

These recommendations are advisory and are not to be considered Federal directives or standards. Individual centers should review and apply the guidance based on their own requirements and discretion. All actions should appropriately balance public safety, the health and safety of the workforce, and the continued delivery of essential services and functions.

Maintaining operational and resilient emergency communications is imperative during pandemic response for both public health and safety and community well-being. A critical component of emergency communications are 911 centers—to include emergency communication centers (ECC), public safety answering points (PSAP), public safety communication centers (PSCC), emergency operations centers (EOC), and other public safety command centers. A pandemic presents a real and immediate threat to the ability of these centers to operate effectively. In response, CISA has developed a series of guidance documents for all levels of government to use when addressing a pandemic and its potential impact to emergency communication centers. The following guidance is intended to support public safety partners across all

For the most current guidance on disease control and prevention, visit the <u>Centers</u> for <u>Disease Control and Prevention</u> (CDC). Be sure to look for specific guidance for current circumstances and role. For example, for the coronavirus pandemic (COVID-19), consult <u>Interim Guidance for Emergency Medical Services (EMS) Systems and 911 Public Safety Answering Points (PSAPs) for COVID-19 in the United States.</u>

levels of government when developing their policies and procedures to organize, train, and care for personnel while operating through a pandemic.

# IMPLEMENT EXPANDED STAFFING, PERSONNEL, AND ADMINISTRATIVE CONTROLS

During a pandemic, 911 centers should continuously monitor applicable Federal, State, local, Tribal, and territorial status updates to improve and maintain situational awareness. It is recommended that 911 centers modify their responses (e.g., internal standard operating procedures [SOP], dispatch protocols, response plans) to pandemics as timely as possible and in accordance with guidance from the CDC, other Federal agencies, State, local, Tribal and territorial health departments, public safety partners, and governing bodies.

### Adjust Staffing Approach

### Staffing

- Curtail public access to the facility as much as possible and direct "walk-ups" to call 911 for emergencies or a non-emergency number for other business.
- Limit non-essential personnel (e.g., administrative staff, contractors, vendors) from entering operations floor and encourage telework where possible.
- Review collective bargaining contracts to determine language regarding the ability to waive or relax some of the labor provisions regarding overtime, call-ins, and vacation schedules. Consult <a href="Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)">Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)</a> for additional guidance on implementing flexible sick leave and supportive policies and practices.



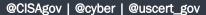
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- Review recent historical computer-aided dispatch (CAD) and telephone station message detail reports to ascertain telephone and field resource workloads and calculate appropriate center staffing by days and hours, as appropriate.
- Divide essential personnel into shifts, managing hours to ensure no two groups of employees overlap; establish alternating days or extra shifts that reduce the total number of employees in the facility at a given time to the most appropriate staffing levels consistent with expected calls for services and required field asset support.
- Continually monitor staffing allocations consistent with actual workloads to optimize overall center staffing and best use of available personnel.
- Review increased potential for exposure of personnel to the pandemic through other activities (e.g., social gatherings, close contact with other first responders, use of public transportation).
- Develop a plan for potential deployment of retirees, supervisors, managers, technologists, personnel on light duty, personnel returning from isolation, and others who have the requisite skills to backfill functions.

### **Caring for Staff**

- Keep communications channels open and transparent; provide timely updates to all personnel via appropriate methods (e.g., in-person check-ins, virtual all hands, daily email updates).
- Train personnel on the proper donning, use, and removal of personal protective equipment (PPE) and face coverings to ensure maximum efficacy and maximum reduction of contamination; advise personnel to use PPE mindfully and follow the CDC's <u>Strategies to Optimize the</u> <u>Supply of PPE and Equipment</u>.
- If practical, invoke physical distancing measures and/or install physical barriers between consoles and call taker positions.
- Consider per diem and travel allowances for personnel, to include food (e.g., contract local restaurants, implement meal reimbursement options) and lodging arrangements (e.g., set up physically-distanced cots in spare rooms, contract local hotels), to the extent circumstances permit.
- Examine child care, elder care, and pet care options for essential personnel, as well as isolation options for essential personnel who desire to isolate from family.
- Ensure that personnel have access to mental and behavioral health assistance; monitor floor stress levels; recognize and reward personnel's accommodation to pandemic measures (e.g., organize virtual meet-ups after shifts, implement video conferencing, relax dress codes).

### Checklist for Each Shift

Below is an <u>example</u> checklist a 911 center shift manager can use to ensure both personnel and the center are prepared for the shift ahead:

- ✓ Scheduled personnel are present and screened for temperature and health questionnaires
- ✓ Attendance is logged and kept with the health screening records
- Personnel are practicing physical distancing and are not seated immediately next to one another, if possible
- All work equipment and technology are functioning properly
- ✓ All work surfaces, equipment, peripherals (including individually assigned) are cleaned and disinfected in accordance with manufacturers' and facility recommendations
- Discarded cleaning materials and other trash from the previous shift are properly disposed
- ✓ PPE and cleaning supplies are stocked and readily available for personnel
- ✓ Updates and news are briefed, and in-person check-ins are conducted (as needed)
- ✓ Backup staff is accounted for and backup site(s), if available, is also ready for potential operation

### Supplemental or Rotating Staffing over the Longer Term

- Using off-duty call center staff in an overtime or recall status may solve near-term needs, but if the call center may be understaffed or even closed for a week or two, it may be difficult for off-duty personnel to meet minimum staffing needs over the medium and longer term.
  - Resources such as the Telecommunicator Emergency Response Taskforce (TERT), which provides the vehicle(s) to deploy trained dispatchers to disaster locations, may have a limited role during a pandemic, as the impact is nationwide.

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- Personnel who have completed homeland security-sponsored training such as Radio Operator (RADO) and Incident Communications Center Manager (INCM) may have some ability to integrate into a jurisdiction's communications center environment, but may need additional training to meet minimum expectations.
- Establishing a cadre of retired communications center staff and a list of former communications center staff who were promoted into roles as police officers, firefighters, and paramedics who may be available to recall and, with minimal refamiliarization training, assume previous roles if no other qualified staff are available for a period of time.
- Over the longer term, other resources can be pulled to provide essential personnel to a call center without requiring full training and certification, such as Volunteers in Police Service (VIPS), Community Emergency Response Team (CERT), Auxiliary Police, Reserve Deputies, and even Law Enforcement or Fire Explorer Scouts, to handle collateral duties.

#### **Telework**

- Continuously reexamine telework policies and allow remote work wherever possible.
- Review existing guidance and information on telework (e.g., National Institute of Standards and Technology [NIST] Special Publication 800-46 <u>Guide to Enterprise Telework, Remote Access, and Bring Your Own Device [BYOD] Security</u>, CISA's National Cyber Awareness Alert on <u>enterprise virtual private network [VPN] security</u>, Office of Personnel Management's <u>resources on COVID-19</u>). Considerations include, but are not limited to, collaborating with human resources, legal, and information technology (IT) sections or departments to assess telework risk.



- Test, review, and update essential records, databases, and systems to be available electronically to employees who are teleworking or located at alternate sites. This may include secure access to network and other databases to allow for functions such as payroll processing, ordering of supplies, and the ability for vendors to remotely provide services, such as needed software upgrades.
- Ensure that facility network connectivity and all workplace mobile devices have installed operational VPN capabilities and other necessary telework cybersecurity measures.
- Make VPN and telework cybersecurity measures available to teleworking personnel for use on personal computing
  equipment to enhance cybersecurity posture of those connecting to critical networks and systems.
- Actively monitor telework connections to sensitive and critical systems to enhance cyber posture.
- For staff who are non-essential and cannot telework, consider temporarily reassigning their duties and assigning them other tasks that support the center's essential operations.

# Keeping the Center Clean and Safe

## **Engineer Physical Measures**

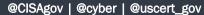
- Limit ingress and egress through as few checkpoints as possible.
- Restrict access to normally public areas of the facility.
- Mount physical barriers or partitions between work stations.
- Increase ventilation and air exchange rates in work spaces.
- Install and maintain high-efficiency particulate air (HEPA) filters.
- Ensure that heating, ventilation, and air conditioning (HVAC) systems (primary and backup) are clean and operating
  optimally, including having appropriate filters changed with recommended frequency.











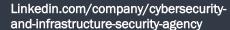


### **Follow Best Practices**

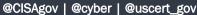
- Develop policies and post signage regarding access.
- Provide medical personnel to conduct health screening (e.g., check temperature, administer questionnaire) at the beginning of each shift and have medical personnel on standby to assess personnel who may exhibit symptoms.
- Log building entries and seating charts for accountability and tracing purposes; limit access to non-essential rooms.
- Allocate at least one facemask per person per shift and require staff to wear facemasks where and when appropriate so as not to interfere with work requirements (e.g., use of headset, maintain clear speech [speech may be distorted through facemask]). The CDC has issued Recommendation Regarding the Use of Cloth Face Coverings and Strategies for Optimizing the Supply of Facemasks for the COVID-19 pandemic.
- Provide information and training on individual health protocols (e.g., CDC's Hand Hygiene Recommendations).
- Practice physical distancing of several feet in work spaces and common areas during breaks and meals. This distancing is advised based on the transmission attributes of the virus. For example, for COVID-19, six feet is recommended. Consider extending physical distance between workstations through cable extensions or seating at every other workstation. If physical distancing at workstations is not possible, consider physical barriers (e.g., plexiglass) to limit exposure.
- Restrict staff from moving to different workstations during a shift unless necessary (e.g., faulty equipment).
- Assign individual equipment (e.g. keyboards, mice, headsets) and prohibit sharing of equipment; ensure proper sanitation of all personally-assigned equipment and consider having personnel take their equipment home with them (consider physical and cybersecurity aspects of this policy, including having backup equipment available if forgotten or damaged).
- If workstations or equipment must be used by multiple individuals (i.e. different people use it over several shifts), clean areas and equipment thoroughly between uses.
- Limit eating and drinking at desks or console positions and enforce touchless delivery policies on food delivery to minimize additional contact. Collective meal preparation area and communal refrigerator use is discouraged.
- Ensure that cleaning professionals are vetted and are aware of, and explicitly follow, facility-specific cleaning and disinfecting guidance.

### ADDITIONAL CONSIDERATIONS

- Centers may consider the purchase of additional cleaning resources (e.g., washer/dryer in case the center must resort to reusable towels or for clothes if staff must shelter in place, use of professional sanitizing company, uniform services to collect, clean, and return uniform apparel).
- Centers may consider developing plans for sustainability of long-term operations in addition to ad hoc based protocols as pandemics could occur in intervals of long durations.
- Centers should work with State, local, Tribal, and territorial government health departments to ensure appropriate protocols and guidelines regarding pandemic response are followed.
- Centers should be prepared to follow the CDC's Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes.









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## OTHER PANDEMIC RESOURCES

Recognizing the critical importance of the health and performance of 911 centers during a pandemic, CISA has developed a suite of documents providing specific guidance in addition to maintaining a clean and safe workspace:

- <u>Guidelines for Executives: 911 Center Pandemic Recommendations</u>—Emphasizes the importance of communications centers, highlights the unique risk of a pandemic to resiliency of 911 operations, communicates the need for executive level action, and provides a brief description of available guidance for 911 administrators.
- <u>Guidelines for 911 Centers: Pandemic Planning</u>—Serves to highlight governance, resource planning, and contingency considerations from a holistic perspective during a pandemic.
- Guidelines for 911 Centers: Cleaning and Disinfecting During a Pandemic—Provides unique cleaning and disinfecting guidance and resources for 911 centers during a pandemic.





