

# DEPUTY/PERSONNEL EXPOSURE PLAN

## Suggested procedures for possible or confirmed COVID-19 exposure

*Adapted from the Dallas (TX) Police Department with input from Rachel Sandler Silva, MD, MPH*

### ON-SCENE EXPOSURE

Deputies on-scene exposed - or possibly exposed - to COVID-19 are to remain on scene, if safe to do so. They should immediately notify their supervisor, who will contact your agency's communications department.

The communications department should then send out a command notification and notify all the appropriate personnel.

The deputies should then be contacted by your agency's medical officer on-call and the duty commander.

### FACILITY EXPOSURE

Deputies and personnel who are exposed - or possibly exposed - to COVID-19 while at your agency's law enforcement facility should remain there and be isolated to a single area. The deputies should immediately notify their supervisor, who should follow the communication procedure noted above. The agency/law enforcement center should remain open and operable.

*\* If it is determined that an agency's facility requires disinfection, current contracts with third-party vendors should be utilized.*

### AT-HOME EXPOSURE

Deputies and personnel who are home and become aware that they were exposed - or possibly exposed - to COVID-19 while on duty should remain at home and immediately notify the communications department via telephone.

The communications department will notify the appropriate personnel, and the medical officer on-call will contact the exposed individual.

Further actions should be coordinated with your local public health department.

### VEHICLE DECONTAMINATION

Ensure that your agency has vehicle decontamination procedures in place. The appropriate supervisor should ensure that the procedures are carried out properly and consistently.

- Gloves are to be worn while using disinfecting agents during routine cleaning procedures. During advanced cleaning procedures involving potentially infectious organisms, a gown, mask, and eye protection should be worn in addition to gloves.
- Utilize only agency-approved germicidal cleaners.\*
  - Bleach is NOT recommended
  - Hydrogen peroxide should only be used to identify if a substance is blood.
- Disinfect all interior surfaces and equipment. Follow equipment cleaning instructions:
  - **STEP 1:** Use personal protective equipment (PPE)
  - **STEP 2:** Spray germicidal disinfectant on area
  - **STEP 3:** Let cleaner penetrate for:
    - Bloodborne pathogens: 11 minutes
    - Non-bloodborne pathogens: 5 minutes
  - **STEP 4:** Wipe sprayed area with damp paper towel, cloth, or wipe.

An aerosol disinfectant, such as Lysol, may be used as a final spray-down of the entire area, but **it should not be used in place of the germicidal detergent.**

- Electronic equipment should be cleaned by spraying disinfectant onto a paper towel and wiping it down.

*\*For a list of EPA-approved disinfectants to be used against the SARS-CoV-2, visit [bit.ly/EPA\\_Disinfectants](https://bit.ly/EPA_Disinfectants).*

## GENERAL GUIDELINES:

For **LOW** and **NO RISK** exposures, no testing is indicated, and the officer will be released to full duty and placed back in service immediately. Officers will be encouraged to monitor temperatures and symptoms for two weeks at home.

For **MEDIUM** and **HIGH RISK** exposures, officers will be directed what actions to take and where they should report.

## COVID-19 EXPOSURE RISK DEFINITIONS

### HIGH RISK:



- Direct exchange of secretions to mucus membranes from laboratory-confirmed COVID-19 infection (e.g. cough into face without PPE)
- Living in the same household as, being the intimate partner of, or providing care in a nonhealthcare setting for a person with symptomatic laboratory-confirmed COVID-19 infection without using recommended precautions

### MEDIUM RISK:



- 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.

### LOW RISK:



- 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).

### NO IDENTIFIABLE RISK:



- 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.

### CLOSE CONTACT:



- Prolonged contact within 6-feet and for more than 5 minutes with a person with symptomatic laboratory-confirmed COVID-19 infection.

- Prolonged contact within 6-feet and for more than 5 minutes with a symptomatic patient (presenting with fever and respiratory complaints) who had a known or suspected contact with a person with symptomatic laboratory-confirmed COVID-19 infection.



5 min.

- Prolonged contact within 6-feet and for more than 5 minutes with a symptomatic person (presenting with fever and respiratory complaints) who has travelled to an affected region within the last 14 days.