Organizational Survival

Can a Police Department Survive a Pandemic Crisis?

By

Kirk M. Palmer

Glendale Police Department

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This Command College Independent Study Project is a FUTURES study of a particular emerging issue in law enforcement. Its purpose is NOT to predict the future, but rather to project a number of possible scenarios for strategic planning consideration.

Defining the future differs from analyzing the past because the future has not yet happened. In this project, useful alternatives have been formulated systematically so that the planner can respond to a range of possible future environments.

Managing the future means influencing the future--creating it, constraining it, adapting to it. A futures study points the way.

The views and conclusions expressed in the Command College project are those of the author and are not necessarily those of the Commission on Peace Officer Standards and Training (POST).
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This menace could kill millions of people. In reality, it has already happened. This is not some hypothetical situation or science fiction scenario. This killer knows no political boundaries, has no religious preference, and can travel anywhere in the world. In fact, one episode in the early twentieth century killed an estimated 50 to 100 million people. We are not talking about the latest terrorist threat, or a killer tsunami. No, we are talking about an avian flu outbreak. That’s right, of all the threats we face in our modern world, the biggest is a “little old flu virus” making a small genetic shift and killing millions.

H5N1 Influenza

According to the Center for Disease Control, influenza type A or B viruses cause epidemics of disease almost every winter. In the United States, these winter influenza epidemics can cause illness in 10% to 20% of people and are associated with an average of 36,000 deaths and 114,000 hospitalizations per year. Therefore, the threat of this type of event is not what concerns the medical community. More accurately, it is the H5N1 flu virus, often referred to as the avian flu virus, which has the medical community concerned.

According to the World Health Organization Website, the H5N1 strain first infected humans in Hong Kong in 1997, causing 18 cases, including six deaths. Since mid-2003, this virus has caused the largest and most severe outbreaks in poultry on record. In December 2003, infections in people exposed to sick birds were identified.
Since then, The World Health Organization has confirmed 319 cases of human infection resulting from the H5N1 avian influenza virus. These infections have occurred in 12 countries with the majority of cases occurring in Indonesia, China, Thailand, and Vietnam. To date, there have been 192 laboratory confirmed fatalities as a result of this influenza infection. Most of these cases occurred in previously healthy children and young adults. Fortunately, the virus does not jump easily from birds to humans in its present form. However, should the H5N1 virus evolve to a form as contagious as normal influenza, the threat of a pandemic would be significant.

Is it possible for an urban police department to maintain basic emergency services during a pandemic condition? It is important to understand the unique challenges posed by a pandemic. According to Osterholm (2005), the threat of a major flu pandemic in the United States is not a far fetched medical scenario and is now viewed from a variety of disciplines as an increasingly likely event. A flu pandemic has major implications for all segments of society, but the biggest challenge for local law enforcement will be to maintain the capability of providing core emergency police services. Traditional law enforcement disaster planning models are predicated on mutual aid assumptions coupled with an expectation of a well defined event epicenter. Unfortunately, the scope of a severe pandemic would quickly exhaust law enforcement resources leaving most departments to fend for themselves.

Why is this a critical issue for law enforcement? As history has shown, a pandemic can tear at the very fabric of society. Thus, the ability of law enforcements to maintain the provision of emergency services is a critical component to an effective governmental response to an influenza pandemic. Even in locations that are not directly
affected by an outbreak of the disease, the psychological implications to citizens, coupled with the economic losses associated with a pandemic create an environment ripe for social disorder and anarchy. It will be essential for law enforcement to continue the provision of core services to quell public anxiety, assist in disease mitigation, and assist in post event recovery.

**HISTORY OF ILLNESS**

How likely is a scenario of pandemic, mitigation and recovery? According to Osterholm, (2005) in the world of infectious disease, influenza pandemics have posed the greatest threats to civilized societies. In the past 300 years, at least ten influenza pandemics have occurred in human populations. The most recent pandemics occurred in 1957-58 and again in 1968-69. Although tens of thousands of Americans died in these pandemics, the events were considered mild in the annals of infectious disease history. Conversely, the flu event of 1918, often referred to as the Spanish Flu, might be considered the mother of all modern pandemics. Recent analysis of this event indicates that as many as 50 to 100 million people perished from this killer virus. Rasmussen (2005) noted that the outbreak was probably one of the most severe events on record. Of the millions of victims worldwide, the United States lost over 700,000 individuals to the flu virus, which is more people than died on the battlefields of World War I.

So how did Americans respond? History notes that most American cities were ill-prepared to respond to this pandemic, and Los Angeles was no exception. Southland cities did fare better than its Northern neighbors. This was largely attributed to the imposition of quarantines and controls within the first 10 days of the onset of the
outbreak. These controls included closing public places such as theaters, concert halls, saloons, and churches. Conversely, San Francisco was slow to establish social separation programs. One glaring example was San Francisco’s decision to hold their Liberty Bond March which Los Angeles had cancelled. As a result, Los Angeles experienced death rates of fewer than 70 deaths a week per 100,000 people. On the other hand, San Francisco had more than double the rate of death at 150 per 100,000 people.

As would be expected in a situation of this magnitude, law enforcement found itself challenged with balancing civil liberties while taking steps to try to maintain public health and safety. Rasmussen (2005) writes that, “by the middle of October, armed police ‘flu squads’ were shooing shoppers along the sidewalks to keep groups from congregating.” Reacting to the situation, the Los Angeles City Council created a Health Advisory Board to recommend and establish emergency laws aimed at controlling public behaviors and providing the police with the ordinances to enforce the measures. Individuals found violating these ordinances were charged with a misdemeanor carrying a $500 fine and six months in jail.

Los Angeles was not the only municipality to enact emergency ordinances. The City of Pasadena, located on the north-east rim of Los Angeles, required residents to wear face masks in public, eventually making 60 arrests for violations of that law. Rasmussen (2005) wrote, “However, when robbers began posing as health officials to get into people’s homes, Pasadena repealed the provision.” Also, several cities including Los Angeles, imposed quarantines on residents, although it appears the quarantines were voluntary and residents cooperative. These are just several examples of the challenges to
law enforcement posed by previous pandemics. Consequently, the question is, can we extrapolate the lessons learned from prior pandemics to our modern global environment.

THE EMERGING PANDEMIC SCENARIO

Although there have been several flu pandemics in the ensuing years, none were as widespread, or as lethal, as the pandemic of 1918. However, the 2003 SARS event (severe acute respiratory syndrome) provides valuable insights into the impact of a modern pandemic. Osterholm (2005) noted that this event contained critical lessons about the potential response to a pandemic by the global community. Moreover, as the term pandemic implies, it is the psychological impact of these events that may be the most damaging to the societies in which they occur. A study conducted by the National Academy of Sciences Institute of Medicine concluded that the public hysteria created by the SARS epidemic was exacerbated by the relatively high case-fatality rate, the identification of individuals dubbed “super-spreaders”, the newness of the disease, the speed of global spread, and the uncertainty of how to contain the disease.

In addition to the resulting fear and public anxiety, the SARS event highlighted the economic implications of a pandemic. In Canada, where SARS infected 438, leaving 43 dead, tourism officials estimate that the pandemic resulted in the loss of $419 million dollars to the economy. The Asia-Pacific region took an even bigger hit with estimates as high as $40 billion dollars lost as international travel to the region declined. Further, the SARS pandemic raised questions regarding the level of government preparedness particularly in politically unstable third world countries. According to Osterholm (2005), the inability of the Chinese government to quell public anxiety concerning the SARS
epidemic resulted in one of the most severe political crises China had experienced since the 1989 uprising in Tiananmen Square. These examples illustrate just how critical it is for government, including local law enforcement, to plan for an effective and organized response.

**PLANNING FOR A FUTURE OUTBREAK**

So in the face of this doomsday scenario, how does a police department prepare to respond? Can we sit back and wait for a vaccine to be developed? *How can we maximize the efficient use of resources and prioritize services to maintain essential law enforcement services?* Osterholm (2005) asserts that the global community currently lacks the production capability to produce vaccine in the amount that would be needed to stem a global pandemic. Although several of the industrialized countries have long-term goals to produce a vaccine in quantities sufficient for their own population, the lack of a global supply plan would not stop the economic devastation to these industrialized countries despite the availability of vaccine. Although several vaccines have proven promising, it is still too early to tell if a vaccine could be produced in quantities that are sufficient to stem a global outbreak.

Further, many contingency plans fail to address the potential the need for a sustained response to a pandemic cycle. Although planning for this event is useful, one noted author makes the observation that resilience may be the key to crisis management. With some experts predicting an event lasting as long as three years, it may take more to respond to this situation than most disaster planning paradigms currently envision.
Olson (2006) notes that the Center for Disease Control suggests that police agencies use emergency interventions developed for events such as natural disasters. Unfortunately, this strategy fails to grasp the fundamentally different character of a pandemic. The scope, nature, and lethality of a significant avian flu pandemic will require police departments to develop plans specifically designed to cope with this condition. This strategy must assume that any response will be sustained over a prolonged period of time with little or no mutual aid from surrounding jurisdictions.

Based on these issues, it is clear organizations that wish to survive a pandemic event must begin with a structured and disciplined strategic planning process. Establishing strategic objectives will serve to allow a police department to sustain core emergency services must be a primary goal. Further, a parallel goal must include strategies for reducing the fear and anxiety experienced by the public. The reduction of fear is essential to sustaining social order during a pandemic crisis. Leaders will have to reshape their departments and rethink how they deliver services. Finally, the development of alternative service delivery technology coupled with the identification of disease mitigations strategies for department personnel will be critical.

A STRATEGY FOR SUCCESS

To begin the process of strategic planning, the following recommendations emerged from an expert group convened in the spring 2007 to study the issue of police response to pandemic events (Palmer, 2006):

1) Conduct a comprehensive analysis of potential legal and political mandates that may arise from a pandemic condition. History has shown that police departments are often tasked with non-traditional enforcement responsibilities. One example of this
may be the need to provide security for a National Pharmaceutical Stockpile Distribution Center. According to the Centers for Disease Control (CDC) Website, The Strategic National Pharmaceutical Stockpile has large quantities of medicine and medical supplies to protect the American public if the severity of a public health emergency empties local supplies (CDC, 2007). These medicines and supplies would be distributed from pre-designated sites located in many communities nationwide, and could potentially require force protection from the local law enforcement jurisdiction.

Further, social distancing programs and other disease mitigation strategies may require significant numbers of police officers. According to the website, Global Security.org, two ways to increase “social distance activity” restrictions are to cancel events and close buildings; or to restrict access to certain sites or buildings. These measures are sometimes called "focused measures to increase social distance." (Global Security Website) Depending on the situation, examples of cancellations and building closures might include: cancellation of public events (concerts, sports events, movies, plays) and closure of recreational facilities (community swimming pools, youth clubs, gymnasiums). Any response plan to fulfill these obligations must identify core critical services and determine how to staff those functions.

One way to do this is to begin the process of identifying critical, priority, and discretionary programs and services specific to the organization. This information will allow police management to anticipate potential staffing availability and develop layered service plans based on the severity of the pandemic condition. Furthermore, strategies such as the identification of adjusted work schedules, telecommuting plans, and altered
response procedures should also be evaluated to maximize staff availability for core service delivery.

2) Police management must identify disease mitigation strategies for police personnel including first responders. These measures should include basics like stockpiling medical supplies, plans for anti-viral distribution, and psychological support for staff. Further, a comprehensive education and training plan for employees and their families should be implemented well before the department is actually faced with a pandemic. As with the public, quelling anxiety in the department’s staff and families will be a critical factor in reducing vacancy rates caused by employees failing to report for duty out of fear.

3) Identify, budget, and implement technology that will assist departments in the provision of services to the public. An example of this technology might be the use of internet based police reporting systems, or the use of internet based surveillance camera systems as a force multiplier. Both of these technologies have the advantage of maintaining basic police services while keeping personnel free for emergency response and maintaining social separation to avoid disease transmission. Technology acquisition and implementation in the public sector can be slow, so it is essential that this technology be in place well before an actual event.

4) Begin the process of building relationships and lines of communication with key community stakeholders immediately. These stakeholders should include the local medical community, county health departments, school district, and other key community members to establish lines of communication and fully understand expectations. These
relationships must be nurtured and developed over time and are essential to effective disaster planning and response.

These recommendations are offered as a starting point for the discussion of a pandemic planning process. Every police department is different. Staffing, equipment, capabilities and organizational culture must be examined and evaluated when developing any response plan. Nonetheless, the one commonality among organizations is our obligation to the public.

CONCLUSION

Leaders and managers of public agencies face numerous and difficult challenges. One need only consider the dizzying number of trends and events affecting the United States in the last twenty years. From aging populations, changes in the nature of families, shifts in political conservatism, tax cuts, social programs, changes to the health care system, e-government, terrorism, etc, it is no wonder that many public agencies have been unable to keep up with the dramatic shifts in the external environment. Nonetheless, law enforcement leadership has both an ethical and moral obligation to prepare for those times when society is most vulnerable and people turn to us for safety and help. During our annual planning meetings, we must prioritize what issues to address and prepare for that have the potential of placing our communities at risk and possibly destroying the lives of many of our citizens.

If a pandemic occurs, law enforcement will have to be ready for action. As Gene Kranz, the NASA flight director during the aborted Apollo 13 moon mission said, “Failure is not an option.”
REFERENCES


