LAW ENFORCEMENT PANDEMIC INFLUENZA PLANNING CHECKLIST

In the event of pandemic influenza, law enforcement agencies (e.g., State, local, and tribal Police Departments, Sheriff's Offices, Federal law enforcement officers, special jurisdiction police personnel) will play a critical role in maintaining the rule of law as well as protecting the health and safety of citizens in their respective jurisdictions. Planning for pandemic influenza is critical.



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.

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 loca 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	he impact	of a pande	emic on your employees
Completed	In Progress	Not Started	
			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) Completed In Progress **Not Started** Provide educational programs and materials (language, culture, and reading-level appropriate) to personnel on: 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 require coordination with public health agencies, social services, correctional facilities, legal system

individual

representatives, and community-based organizations serving these populations.

and care for detainees or other individuals for whom the agency has responsibility.

Work with local and/or State health departments or other relevant resources to ensure health protection

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

Plan for coordination with external 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 demand 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.

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