-to-person contact, officers are potentially exposed to individuals who are contagious, whether they are aware of it or not. In every traffic stop, every pedestrian stop, and any other contact, the officer will be in close proximity to the subject and traditionally would be handling items, i.e., license and registration, that the subject just handled.
- 4. Given the close nature of police-community contacts, officers can become exposed. If exposure or suspected exposure occurs, the officer may be placed under a 14-day quarantine or require medical or more specific care. In such events the overall numbers of public safety personnel available will thereby be diminished leaving an insufficient number of officers available to handle serious public safety events.
- 5. The Department will attempt to handle calls via telephone when no one is in immediate danger. Reports of thefts, property, damage, and even minor vehicle collisions can be taken over the telephone or online through a department web portal. Counter reports at the station are also discouraged. Minor traffic accidents without injuries and with no indication that an operator is impaired by drugs or alcohol may often be handled by an exchange of driver information and an online report submitted within 72 hours.
- 6. Officers are encouraged to exercise discretion and avoid arrests for minor offenses that do not endanger others, including property crimes. A concern for law enforcement is the spreading of COVID-19 to officers, to corrections personnel, and to other persons housed in the jail. Additionally, with courts throughout the country being closed, these arrests will only further backlog the system. Limiting the number of persons housed in a jail or correctional facility also plays a role in reducing the potential spread of COVID-19 in jails.
- 7. Officers should maintain safe distances during interviews and other contacts with victims, witnesses, suspects, and others. Six feet between individuals is recommended.

Williamstown Police Department Quick Reference Guide Responding to Covid-19 Incident

Signs and Symptoms of People with COVID-19:

- A. Have a mild to severe respiratory illness.
- B. Data suggest the symptoms may appear in as few as 2 days or as long as 14 days after exposure to the virus that causes the COVID-19 Coronavirus.
- C. Symptoms can include fever, cough, difficulty breathing, and shortness of breath.
- D. The virus causing COVID-19 is called SARS-CoV-2. It is thought to spread mainly from person to person via respiratory droplets among close contacts. Respiratory droplets are produced when an infected person coughs or sneezes and can land in the mouths or noses, or possibly be inhaled into the lungs, of people who are nearby.
- E. Close contact may include:
 - a. Being within approximately 6 feet of an individual with COVID-19 for a prolonged time.
 - b. Having direct contact with body fluids (such as blood, phlegm, and respiratory droplets) from individuals with COVID-19.

Protect Yourself from Exposure:

- A. If possible, maintain a distance of at least 6 feet.
- B. Practice proper hand hygiene. Wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, use alcohol-based hand sanitizer with at least 60% alcohol.
- C. Do not touch your face with unwashed hands.
- D. Have a trained EMS/EMT assess and transport anyone you think may have COVID-19 to a health care facility.
- E. Ensure only trained personnel wearing appropriate protective equipment (PPE) have contact with individuals who have or may have COVID-19.

Recommended Personal Protective Equipment (PPE):

According to the CDC, Law Enforcement who must make contact with individuals who have or who are suspected to have COVID-19 should follow CDC's Interim Guidance for EMS. Different styles of PPE may be necessary to perform operational duties. These alternative styles (i.e., coveralls) must provide protection that is at least as great as that provided by the minimum amount of PPE recommended.

The minimum PPE recommended is:

- A. A single pair of disposable examination gloves,
- B. Disposable isolation gown or single-use/disposable coveralls,
- C. Any NIOSH-approved particulate respirator (i.e., N-95 or higher-level respirator), and
- D. Eye protection (i.e., googles or disposable face shield that fully covers the front and sides of the face).

*If unable to wear a disposable gown or coveralls because it limits access to duty belt or gear, ensure duty belt and gear are disinfected as soon as possible after contact with individuals.

If Close Contact Occurred During Apprehension:

- A. Clean and disinfect duty belt and gear prior to reuse, with a household cleaning spray or wipe, according to the product label.
- B. Follow standard operating procedure for the containment and disposal of used PPE.
- C. Follow standard operating procedures for containing and laundering clothes. Avoid shaking the clothes.
- D. Seek guidance from the Department's OSHA Exposure Control Program. (4.53)

Williamstown Police Department – Station Protocols Exposure Mitigation – COVID-19 Incident

To mitigate the possibility of exposure from COVID-19 the following protocols are in place regarding the patrol operations and detainee handling inside the police dept. These protocols will supersede current policy in regards to Detainee Handling.

- 1. The operating floor for the building is split into two sections with the doorway into the booking room being the designated line.
- 2. The booking room, cell block and interview 2 will be operations for patrol to be accessed by the exterior booking room door.
- 3. Communication's Center, EOC, Admin offices and conference room to be accessed by the front business door or lower rear lot door.
- 4. During normal operations the Kitchen, restrooms, interview 1 and the hallway where officer mail, and department information is posted will be shared spaces.
- 5. The desk officer shall remain in the Communications Center with doors closed unless extreme extenuating circumstances arise. If a desk officer is in need of relief, please observe best practices for interacting during the break period. Social distancing shall be practiced in the Communications Center whenever possible and reasonable. Limit time in the Communications Center to police business and to the extent only necessary.
- 6. The booking room, cell blocks and interview 2 will be used by officer assigned to the road and during detainee processing.
 - a. Tasers, Cruiser Keys, Portable Radio Chargers will be kept in Interview 2. Roll call will be held either digitally or "on air" Officer can use the 2-way radio, IMC Chat, department intercom, direct call from Booking to the Communications Center or any other digital method that works for them. NARCAN is now permanently assigned to cruisers.
 - b. Detainees will be brought in the booking room door and upon release leave though the booking room door and walked through the gate. If a medical call arises, they will be transported out the booking room door by EMS
 - c. Cell checks will be logged and conducted visually using CCTV by the desk officer and patrol officers will be tasked with conducting electronic checks using the Morse watchman that will be temporarily relocated to Interview 2.
 - d. If a bail clerk is needed for release advise them when they are setting bail that if they arrive, they will be met at the gate and walked in the booking room door.

- e. Computers at the booking room counter and in interview 2 will be utilized by road officers to complete reports, online training, department communications, law enforcement research etc.
- 7. In the event of possible exposure, the door into the booking room will be secured and all shared spaces will be secured from exposed officers, detainees, EMS workers, Bail Clerks or other person who may be involved. The Communications Center is designated as a high priority area to remain free from infection.
- 8. If you rely on the locker room for all uniform and equipment storage it is suggested to have a backup plan in the vent the building is temporary closed. I suggest bringing your radio and firearm to and from work and having a spare uniform at home.

These protocols are in place until lifted.