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]

  o Notify supervisor or the designated agency contact.

  o Stay at home except to get emergency medical care.

  o Separate from other people at home, including pets (also known as "home isolation").

  o Contact healthcare provider and call ahead before visiting a healthcare provider.

  o Wear a facemask, if available, when you are around other people (including before you enter a healthcare provider's office).

  o Cover coughs and sneezes.

  o Clean your hands with soap often (at least 20 seconds).

  o Avoid sharing personal household items.

  o Clean all "high-touch" surfaces every day.

  o 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:

  o 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

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

    AND

  o 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:

  o You no longer have a fever (without the use of medicine that reduces fevers)

    AND

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

    AND

  o 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