



**OFFICE OF THE DIRECTOR OF POLICE
THE UNIVERSITY OF TEXAS SYSTEM
TRAINING BULLETIN 009**



**Overview of the Law Enforcement Role in Isolation
and Quarantine Related Issues
NOVEMBER 26, 2014
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I. PURPOSE

The purpose of this training bulletin is to provide University of Texas System Police (UTSP) personnel an overview of the law enforcement role in isolation and quarantine related issues.

This training bulletin shall be read in conjunction with ODOP/UTSP Policy 846, "UTSP Encounters with Communicable Diseases;" Training Bulletin 006 "Ebola Virus Disease Officer Guidelines" October 13, 2014; Training Bulletin 007 "Control And Reports Of Communicable Diseases" dated October 17, 2014 and Training Bulletin 008 "Review And Summary Of Pertinent Case Law On Isolation And Quarantine" dated October 22, 2014.

II. INTRODUCTION

Public health emergencies pose special challenges for law enforcement agencies. In a public health emergency, law enforcement will need to quickly coordinate its response with public health and medical officials, many of whom have not worked together previously. The role of law enforcement may include enforcing public health orders such as quarantines or isolation orders, securing the perimeter of contaminated areas, securing health care facilities, protecting/securing the transportation or movement of hazardous medical waste, crowd management and protecting stockpiles of vaccines or other medicines used in a public health emergency.

Civil disturbances and breakdowns in public order may occur during a public health emergency. The first priority of law enforcement during such a time is to provide essential public safety services and maintain public order. Institution police departments must coordinate responses with all stakeholders from other state and local law enforcement agencies, public and campus health authorities, institution leadership and the Office of the Director of Police. Institution police departments should be fully prepared to support campus and public health efforts and to address the additional challenges faced during a public health emergency. Planning should address the continuum of public health emergencies or contingencies.

III. PREPARING THE DEPARTMENT

Unique challenges facing institution police departments during a public health emergency include logistical, training and operational issues. Public health emergencies are likely to divert resources away from traditional law enforcement commitments and obligations.

Legal Authority

Texas law enforcement authority and responsibilities during a public health emergency are outlined in Chapter 81 and Chapter 122 of the Texas Health and Safety Code. Training Bulletin #007 "*Control And Reports Of Communicable Diseases*" dated October 17, 2014 outlines issues concerning isolation, quarantine, criminal offenses and peace officer duties related to those chapters.

Of the many points outlined in Training Bulletin #007, four are included here for additional consideration: First, Sec. 81.082 gives local and/or state health authorities supervisory authority and control over the administration of communicable disease control measures in that health authority's jurisdiction. Additionally, a declaration of a public health disaster may continue for not more than 30 days and may be renewed one time by the Texas Commissioner of Health for an additional 30 days.

Secondly, Sec. 81.083 addresses the application of control measures ordered upon an individual if there is reasonable cause to believe that an individual (or group) is ill with, has been exposed to or is the carrier of a disease. This section articulates the specifications that must accompany such an order such as the duration and requires the order to be in writing and personally delivered or by certified mail. Additionally, a criminal penalty applies to the individual who is a member of the group and knowingly refuses to perform or allow the performance of control measures. This also states that a peace officer may use reasonable force to secure members of a group subject to an order and prevent the members from leaving the group or other individuals from joining the group.

Thirdly, Sec. 81.085 addresses a variety of quarantine issues. As an example, if an outbreak of a communicable disease occurs in this state, the Texas Health Commissioner or one or more local health authorities may impose an area quarantine corresponding to the area affected. The commissioner may impose an area quarantine if the commissioner has reasonable cause to believe that individuals in the area may be infected or property in the area may be contaminated with an infectious disease. The health department may impose additional disease control measures in a quarantine area that the health department considers necessary and most appropriate to arrest, control, and eradicate the threat to the public health.

Fourthly, criminal sanctions can be associated with violations of Sec. 81.085. As an example, when a person knowingly fails or refuses to obey a rule, order, or instruction of the Texas Department of Health or a local health authority that was issued under a department rule and published during an area quarantine, a criminal offense may have occurred. To enforce this section, a peace officer may use reasonable force to secure a quarantine area and prevent an individual from entering or leaving the quarantine area.

For more detailed information on the legal authority issues involved, please see Training Bulletin 007 "*Control And Reports Of Communicable Diseases*" dated October 17, 2014.

Department Response Planning

Institution police departments will need to formulate comprehensive response plans to address a public health emergency. These plans should be centered on an all hazards response. The plans should establish close coordination and communications protocols between the institution police department, campus and local health authorities and state/local law enforcement/public safety agencies. Plans should include the safeguarding and sustaining of critical campus infrastructures during a public health emergency. Discussions, annual training, and exercises among all stakeholders should be conducted prior to a public health emergency to ensure that plans are effectively integrated. These discussions should identify issues such as how the Incident Command System (ICS) will function during a public health emergency event.

Institution Police Chiefs must recognize that their personnel resources may be affected because many of their own employees and their families could be affected by the emergency. Consideration of family plans should be used to provide family members with information about the pandemic and ways to prevent transmission. This may result in abnormal absenteeism and may cause emotional and physiological distress within the organization, potentially reducing the departments already challenged operational capacity. Review current sick leave policies and protocols to determine how employees will be compensated if they become ill due to an exposure while working. Officers may be able to receive full duty compensation. The institution police department's HR representative should already have a plan in place to determine the necessary documentation.

Law enforcement and public health officials will need to work closely together to decide when to move from voluntary to mandatory orders, how quarantine and isolation orders will be enforced, and, if necessary, maintained by legitimate and reasonable use of force. This is necessary to avoid confusion and delay in the initial stages of the quarantine.

IV. PROTECTING LAW ENFORCEMENT OFFICERS

During a public health emergency, Officers will require basic education about the particular infectious disease being confronted. Information such as biology, specific precautionary measures, modes of transmission and safety information to prevent on-the-job exposure must be provided to reduce fear and ensure good hygiene practices are being performed. There are four distinct methods of transmission or exposure: ingestion (to drink/eat), injection (breaking the skin, i.e. needles, bites), absorption (through the skin, i.e. lotion), and inhalation (breath in, i.e. gases, fumes). Generally, communicable diseases can be transmitted through direct exposure to bodily fluids and/or person-to-person contact. Infectious diseases can also be spread from indirect contact and via other mechanisms such as airborne transmission, contaminated objects, insect bites (vector-borne disease), food and drinking water, animal-to-person contact, animal sources or environmental sources. Health questionnaires should be given to Officers at the beginning and end of their shift to identify if the Officer feels ill or has a fever. Questionnaires should also be filled out by anyone who is accessing the area. Hand washing / disinfectant protocols should be established at all entrances to the department to limit the possibilities of transmission.

Immunization

Officers are encouraged, when possible, practical and reasonable, to be immunized against common diseases in the interest of both reducing their personal risk and the risk of further transmission. This includes the vaccination of family members. At the same time, it must be acknowledged that vaccines may not have been developed to address a particular communicable disease contingency or the advice of the Medical Director, UTSP, may be that a particular vaccine is not necessary, warranted or justified.

During a public health crisis, state and local policy makers may be tasked with identifying priority groups that would comprise the first recipients of emerging vaccines that address a particular infectious disease once those experimental vaccines have been developed. Typically, medical professionals could be first priority on the list of recipients (e.g. physicians, nurses and other emergency medical service providers) with law enforcement personnel in a secondary priority position. The vaccine priority given to law enforcement officers may depend on the particular law enforcement role during the public health emergency.

Personal Protective Equipment (PPE)

In the event the use of PPE by Officers is considered by the institution Chief of Police because of exigent or unusual operational circumstances, the following guidance and recommendations regarding PPE are offered. Generally, when considering the use of PPE, the practice of taking universal precautions should be followed. That is, focusing primarily on the practice of avoiding contact with bodily fluids by means of the wearing of nonporous clothing, over garments or articles. These may include, but not be limited to, medical gloves, gowns, masks, and face shields. Caution must be taken with certain protective items, such as

masks, that usually require a fit-test for proper use to ensure that the mask has an adequate seal and will not allow for any contamination nor provide a false sense of security for the individual while wearing the mask. Each institution should consult with their Environmental Health and Safety department, or equivalent, to determine proper protective measures and equipment are utilized.

More robust PPE can include waterproof gowns, Tyvex suits, advanced respiratory protection, and advanced eye protection. It should be noted, however, that the more robust the PPE, the more extensive the training required for successfully donning (putting on) and doffing (taking off) of PPE. It is important to note that there are narrow or specifically defined circumstances in which a limited number of UTSP Officers may be in a position where the issuance of basic or robust PPE should be considered by an institution Chief of Police as an informed or necessary precaution (e.g. providing security for the transport of the hazardous medical waste.) Priority contracts should be established with vendors who can provide PPE in a timely manner. Each vendor should have a continuity plan to provide PPE during an emergency. Avoid purchasing lump sum protective equipment that will expire at the same time and store the material in a central location. Be cautious of storing equipment in areas that may deteriorate the life span of PPE.

Regardless of the level of personal protective equipment utilized by Officers, Officers should always exercise caution in the potential cross contamination of police equipment that might be used while performing official police duties (i.e. handcuffs, radio, duty belt). As a preventative measure, officers should routinely decontaminate their equipment utilizing an appropriate disinfectant (i.e. Cavicide, Lysol). The same provisions should be routinely taken for police vehicles, particularly after the transport of an individual, or temporary holding areas. Procedures for the storage and disposal of hazardous waste should be discussed with EHS personnel.

Major Infectious Diseases

Law enforcement disease surveillance programs are important in addressing the issue of working while sick or avoiding the transmission of a communicable disease during a public health emergency. Effective preparedness requires police chiefs to consider implementing some form of disease surveillance among all members of the department. Disease surveillance within the department can include daily/weekly health questionnaires or monitoring of symptoms on a regular basis during the period of a public health emergency.

The University of Texas System Police Medical Director can provide advice on specific methods of disease surveillance dependent on the public health emergency. Institution police chiefs should also review sick leave policies, policies on working while infected and the medical care of exposed or symptomatic employees and consult with risk management officials as necessary. Workers' compensation coverage for potential or actual occupational exposure/illness should be understood and considered prior to any public health emergency.

V. LAW ENFORCEMENT ROLE AND RESPONSE

Continuity of Operations

Institution police departments should have continuity plans in place to ensure essential services are provided to the campus communities, particularly if/when significant numbers of Police Department employees (both sworn and non-sworn) become ill during a public health emergency. Plans should address the reassignment of personnel to perform critical functions, encouraging personnel to have plans in place to ensure care for their families while they are assigned to critical functions, and determining at what point it would be necessary to seek additional assistance from the Office of the Director of Police and/or state or local law enforcement agencies.

Departments may have to reconsider the types of calls that usually require dispatching officers, identifying which responsibilities and functions receive priority, and how other, lower priority tasks will be handled. Cross training of personnel may be necessary in conjunction with developing a skills database to identify specialty skills such as fluency in languages and the operation of heavy machinery or vehicles.

The Law Enforcement Role in Disease Surveillance

Police officers should maintain close communication with public/campus health officials, EMS, and fire department officials who will likely be more engaged in disease surveillance efforts. Health officials may ask law enforcement personnel to locate an infected person who is either knowingly or unknowingly capable of transmitting a communicable disease. Any situational awareness concerning individuals exhibiting signs and symptoms of a communicable disease should be forwarded to appropriate health officials.

The Law Enforcement Role in Mass Vaccination and Preventive Measures

Institution police departments may be asked to provide site security and crowd management during a mass vaccination effort. Operational plans will need to be reviewed and coordinated with campus and/or public health agencies prior to a mass vaccination effort in order to fully prepare the police department.

The Law Enforcement Role in Social Distancing

Social distancing is the process of voluntarily limiting personal contacts between individuals to reduce the likelihood of transmitting a disease. Social distancing relies heavily on voluntary compliance and can slow the transmission of a disease. Institution police departments should work with campus/public health officials to educate the campus community on the benefits of social distancing.

The Law Enforcement Role in Involuntary Restrictions, Including Quarantine

As already noted, should the Texas Commissioner of Health or one of the local health authorities impose an area of quarantine, institutional police departments may be tasked with the enforcement of the provisions outlined in Chapter 81 of the Health and Safety Code. Law Enforcement may also be called to assist with the monitoring of a location/residence where individuals or groups are in self-isolation/quarantine for the duration designated by the local health authority to prevent an individual from leaving the premises, or an individual from entering.

Facilities for Detention of Quarantine Violators

Secure facilities for detaining violators of quarantine orders must be identified, discussed and established in consultation with public health authorities and in advance of any public health crisis.

Law Enforcement's Role in Mass Casualty Planning

Although highly unlikely, the potential for large numbers of unattended deaths during a public health emergency can exist. Institution police departments should work with the medical examiner or coroner in advance to determine how best to respond to such events.

National Responses

Nationwide measures, including response and quarantine activity in the United States, will typically be the responsibility of a variety of federal agencies, including but not limited to, the Department of Health and Human Services, Centers for Disease Control and Prevention, Federal Emergency Management Agency and Department of Homeland Security.

Deployment of the National Guard may be a consideration in certain circumstances as well. The federal government has the authority to authorize quarantine and isolation orders under certain circumstances. However, the primary authority for quarantine and isolation exists at the state level as an exercise of the state's police power.

Borders

The President of the United States has the authority to bar entry into the United States by visitors who have a communicable disease if the President determines that entry is detrimental to the interests of the United States. Agencies within the Department of Homeland Security (United States Secret Service, Customs and Border Protection, Immigration and Customs Enforcement, Federal Emergency Management Agency, US Coast Guard and Transportation Security Administration) can assist state and local authorities with additional public safety and security requirements not only at ports of entry, but also in other locations.

Other Federal Responses

The US Marshals Service serves as the lead federal law enforcement security component for the Strategic National Stockpile of vaccines and medications. A Memorandum of Agreement between the Department of Health and Human Services and the US Department of Justice details responsibilities that are to be fulfilled by the Marshals Service during the movement and transition of Strategic National Stockpile assets. The Marshals Service also works with Health and Human Services in coordinating with state and local law enforcement officials concerning Strategic National Stockpile distribution during a public health emergency. The Federal Bureau of Investigation is responsible for monitoring the public health emergency situation as it develops for any indications that the origin may be criminal or terrorist in nature.

VI. PROTECTING THE COMMUNITY

It is unlikely that any quarantine operation will succeed if it is not supported by a majority of the residents of the impacted area. It is important that law enforcement, in cooperation with public health authorities, educate the community during a public health emergency and solicit voluntary compliance. Important information that requires communication includes good faith compliance with voluntary and non-voluntary control measures, consequences of quarantine violations and factual information concerning the disease in question. Establishing sound, open and productive relationships with the impacted community or population is critical.

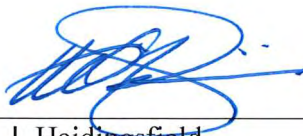
Working With Public and Private Agencies

Effective, meaningful partnerships result in coordinated planning, information sharing, formal memorandums of understanding (MOUs) and mutual aid agreements. Partnerships among law enforcement, local medical facilities and public health agencies should (1) focus on cross-training/orientation of personnel, (2) education of the community on its role during a public health emergency and the principles of communicable disease prevention and (3) development of methods for delivering current and consistent information to the public during a public health emergency. Working collaboratively and sharing information ensures a clear understanding of roles and responsibilities and demonstrates good will and good faith.

VII. ADDITIONAL RESOURCES/REFERENCE MATERIALS

Institutional police departments should refer to the following resources for additional information. This training bulletin used these as references:

- 1) “The Role of Law Enforcement in Public Health Emergencies” by the U.S. Department of Justice, Office of Justice Programs’ Bureau of Justice Assistance and the Police Executive Research Forum. This document was written in September of 2006 to address special considerations for an all-hazards approach in dealing with a public health emergency. Source: <https://www.ncjrs.gov/pdffiles1/bja/214333.pdf>
- 2) “National Strategy for Pandemic Influenza” by the Homeland Security Council of the White House in May 2006. It outlines how the federal government would prepare, detect and respond to a pandemic event. Source: <https://www.cdc.gov/flu/pandemic-resources/national-strategy/>
- 3) “Quarantines: The Law Enforcement Role” by Charles Friend. From The Police Chief, vol. 73, no. 2, February 2006). This article focuses on careful planning, preparation and department-wide training for responding to public health emergencies. Source: <https://www.policechiefmagazine.org/quarantines-the-law-enforcement-role/>
- 4) Federal and State Quarantine and Isolation Authority by Jared Cole on October 9, 2014. From Congressional Research Service 7-5700. Source: <https://fas.org/sgp/crs/homesecc/RL33201.pdf>
- 5) Trends in police research: a cross-sectional analysis of the 2000–2007 literature by David Mazeika, Brad Bartholomew, Michael Distler, Kyle Thomas, Sarah Greenman & Stephanie Pratt (2010) , Police Practice and Research, 11:6, 520-547, DOI: [10.1080/15614263.2010.497390](https://doi.org/10.1080/15614263.2010.497390) Source: https://www.policeforum.org/assets/docs/Free_Online_Documents/Public_Health/police%20planning%20for%20an%20influenza%20pandemic%20-%20case%20studies%20and%20recommendations%20from%20the%20field%202007.pdf



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