J.A.Montgomery CONSULTING

To:

Police Chiefs, Public Safety Directors & Fund Commissioners

From:

Chief Harry Earle (Ret.)

Chief Keith Hummel (Ret.)

Date:

March 10, 2020

Re:

Law Enforcement Bulletin 2020-01

Coronavirus Update - COVID-19

Many of our clients have inquired about the novel coronavirus, or recently named COVID-19 by the World Health Organization. Our Department is actively monitoring reports from national and state health agencies. One of our top priorities should be the health and wellbeing of all of our employees. Obviously, the law enforcement, fire, EMS, and first responder communities are in a unique situation. They are called to emergency scenes to help people and this increases their chances of being exposed to several viral type illnesses. To be effective and to ensure that we are fulfilling our mission, we need to take precautions and prepare for possible contamination and illnesses that may be transmitted to our personnel.

Some recommendations that you may want to consider:

Visit the CDC's website for a list of "Best Business Practices" https://www.cdc.gov/coronavirus/2019-ncov/index.html.

This site will assist you with what you should know about the virus, it provides situational updates and information about travel, healthcare professionals, health departments, and laboratories.

Advise your personnel that if they are symptomatic and High Risk or Medium Risk it is REQUIRED that they contact their supervisor and the HR Department for advice on testing and treatment. The contact should be via telephone, do not respond to headquarters or the HR Department for in person consultation. This may cause additional contamination. The supervisor needs to notify the chief of police of the potential exposure. The employee should contact their medical doctor for treatment. Do not respond directly to a medical center before notifying them that you may have

the COVID-19 virus. The medical center will need to take precautions for your arrival. Follow any medical advice that is given to you as it relates to treatment, medications and quarantines.

Additional Recommendations:

Advise your personnel to closely monitor their health and follow the following public health guidelines and good hygiene practice tips from the CDC and World Health Organization:

- Frequently clean hands with soap and water for at least 20 seconds, or an alcohol based hand rub (that contains 60-95% alcohol) if soap and water is unavailable.
- Cover mouth and nose with flexed elbow or tissue or sleeve when coughing and sneezing.
- Avoid close contact with anyone who has a fever and cough.
- Avoid touching your face.
- Clean commonly touched objects and surfaces regularly.
- If you have a fever, stay at home and do not come to work until you are fever free for at least 24 hours, without the use of fever reducing or other symptom-altering medications.
- If you have a fever, cough, and difficulty breathing, seek medical care early and share previous travel history with your healthcare provider.
- If a member of your household has tested positive for COVID-19, you should notify your agency immediately.
- Check the CDC's Traveler's Health Notices for the latest guidance and recommendations for travel.

We recommend that you designate an individual in your organization responsible for monitoring the websites of the CDC and your state's department of health to stay up-to-date on the information.

New Jersey Department of Public Health https://www.nj.gov/health/

Bureau of Justice Assistance – Preparing for a Pandemic Influenza and Other Public Health Emergencies – See attached form or you can download directly from: https://www.hsdl.org/?view&did=476634

Law Enforcement Pandemic Influenza Planning Checklist – CDC See attached form or you can download directly from:

https://www.cdc.gov/flu/pandemic-resources/pdf/lawenforcement.pdf



Preparing the Justice System for a Pandemic Influenza and Other Public Health Emergencies

An Initiative of the Bureau of Justice Assistance

The Bureau of Justice Assistance (BJA) recognizes that public health emergencies, whether an epidemic or pandemic influenza, biological terrorist attack, or natural disaster with public health implications can threaten America's justice system and place the rule of law at risk. BJA has undertaken a broad-scope initiative to identify the critical planning and response objectives for local justice systems and to identify lessons learned and promising approaches in preparing the justice system for such emergencies. The goal of BJA's initiative is to ensure that the rule of law is upheld during any public health crisis, whether natural or manmade.

This initiative's design parallels the major components of the justice system: law enforcement, courts, corrections, and communities. BJA's pandemic initiative is coordinated through a consortium that includes representatives from each project and component of the system and meets regularly to discuss findings and issues.

Completed Projects:

- In May 2006 in Chicago, Illinois, BJA held a national symposium "Justice and Public Health Systems Planning: Confronting a Pandemic Outbreak." Approximately 230 representatives of federal, state, and local courts, corrections, law enforcement, public health, and other agencies relevant to pandemic emergency planning participated, representing 45 states and the District of Columbia, from a mix of large, medium, and smaller municipalities. The symposium was designed to provide attendees with an overview of the nature of pandemic outbreaks and their potential impact for state and local public health and justice systems, and an opportunity to engage in multidisciplinary discussions regarding essential planning and preparation tasks.
- Following the symposium, a CD including a summary of the symposium proceedings and
 presentations of the 13 plenary session speakers which focused on promising protocols was sent to
 each symposium participant, along with a participant follow-up form. Responses indicated that, since
 attending the symposium, participants have begun a range of pandemic planning activities, both
 interagency and agency-specific.
- Shortly after the symposium, BJA launched a dedicated web portal for pandemic planning: <u>www.ojp.usdoj.gov/BJA/pandemic/pandemic main.html</u>. The web site hosts the presentations of symposium presenters, including several online video presentations, and a range of documents and resources related to pandemic planning for the courts and other justice components. The web site is continually updated.
- BJA, with support from the Police Executive Research Forum (PERF), recently developed and released *The Role of Law Enforcement in Public Health Emergencies: Special Considerations for an*

All-Hazards Approach, designed to guide law enforcement planning efforts related to public health emergencies.

- Since the development of this initiative, BJA has provided technical assistance to several jurisdictions, relying on a multidisciplinary pool of consultants drawn from the public administration and public health communities identified in the course of preparing for the BJA national symposium. To date, technical assistance has been provided to three state supreme courts, various associations, and law enforcement representatives responsible for planning within their own agencies.
- BJA has provided outreach to many justice components and organizations regarding planning for public health emergencies, raising awareness and identifying ongoing preparations. BJA also has developed a strong working relationship with the Department of Health and Human Services' Public Health Service (PHS) and the Centers for Disease Control and Prevention (CDC).

Ongoing Efforts:

Courts:

Pandemic Influenza—Courts Technical Assistance Project (American University (AU)): BJA has awarded funds to AU to assist local and state courts in undertaking planning and implementation processes critical to ensure that state judicial systems have the ability to maintain the rule of law in a pandemic crisis. This unique initiative will extend through calendar year 2007 and is comprised of three main elements:

- 1. Preparation of a guide on pandemic planning for courts: An intensive effort to create a guide for courts as they develop and implement a pandemic influenza preparedness plan. The guide, entitled *Guidelines for Pandemic Emergency Preparedness Planning: A Road Map for Courts*, was produced by an 8-member, multidisciplinary task force representing expertise in the areas of judicial processes, public health administration, law enforcement, and judicial/public health system coordination. The guide is expected to be released by BJA in Spring 2007.
- 2. Preparation of multi-media briefing materials: AU is developing a multi-media presentation on pandemic emergency preparedness based on the *Guideline* and incorporating materials prepared by various contributors to the BJA-sponsored symposium. This training package will be distributed to judicial education offices in each of the state court systems and to State Administering Agencies (SAA) for use in their respective in-state training activities. One national, or two regional, "train the trainers" programs are also planned.
- Delivery of technical assistance to state and local courts: Using multidisciplinary consultants drawn
 from the public administration and public health communities, this project provides technical
 assistance to courts already undertaking or imminently involved in undertaking pandemic
 preparedness planning.

Outreach to State Court Systems (National Center for State Courts (NCSC)): NCSC is actively involved with BJA's pandemic planning activities. NCSC staff served on the BJA task force to develop the Pandemic Planning Guideline for Courts, and participate in BJA's consortium meetings. NCSC also serves as secretariat for the Conference of Chief Justices/Conference of State Court Administrators and is therefore in a position to promote communication between BJA and the state courts regarding these pandemic planning initiatives.

Continuity of Operations Planning for Court Systems (American University and National Center for State Courts): NCSC is developing a COOP (Continuity of Operations Plan) guideline for courts to complement the court pandemic preparedness initiatives underway. Since May 2006, BJA, through American University, has provided technical assistance for COOP planning to various state court systems, assisted local district or state's attorneys in developing a template for COOP planning, and addressed various judicial associations on this topic. This project will continue to provide assistance to state and local courts in continuity of operations planning.

Law Enforcement:

Pandemic Planning for Law Enforcement and Public Safety Agencies (Police Executive Research Forum (PERF)): With BJA support, PERF is currently examining law enforcement's preparation and planning processes for public health emergencies, with an emphasis on pandemic influenza. The BJA/PERF project focuses on three primary areas:

- 1. Occupational medicine programs in law enforcement agencies (including police and fire clinics, general wellness programs, and medical, psychological, and physical fitness screening).
- 2. Risk communications between law enforcement officials and the public (including planning for communications management during a public health emergency, and the development of message templates).
- 3. Law enforcement continuity of operations plans (COOPs provide for departmental survival in the case of a public health emergency, with particular focus on human resources/staffing issues).

Use of Volunteers in Responding to Public Health Emergencies (International Association of Chiefs of Police (IACP) Volunteers in Police Service (VIPS) Program): With BJA support, IACP is developing materials for volunteers as they provide vital support to sworn officers and civilian personnel during a public health emergency or other disaster. The project is creating several products to further volunteer participation including:

- 1. A training module on developing volunteer programs and opportunities to address disasters, including public health emergencies.
- 2. A VIPS and disaster response training curriculum.
- 3. An educational video highlighting the role volunteers have in preparing for and responding to disasters.

IACP also will provide technical assistance to law enforcement agencies interested in starting or expanding a volunteer program targeting disaster preparedness.

Preparing Law Enforcement Families for a Public Health Crisis (Fraternal Order of Police): The Fraternal Order of Police is developing guidelines for use by local, state, and federal law enforcement agencies to design and implement a law enforcement family readiness plan during a pandemic outbreak. These guidelines will help address a critical issue; in the event a pandemic outbreak calls for an extended deployment or the evacuation of a widespread area, law enforcement officers need to be assured that their families will be taken care of, freeing them to answer the call of duty.

Agency Collaboration and Achieving Citizen Compliance: BJA is supporting the development of two publications related to successful planning and implementation of pandemic plans: (1) Public Safety-

Public Health Collaborations: Building on Existing Frames of Reference, and (2) Achieving Citizen Compliance: Education and Risk Communication.

Corrections:

Pandemic Impact on the Corrections System (Association of State Correctional Administrators (ASCA)): ASCA and the American Probation and Parole Association (APPA) are working to develop strategies to address a pandemic influenza. ASCA is engaging subject matter experts who will identify fundamental response needs for the corrections field and contribute to the development of effective response strategies. BJA-supported ASCA deliverables include:

- 1. Design of a model strategic plan for institutions to respond to pandemic influenza.
- 2. Creation and expansion of networks between institutional and community corrections agencies for offenders reentering the community.
- 3. Development of training and education materials for corrections officials.
- 4. Draft operational procedures for institutions, large jails, and community corrections.

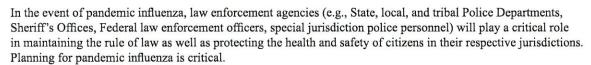
Preparing Community Corrections for Pandemic (American Probation and Parole Association (APPA)): APPA is working closely with ASCA to provide guidance to community corrections agencies for formulating strategic plans and protocols for responding to pandemic flu and other crises. APPA will convene a working group to develop a training curriculum, practical guidelines, and/or policy brief detailing promising practices.

Community:

Engaging Neighborhood Watch (National Sheriffs' Association (NSA)): NSA is developing educational and informational materials to assist its Neighborhood Watch groups plan and prepare for a possible pandemic outbreak. These materials will include: checklists for volunteer organizations and individuals; communication and preparation plans for Neighborhood Watches and their community volunteers; and law enforcement-led, community-based PowerPoint presentations and accompanying facilitator guides and participant manuals.

Educating Communities on Pandemic and Citizen Response (National Crime Prevention Council (NCPC)): NCPC is working with BJA to produce and distribute media outreach tools to support proactive law enforcement communication with the public concerning a pandemic influenza. The primary goal of the project is to provide law enforcement with practical tools to help build public awareness of the need to prepare for a pandemic flu outbreak; encourage the public to abide by the law in the event of an outbreak; and remind the public of its important role in supporting local plans for responding to public health concerns.

LAW ENFORCEMENT PANDEMIC INFLUENZA PLANNING CHECKLIST





To assist you in your efforts, the Department of Health and Human Services (HHS) has developed the following checklist for law enforcement agencies. This checklist provides a general framework for developing a pandemic influenza plan. Each agency or organization will need to adapt this checklist according to its unique needs and circumstances. The key planning activities in this checklist are meant to complement and enhance your existing all-hazards emergency and operational continuity plans. Many of the activities identified in this checklist will also help you to prepare for other kinds of public health emergencies.

Information specific to public safety organizations and pandemic flu preparedness and response can be found at http://www.ojp.usdoj.gov/BJA/pandemic/resources.html. For further information on general emergency planning and continuity of operations, see www.pandemicflu.gov. Further information on pandemic influenza can be found at www.pandemicflu.gov.

Develop a pandemic influenza preparedness and response plan for your agency or organization.

	Y . D	N . C	
Completed	In Progress	Not Started	
			Assign primary responsibility for coordinating law enforcement pandemic influenza preparedness planning to a single person (identify back-ups for that person as well) with appropriate training and authority (insert name, title, and contact information here).
			Form a multidisciplinary law enforcement/security planning committee to address pandemic influenza preparedness specifically. The planning team should include at a minimum: human resources, health and wellness, computer support personnel, legal system representatives, partner organizations, and local public health resources. Alternatively, pandemic influenza preparedness can be addressed by an existing committee with appropriate skills and knowledge and relevant mission (list committee members and contact information here). This Committee needs to have the plan approved by the Agency Head.
			Review Federal, State, and local public health and emergency management agencies' pandemic plans in areas where you operate or have jurisdictional responsibilities. Ensure that your plan is NIMS (National Incident Management System) compliant and align your plan with the local Incident Command System (ICS) and local pandemic influenza plans to achieve a unified approach to incident management. See "State and Local Governments," www.pandemicflu.gov/plan/states/index.html and http://www.fema.gov/emergency/nims/index.shtm .
			Verify Command and Control areas of responsibility and authority during a pandemic. Identify alternative individuals in case primary official becomes incapacitated.
			Set up chain of command and procedures to signal activation of the agency's response plan, altering operations (e.g., shutting down non-critical operations or operations in affected areas or concentrating resources on critical activities), as well as returning to normal operations.
			Determine the potential impact of a pandemic on the agency or organization by using multiple possible scenarios of varying severity relative to illness, absenteeism, supplies, availability of resources, access to legal system representatives, etc. Incorporate pandemic influenza into agency emergency management planning and exercise.
			Identify current activities (by location and function) that will be critical to maintain during a pandemic. These essential functions might include 911 systems in communities where law enforcement is responsible for this activity, other communications infrastructures, community policing, information systems, vehicle maintenance, etc. Identify critical resources and inputs (e.g., employees, supplies, subcontractor services/products, and logistics) that are necessary to support these crucial activities.



Develop a pandemic influenza preparedness and response plan for your agency or organization (continued) Completed In Progress Not Started Develop, review, and approve an official law enforcement/security pandemic influenza preparedness and response plan. This plan represents the output of many or all of the activities contained in this checklist. This plan can be an extension of your current emergency or business continuity plans with a special focus on pandemic influenza and should identify the organizational structure to be used to implement the plan. Include procedures to implement the plan in stages based upon appropriate triggering events. Develop a pandemic-specific emergency communications plan as part of the pandemic influenza preparedness and response plan, and revise it periodically. The communications plan should identify a communication point of contact, key contacts and back-ups, and chain of communications and clearance. Plan may also include potential collaboration with media representatives on the development of scripts based on likely scenarios guided by the public information officer(s). Coordinate with partners in emergency government and public health in advance. Designate an individual to monitor pandemic status and collect, organize, and integrate related information to update operations as necessary. Develop a plan for back-up if that person becomes ill during a pandemic. Develop a situational awareness capability that leadership can use to monitor the pandemic situation, support agency decisions, and facilitate monitoring of impact. Distribute pandemic plan throughout the agency or organization and develop means to document employees/staff received and read the plan. Allocate resources through the budgeting process as needed to support critical components of preparedness and response identified in your plan. Periodically test both the preparedness and response plan and the communications plan through drills and exercises; incorporate lessons learned into the plans. Plan for the impact of a pandemic on your employees Not Started Completed In Progress Develop contingency plans for 30 – 40% employee absences. Keep in mind that absences may occur due to personal illness, family member illness, community mitigation measures, quarantines, school, childcare, or business closures, public transportation disruptions, or fear of exposure to ill individuals, as well as first responder, National Guard, or military reserve obligations. As necessary, plan for cross-training employees, use of auxiliary personnel and recent retirees, recruiting temporary personnel during a crisis, or establishing flexible worksite options (e.g., telecommuting) and flexible work hours (e.g. staggered shifts) when appropriate. Develop a reporting mechanism for employees to immediately report their own possible influenza illness during a pandemic (24/7). Establish compensation and leave policies that strongly encourage ill workers to stay home until they are no longer contagious. During a pandemic, employees with influenza-like symptoms (such as fever accompanied by sore throat, muscle aches and cough) should not enter the worksite to keep from infecting other workers. Employees who have been exposed to someone with influenza, particularly ill members of their household, may also be asked to stay home and monitor their symptoms. Employees who develop influenza-like symptoms while at the worksite should leave as soon as possible. Consult with State and local public health authorities regarding appropriate treatment for ill employees. Prepare policies that will address needed actions when an ill employee refuses to stay away from work. Federal agencies can consult guidance provided by the Office of Personnel Management (OPM) at www.opm.gov/pandemic. Identify employees who may need to stay home if schools dismiss students and childcare programs close for a prolonged period of time (up to 12 weeks) during a severe pandemic. Advise employees not to bring their children to the workplace if childcare cannot be arranged. Plan for alternative staffing or staffing schedules on the basis of your identification of employees who may need to stay home. Identify critical job functions and plan now for cross-training employees to cover those functions in case of prolonged absenteeism during a pandemic. Develop succession plans for each critical agency position to ensure the continued effective performance of your organization by identifying and training replacements for key people when necessary. These replacements should be integrated into employee development activities, and should include critical contracted services as well. Develop policies that focus on preventing the spread of respiratory infections in the workplace. This policy might include social distancing practices, the promotion of respiratory hygiene/cough etiquette, the creation of screening mechanisms for use during a pandemic to examine employees for fever or influenza symptoms, using the full range of available leave policies to facilitate staying home when ill or when a household member is ill, and appropriate attention to environmental hygiene and cleaning. (For more information see the www.pandemicflu.gov and http://www.pandemicflu.gov/plan/community/mitigation.html as well as OPM's guidance at www.opm.gov/pandemic.)

Plan for the impact of a pandemic on your employees (continued) In Progress Not Started Completed Provide educational programs and materials (language, culture, and reading-level appropriate) to pandemic fundamentals (e.g., signs and symptoms of influenza, modes of transmission, medical care), personal and family protection and response strategies (e.g., hand hygiene, coughing/sneezing etiquette, etc.). Post instructional signs that illustrate correct infection control procedures in all appropriate locations, including offices, restrooms, waiting rooms, processing rooms, detention facilities, vehicles, etc. and, community mitigation interventions (e.g., social distancing, etc.). See www.pandemicflu.gov, www.cdc.gov/flu/protect/stopgerms.htm, http://www.cdc.gov/flu/protect/covercough.htm, www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm, and http://www.pandemicflu.gov/plan/community/mitigation.html. Provide training for law enforcement officers, office managers, medical or nursing personnel, and others as needed for performance of assigned emergency response roles. Identify a training coordinator and maintain training records. Ensure all staff are familiar with the local Incident Command System (ICS) and understand the roles and persons assigned within that structure. See http://www.fema.gov/emergency/nims/index.shtm for more information Stock recommended personal protective equipment (PPE) and environmental infection control supplies and make plans to distribute to employees, contractors, and others (including detainees) as needed. These supplies should include tissues, waste receptacles, single-use disinfection wipes, and alcoholbased hand cleaner (containing at least 60% alcohol). EPA registered disinfectants labeled for human influenza A virus may be used for cleaning offices, waiting rooms, bathrooms, examination rooms, and detention facilities. PPE may include gloves, surgical masks and respirators (disposable N95s or higher respirators or reusable respirators), eye protection, pocket masks (for respiratory resuscitation) and protective cover wear (e.g., impervious aprons). The specific uses for the above supplies will be advised by State and local health officials during a pandemic. Further information can be found at www.pandemicflu.gov, and at http://www.osha.gov/Publications/OSHA3327pandemic.pdf. Provide information to employees to help them and their families prepare and plan for a pandemic. See www.pandemicflu.gov/plan/individual/index.html. Work with State and/or local public health to develop a plan for distribution of pandemic influenza vaccine and antiviral medications to law enforcement personnel. See current HHS recommendations for pandemic influenza vaccine and antiviral use at http://www.hhs.gov/pandemicflu/plan/sup6.html and http://www.hhs.gov/pandemicflu/plan/sup7.html. Encourage and track seasonal influenza vaccination for employees every year. See www.cdc.gov/flu/protect/preventing.htm. Encourage all employees and their families to be up-to-date on all adult and child vaccinations recommended by the Advisory Committee on Immunization Practices. See www.cdc.gov/nip/recs/adult-schedule.htm and www.cdc.gov/nip/recs/child-schedule.htm. Evaluate employee access to and availability of health care, mental health, social services, community, and faith-based resources during a pandemic, and improve services as needed. See www.hhs.gov/pandemicflu/plan/sup11.html. Plan for providing services to the public during a pandemic Completed In Progress Not Started Identify community-based scenarios and needs likely to occur in a pandemic emergency, and plan how to respond. These might include security of health care and/or vaccine distribution sites, sites that store antiviral medications or vaccines, first-responder activities, protection of critical infrastructure, management of panic and/or public fear, crowd/riot control, enforcement of public health orders, etc. Develop traffic flow plans to deal with standard traffic management and traffic flow around health-care delivery sites, including vaccine and antiviral distribution sites Anticipate community vulnerabilities (vulnerable populations, crimes of opportunity, fraudulent schemes, etc.) and specifically train employees to respond. Develop guidance for managing/assisting special populations (e.g., persons who are homeless, substance abusers, elderly, and individuals with disabilities, etc.) during a pandemic. This will

delivery sites, including vaccine and antiviral distribution sites Anticipate community vulnerabilities (vulnerable populations, crimes of opportunity, fraudulent schemes, etc.) and specifically train employees to respond. Develop guidance for managing/assisting special populations (e.g., persons who are homeless, substance abusers, elderly, and individuals with disabilities, etc.) during a pandemic. This will require coordination with public health agencies, social services, correctional facilities, legal system representatives, and community-based organizations serving these populations. Work with local and/or State health departments or other relevant resources to ensure health protection and care for detainees or other individuals for whom the agency has responsibility. Establish policies on post-arrest management of an ill or exposed individual, including what to do should a care facility, precinct, and/or other law enforcement facility refuse entry to an ill or exposed individual.

Plan for coordination with external organizations and help your community

			ernal organizations and help your community
Completed	In Progress	Not Started	
			Review your pandemic influenza preparedness and response plan with key stakeholders inside and outside the agency, including employee representatives, and determine opportunities for collaboration, modification of the plan, and the development of complementary responsibilities.
			Share preparedness and response plans with other law enforcement agencies and law enforcement support agencies in your region or State (to include the National Guard) in order to share resources, identify collaboration strategies, and improve community response efforts. Develop, review, and modify local and State mutual aid agreements, if necessary. Mutual aid during an influenza pandemic can not be counted on as multiple jurisdictions in a given region may be affected simultaneously and have limited aid to offer. Availability of one State's National Guard to support another States plans under an existing compact (e.g., Emergency Management Assistance Compact) may be limited due to competing demands in their home State.
			Coordinate all requests for assistance with the next higher level governmental entity (e.g., local officials coordinate with State officials, State officials coordinate with Federal officials). Coordination is essential to ensure the assets: (1) can be provided in accordance with existing laws, (2) the requested resources are available. During a pandemic influenza, assistance from the next higher level of government may be limited due to competing higher priority demands and the effects of the influenza pandemic on these assets.
			Integrate planning with emergency service and criminal justice organizations such as courts, corrections, probation and parole, social services, multi-jurisdictional entities, public works, and other emergency management providers (fire, EMS, mutual aid, etc.).
			States should plan on utilizing their National Guard to perform law enforcement and security functions during a pandemic influenza. The National Guard under the command and control of the respective State's Governor is not subject to Posse Comitatus Act restrictions as are Federal military forces. Availability of one State's National Guard to support another States plans under an existing compact (e.g., Emergency Management Assistance Compact) may be limited due to competing demands in their home State.
			Security functions are essential during a pandemic influenza. Through your city or county attorney, corporation counsel or other appropriate authority, collaborate with the Office of the State Attorney General to clarify and review the authorities granted to law enforcement to include the National Guard. Suggest clarifications and work arounds as needed, and integrate into agency policy, training, and communications activities.
			Identify local or regional entities, such as health-care agencies, community organizations, businesses, or critical infrastructure sites, to determine potential collaboration opportunities. This collaboration might involve situational awareness, exercises or drills, or public safety training.
			Collaborate with local and/or State public health agencies to assist with the possible investigation of contacts within a suspected outbreak, the enforcement of public health orders, as well as the provision of security, protection, and possibly, critical supplies to quarantined persons. Each law enforcement agency will need to interact with local, State, county, and tribal public health officials to define the extent of the authorities provided from State legislation, develop procedures for the local initiation, implementation, and use of those authorities, as well as define protections from liability for law enforcement that may arise from quarantine and isolation enforcement. Operational planning must be flexible enough to address all scenarios in an all hazards environment, and in light of emerging infectious diseases.

CS113326