

UNPOL COVID-19 Operational Guidelines

Annex 1 – Procedures in preventing exposure

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Annex 3 - COVID-19 Exposure Report Form

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General Information:

1. **Coronavirus disease 2019 (COVID-19)** is a respiratory illness that can spread from person to person even by those without symptoms. The virus is now spreading quickly worldwide with confirmed /suspicious cases have been identified in a growing number of countries, including many mission areas.
2. Generally, coronavirus can cause more severe symptoms in people with weakened immune systems, older people, and those with long-term conditions like cardiac disease, immune deficiency, diabetes, cancer and chronic lung disease.
3. Patients with COVID-19 have had mild to severe respiratory illness.
4. Data suggests that symptoms may appear in as few as 2 days or as long as 14 days after exposure to the virus that causes COVID-19.
5. Symptoms can include fever, cough, difficulty breathing, and shortness of breath.
6. The virus causing COVID-19 is called SARS-CoV-2. It is thought to spread mainly from person-to-person via respiratory droplets among close contacts. Hence, one should avoid having direct contact with body fluids (such as blood, phlegm, and respiratory droplets) from an individual with COVID-19.
7. Respiratory droplets are produced when an infected person coughs or sneezes and can land in the mouths or noses, or possibly be inhaled into the lungs, of people who are nearby. Close contact may include being within approximately **2 metres / 6 feet** from an individual with COVID-19 for a prolonged period of time.
8. It is also possible for someone to become infected by touching a surface or object that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as touching doorknob or shaking hands then touching own face).
9. Check for the most updated version and helpful resources at COVID-19 website at <https://hr.un.org/page/novel-coronavirus-2019-ncov>.

Purpose:

10. The purpose of this document is to outline procedures to be followed by the **United Nations Police (UNPOL)** personnel in their daily operations either during or in anticipation of the COVID-19 pandemic.
11. In order to most effectively serve in their respective Mission and ensure business continuity, the members of the UNPOL component must first ensure appropriate health and safety precautions are exercised internally. The WHO/DPPA-DPO/DOS have-issued and will continue to provide the most up to date health information on how to protect personnel, identify symptoms, and prevent spread of the virus as we maintain our core duties.
12. Host Governments will also progressively start issuing more and more restrictions, and it's important to ensure compliance with Host State issuances (concerning not only restrictions of movements and enforcement, but also sanitary). UNPOL is likely to get more buy-in from local population as well as the host-state if they comply with WHO-compliant host-state decrees/ issuances.
13. As part of the readiness phase of the UN MEDICAL DIRECTORS COVID-19 OUTBREAK: 3-PHASE RESPONSE ACTIVATION SYSTEM, Head of Police Component (HoPC) should have developed/ updated and tested their business continuity plan (BCP) that will allow performance of critical functions with reduced number of personnel, ensure that UNPOLs identified as high-risk populations are trained on the proper use and disposal of masks and other PPE used, and ensure access and availability of necessary PPE for UN personnel
14. The HOPC through to Unit Commanders should continue to extensively brief, debrief, and monitor their personnel to protect themselves (and family members or cohabitants), as well as take extra steps to ensure their facilities are repeatedly cleaned and sanitized.

Preventing exposure

15. Most exposures to communicable disease will not occur if proper prevention takes place.
16. UNPOL officers may prevent exposure to communicable disease by observing the procedures identified in Annex 1. The list is not exhaustive. It is intended to provide a framework to which UNPOL officers can add preventive measures specific to their working environment.
17. It shall be the responsibility of the HOPC to obtain the requisite levels of PPE from the DMS/CMS.
18. In the absence of PPE, all UNPOL must ensure strict adherence to the minimum standards to protect themselves.
19. All disposable products should as a practice be disposed of responsibly, after use including in line with issuances by the local health authorities/ instructions of the UN Medical Division.

20. Desk Operations: In light of the Coronavirus (COVID-19) and its effects on the health of the host-state society, the four questions listed below are additional screening measures to help identify potential health concerns and should be asked by those personnel answering calls for service anytime UNPOL officers will be responding to a given location.

- a. Have you traveled out of the COUNTRY/TERRITORY with in the last 21 days?
- b. Have you had contact with anyone known to be out of the COUNTRY/TERRITORY within the last 21 days?
- c. Do you have a cough, shortness of breath or fever over **38C / 100F** or higher (flu-like symptoms?)
- d. Have you had contact with anyone with a cough, shortness of breath, or fever of **38C / 100F** or higher (flu-like symptoms in the last 72 hours?)

If they answer "YES" to any of the above questions or they are symptomatic, it should be noted in the narrative of the call for service (i.e. "SYM/Y"= Symptoms Yes or "SYM/N"= Symptoms No) and advise responding UNPOL Officers to don? the appropriate Personal Protective Equipment (N95 mask/protective eyewear/latex gloves, etc.).

21. Capacity-Building and Development Activities

- a. HOPCs are to re-assess/ evaluate/ reprioritize the urgency / need of all currently scheduled police capacity-building and development activities based on risk management principles.
- b. The Mission UNPOL personnel shall continue to engage in police capacity-building and development activities only where a distance of **2 meters / 6 feet** with and between their host-State counterparts can be observed or if the phone/ videoconferencing facilities can be used.
- c. Until further notice, activities that require close physical contact and proximity shall be suspended, including:
 - All public order management trainings;
 - Training activities with more than 5 host-State police counterparts in closed-space environments. Other training activities can only be conducted if protective equipment is made available to UNPOL personnel;
 - Collocation with the host-State personnel.

22. Operational Support

- a. The Mission UNPOL personnel shall continue to provide operational support to the host-State police in accordance with the mandate, concept

of operations and the directive on the use of force. The following guidelines shall apply to these activities:

- b. Patrolling: UNPOL personnel shall continue to patrol and interact with their host-State counterparts and members of the host-State community. Such interactions must occur at a distance of at least **2 metre / 6 feet** for “physical distancing.” Patrolling can only occur if protective equipment is made available to UNPOL personnel. It is the responsibility of the UNPOL Commanders – whether IPO or FPU - to re-evaluate how many IPO/FPU members can fit in a vehicle while respecting these measures.
- c. Demonstrations/Crowd Control: If requested, UNPOL personnel shall continue to assist the host-State police and other law enforcement personnel in the policing of assemblies only if a distance of at least **2 metre / 6 feet** for “physical distancing” can be maintained and protective equipment is made available to UNPOL personnel.
- d. Electoral assistance: If requested, UNPOL personnel shall continue to assist the host-State police and other law enforcement personnel in ensuring the safety and integrity of electoral processes only if a distance of at least **2 metre / 6 feet** for “physical distancing” can be maintained and protective equipment is made available to UNPOL personnel.

23. Detaining Host-State Persons

- a. Until further notice and with the exception of the PoC camps run by the United Nations, UNPOL officers **shall refrain from detaining host-State persons** and placing them in the UN detention facilities.
- b. UNPOL officers with protective equipment shall be prepared to intervene if they witness a human rights violation in accordance with the peace operation’s directive on the use of force and mandate, as well as their specific roles, responsibilities and limits of their competence and capacity. If – as a result of the UNPOL intervention – a detention is warranted, relevant information shall be shared with the host State authorities for their follow-up.
- c. In the PoC camps, UNPOL officers with protective equipment shall continue to exercise their public safety duties and, if necessary, detain persons if warranted and in accordance with the directive on the use of force and mandate.
- d. In such cases, UNPOL personnel detaining host-State persons must ask the transporting officer if all or any of those persons meets any of the above listed criteria (in para. 20 (a-d)) prior to allowing them into a UN detention facility. If the criteria are met, immediately notify MISSION MEDICAL staff who will then respond to medically assess those being detained.

- e. MISSION MEDICAL staff will determine if the new detainee is acceptable to proceed through the intake process or if measures should be taken to transport the person to a UN or non-UN medical facility for further care and/or evaluation.
- f. If MISSION MEDICAL staff determines the detainee should be transported to a UN detention facility, a surgical mask must be placed on the detainee, and notifications made to the UN detention facility of the pending transport.

24. Investigative Interview Procedures:

- a. Investigative interviews should be conducted with due regard for UNPOL officer safety.
- b. Whenever possible, UNPOL officers should attempt to contact individuals by phone and conduct their interviews by phone.
- c. At the police station, the **2 metre / 6 feet** safety separation between members of the public should also be maintained.
- d. If face to face interaction is necessary, UNPOL officers should ascertain if contacts have traveled out of the COUNTRY/TERRITORY or have had contact with a person that has traveled out of the COUNTRY/TERRITORY, and/or if they have any of the following symptoms: fever, cough, sneezing, runny nose or trouble breathing.
- e. When making contact with those individuals who are high risk, UNPOL officers should follow the above protocol provided for field personnel adhering to proper use of Protective Personal Equipment (PPE) and decontamination/cleaning procedure.

Procedures in the event of possible Exposure to a Confirmed or Suspected COVID-19 Case:

25. While on duty, if an UNPOL officer comes in close contact with a person who is sneezing, coughing or showing symptoms of being ill, and there are facts that indicate a strong probability of COVID-19 for example recent travel to an affected area, exposure to a confirmed case, unsubstantiated claims of being infected.
 - a. The UNPOL officer should wash their hands with soap and water for at least 20 seconds and/or by utilizing a hand sanitizing solution with at least 60% alcohol content and decontaminate any areas the ill person may have contaminated.
 - b. The UNPOL officer should document the incident on a COVID-19 Report Form (attached) or equivalent.

- c. The UNPOL officer shall contact a supervisor.
- d. The supervisor shall ensure that the UNPOL officer completes the a COVID-19 Report Form- (attached) or equivalent.
- e. The responding supervisor shall review the details of the potential exposure to determine the correct level of risk, in accordance with guidelines established by WHO/MISSION and notify UNPOL CoS and to the affected UNPOL officer's chain of command.
- f. At the request of the UNPOL officer, a supervisor will direct the UNPOL officer to a UN approved medical facility for medical treatment. The involved UNPOL officer shall follow the advice of the attending physician as to whether or not the involved UNPOL officer shall return to work or self-isolate off duty.
- g. If directed to self-isolate off duty, the UNPOL officer will need a return to duty evaluation before returning to work.

26. Actions to Take After Detection of First Suspect/Confirmed Case Amongst UNPOL /Dependents

- a. **IMPORTANT: AS SOON AS COVID-19 IS SUSPECTED (EVEN PRIOR TO CONFIRMATION) ENSURE ISOLATION OF THE PERSON. CONTACT TRACING SHOULD OCCUR ONCE COVID-19 IS CONFIRMED.**
- b. Maintain close liaison with local health authorities and WHO country office. Be ready to implement their instructions on lab testing, case management and contact tracing.
- c. Report the case in accordance with the reporting requirements here: https://www.un.org/sites/un2.un.org/files/coronavirus_casereporting_requirements_2020-03.pdf
- d. Prepare to communicate internally to UN staff about the case. Contact dosdhmosh-public-health@un.org for advice if required.
- e. Take all risk mitigating measures as necessary to reduce risk of spread from the case, including strict quarantine of all close contacts. See https://hr.un.org/sites/hr.un.org/files/Coronavirus_RMP_2020-03-02_FINAL_0.pdf
- f. For Medevac procedures, in case of all officers, except Formed Police Units, <https://hr.un.org/sites/hr.un.org/files/COVID-MEDEVAC%20UN%20and%20PARTNERS.pdf>, applies.
- g. USG DPO will determine repatriation if needed on the advice of the UN Medical Director.
- h. In all confirmed cases, the respective UNPOLs Permanent Mission shall be advised following the normal reporting mechanisms – from HOPC to Police Division and thence to Permanent Mission.

27. Vehicle Decontamination Procedures

- a. If a UNPOL vehicle requires decontamination, the following procedures apply:
 - The UNPOL Officer's supervisor needs to be informed of a possible bio-hazard contamination of COVID-19.
 - The affected vehicle should be transported to a designated parking place, locked, secured, quarantined, and marked "Contaminated" on the windshield/windscreen.

28. Workspace Decontamination Procedures

- a. Ensure that cleaning and disinfection procedures are followed consistently and correctly. Cleaning environmental surfaces with water and detergent and applying commonly used hospital disinfectants (such as sodium hypochlorite) is effective and sufficient.
- b. Manage laundry, food service utensils and medical waste in accordance with safe routine procedures.
- c. If the workspace/ office needs decontamination, thoroughly clean and disinfect frequently touched surfaces using appropriate detergent/disinfectant solutions or wipes, including workstations, vehicles, and surroundings.

Procedures post-exposure/ infection

29. Behavioral Health

- a. Dealing with the stress of a communicable disease exposure can be overwhelming, particularly if the exposed UNPOL officer is isolated from colleagues and friends as well as their family.
- b. Counseling services - UN staff members who need to speak to a counsellor due to stress or other psychosocial needs are encouraged to reach out to their local counsellor(s).
- c. Outside UN Headquarters, contact the CISMU/DSS Stress Counsellors for the appropriate referral:
 - Anne-Marie Serrano Banquet (tel: +1-212-963-1369; cell: +1-917-209-4615; e-mail: anne-marie.serranobanquet@un.org)
 - Madhubhashini (Kalhari) Hewage (tel +1-212-963-6432; cell: +1-917-209-9047; e-mail: hewagem@un.org)
 - Staff/Stress Counsellors in the field should refer to this Novel Coronavirus (COVID-19) Psychosocial Contingency Plan Preparation Guideline

Annex 1: Preventing Exposure

1. If you are sick but not sure, notify your supervisor, stay at home, and **do not come to work**. Consult with a doctor or certified medical service for diagnosing and advices, and present to your supervisor for further assessment and instruction.
2. On your way to the police installation: wear a disposable surgical mask in case of using mass transport/ sharing vehicle with others. At the entrance, a temperature checkpoint setup by the Mission, should be used by both officers and visitors. Those exceeding **38C (100F)** should not enter.
3. Practice proper hand hygiene. Wash your hands frequently with soap and water for at least 20 seconds ("Happy Birthday" song sang twice). If soap and water are not readily available use an alcohol-based hand sanitizer with at least 60% alcohol.
4. Avoid touching your face, to avoid unintentional transmission.
5. Thoroughly cleaning and disinfecting frequently touched surfaces using appropriate detergent/disinfectant solutions or wipes, including workstations, vehicles, and surroundings.
6. Maintaining good health, getting enough rest, maintain a moderate exercise programme, eating healthfully, avoiding tobacco use, etc.
7. Keeping current on vaccinations.
8. When interacting with any other individual including a member of the public exhibiting upper respiratory symptoms (sneezing, coughing), provide them a P-100 or N-95 mask if one is available, or stand **2 metre / 6 feet** away.
9. All UNPOL officers must be provided with proper Personnel Protective Equipment (PPE). Where such PPE is in limited supply, those on operational duties or require contact with others, shall be prioritized.
10. In the case of interacting with members of the public suspected of having COVID-19, proper PPE is:
 - a. P-100 or N-95 masks
 - b. Eye protection (safety goggles or face shield)
 - c. Nitrile/latex/rubber gloves

Annex 2: Operational Procedures to follow when allowing visitors to police premises

1. All visitors must be considered as potentially affected by COVID 19 therefore all preventive measures must be taken accordingly. Nevertheless, full respect of human rights principles shall always be considered.
2. Visitors should be allowed to visit only specific areas identified within the police premises, preferably one office just dedicated for such purpose. Such area must be disinfected and cleaned frequently, ideally after each visit, at least surfaces touched by visitors should be cleaned and disinfected after each visit.
3. A dedicated and isolated waiting area should be identified in case that more visitors are present at the same time, such area should meet all the general requirements to prevent the contamination of the virus.
4. Any interaction with Police personnel and others should occur only in the designated area;
5. Each visitor before entering the premises should be provided with a surgical mask to wear during the entire presence in the premises and interaction with police officers and other persons
6. Procedures must be identified for the disposal of surgical masks provided to the visitors;
7. All Police personnel must wear PPE during the entire interaction with visitors;
8. It is a command responsibility to ensure that all police personnel and civilians working for police inside the premises receive proper and regular training on these operational procedures.

Annex 3: UNPOL COVID – 19 Exposure Report Form

SUBJECT: COVID-19		
DATE & TIME OCCURRED:	LOCATION OF OCCURRENCE:	DIVISION OF OCCURRENCE:
TO: (Rank, Name, Assignment)		DATE & TIME REPORTED:
DETAILS: (If more space is needed go to next page)		
UNPOL Contact #:	Last Name:	First Name:
UNPOL Age:	ID No:	Assignment:
Reported Symptoms noticed/experienced:		
Fever:	Temperature, if known:	
Headache:		
Dry Cough:		
Body Aches:		
Fatigue:		
Other:		
Notes / Additional Information: (Name, address, phone number, and the date of birth of person suspected of having COVID-19. The date, time and location of contact. The circumstances which caused the UNPOL officer to suspect the person's condition)		
Medical Section Notification:		
Date:		
Time:		
Name:		
Serial:		
<i>When completed and signed by supervisor, a copy of the signed should be emailed to the UNPOL CoS</i>		
DATE & TIME	UNPOL(S) REPORTING	ID NO.
SUPERVISOR APPROVING NO.	ID	

Annex 4: UNPOL COVID – 19 - Potential Criminal Threats

The following are some areas most likely to see an increase in the calls for service owing to the conditions surrounding the response to COVID-19 pandemic:

- o Domestic violence / SGBV
- o Intercommunity violence
- o Police relationship with the communities impacted by the enforcement of COVID-19 measures
- o Prejudice and violence against those suspected of having COVID-19 as well as foreigners / specific minorities / refugees and other newly vulnerable groups
- o Trafficking and smuggling of people
- o Counterfeiting of medicines and medical goods
- o Civil unrest focused at medical treatment centres, food outlets and distribution centres, warehouses containing and suspected to contain in-demand items, and other critical infrastructure.

These areas as well as additional ones may benefit from more detailed specific guidance, Therefore, Heads of Police Components are encouraged to contact the following persons with their specific thematic guidance requests:

- i) their respective **Mission Manager/MMSS**;
- ii) **Andrew Carpenter**, Chief – Strategic Policy and Development Section (carpentera@un.org); and
- iii) **Ata Yenigun**, Chief – Selection and Recruitment Section / Police Representative – DPPA-DPO/DOS Field Support Group (yenigun@un.org);