



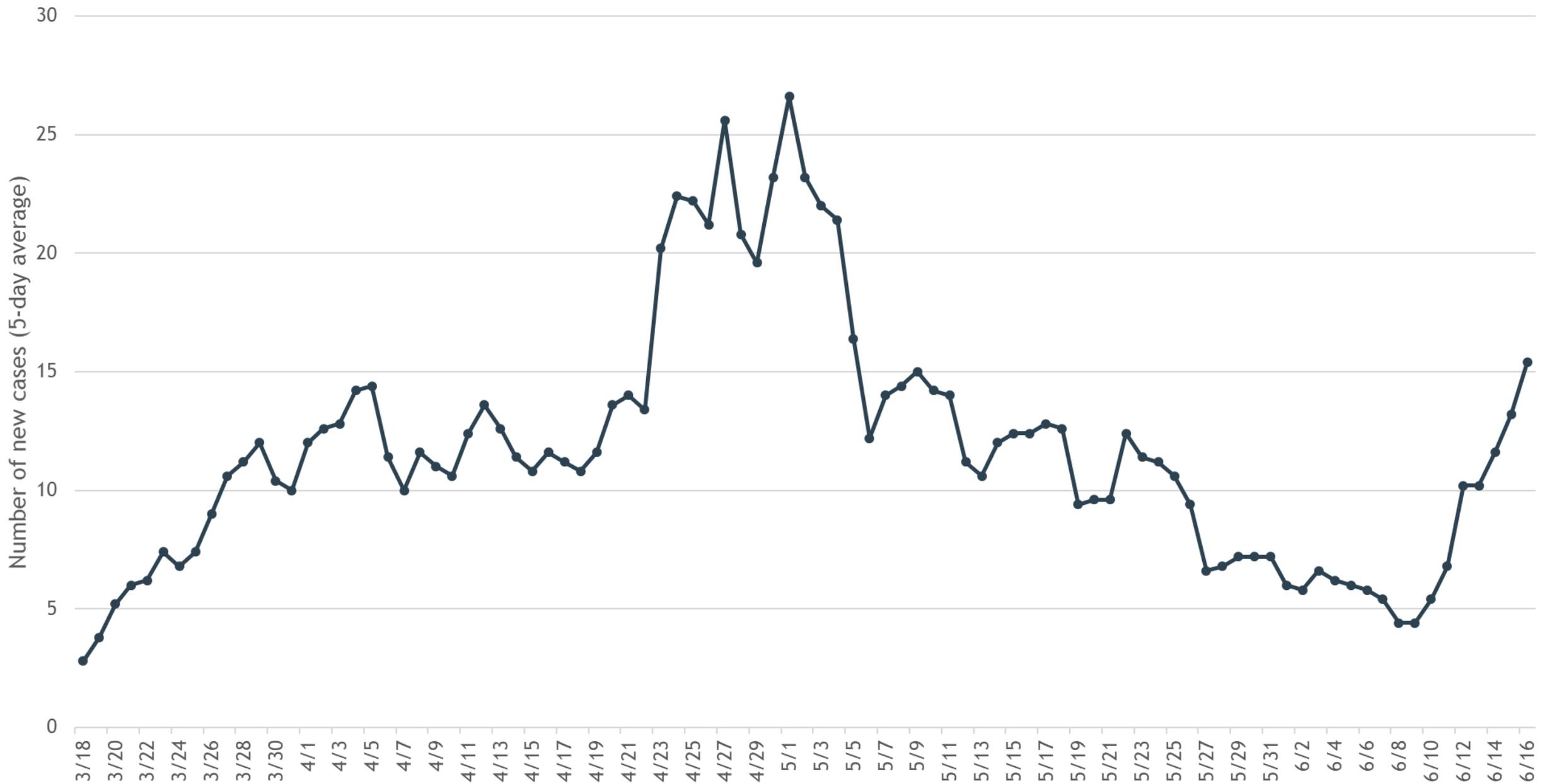
City Council  
June 16, 2020

Addendum #3  
Items Received at the Meeting

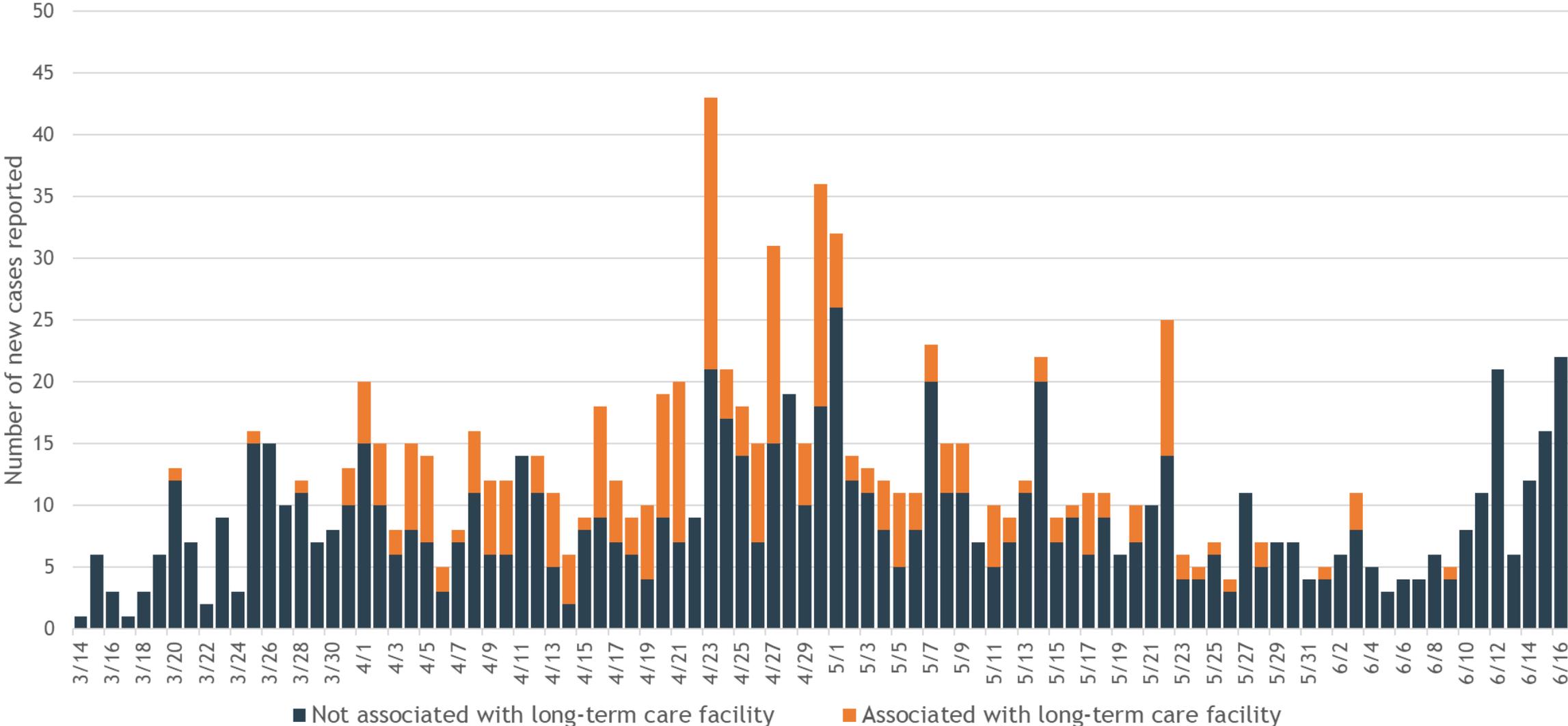


**June 16 2020  
COVID-19 Update  
city of Louisville**

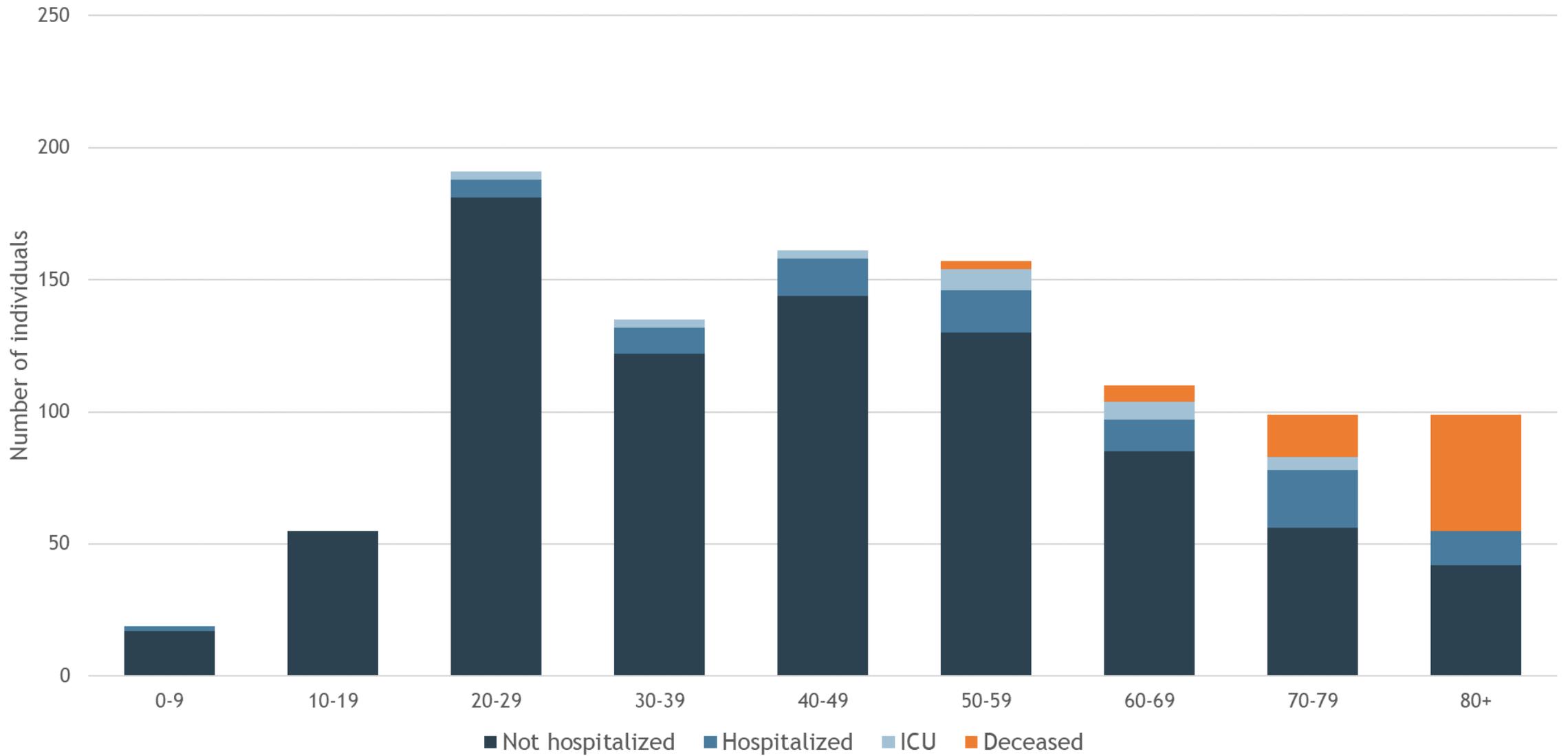
Five-day average of number of new cases of COVID-19 among Boulder County residents



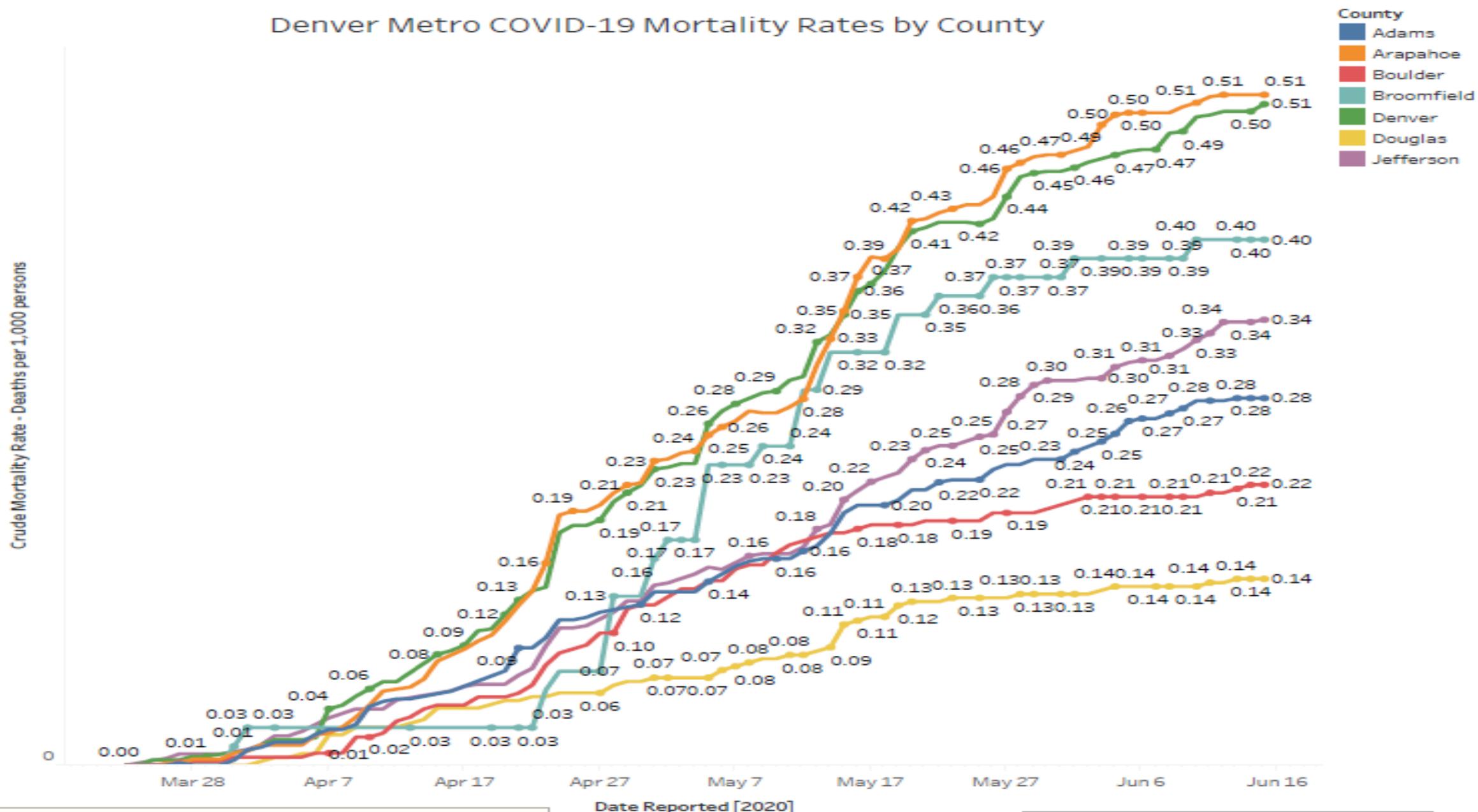
Number of Boulder County residents newly reported as testing positive for COVID-19 or who are considered "probable", associated with a long-term care facility and not associated with a long-term care facility, by date



# Boulder County residents who have tested positive for COVID-19 or are considered probable by age, hospitalization/ICU status, and outcome



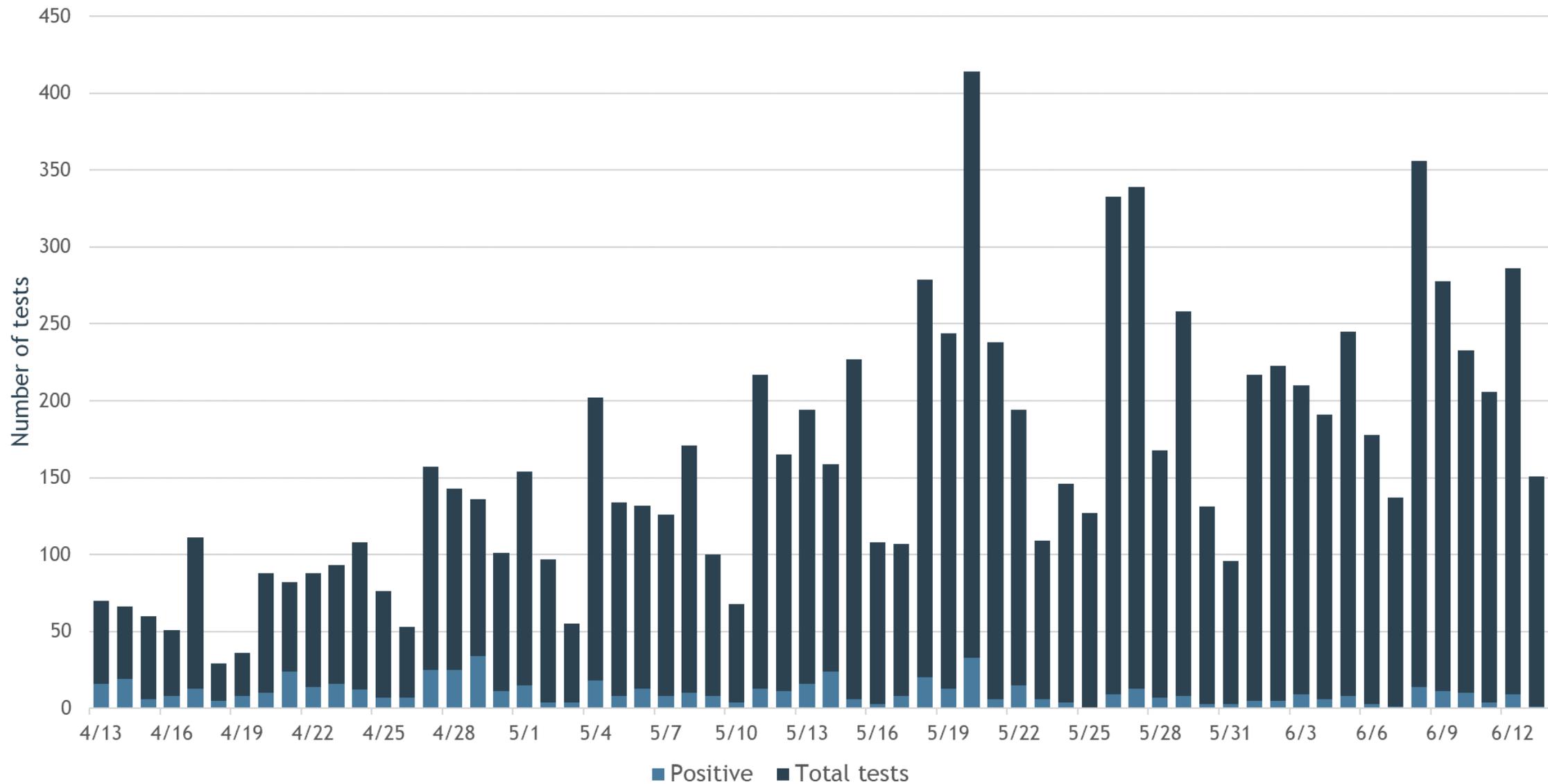
# Denver Metro COVID-19 Mortality Rates by County



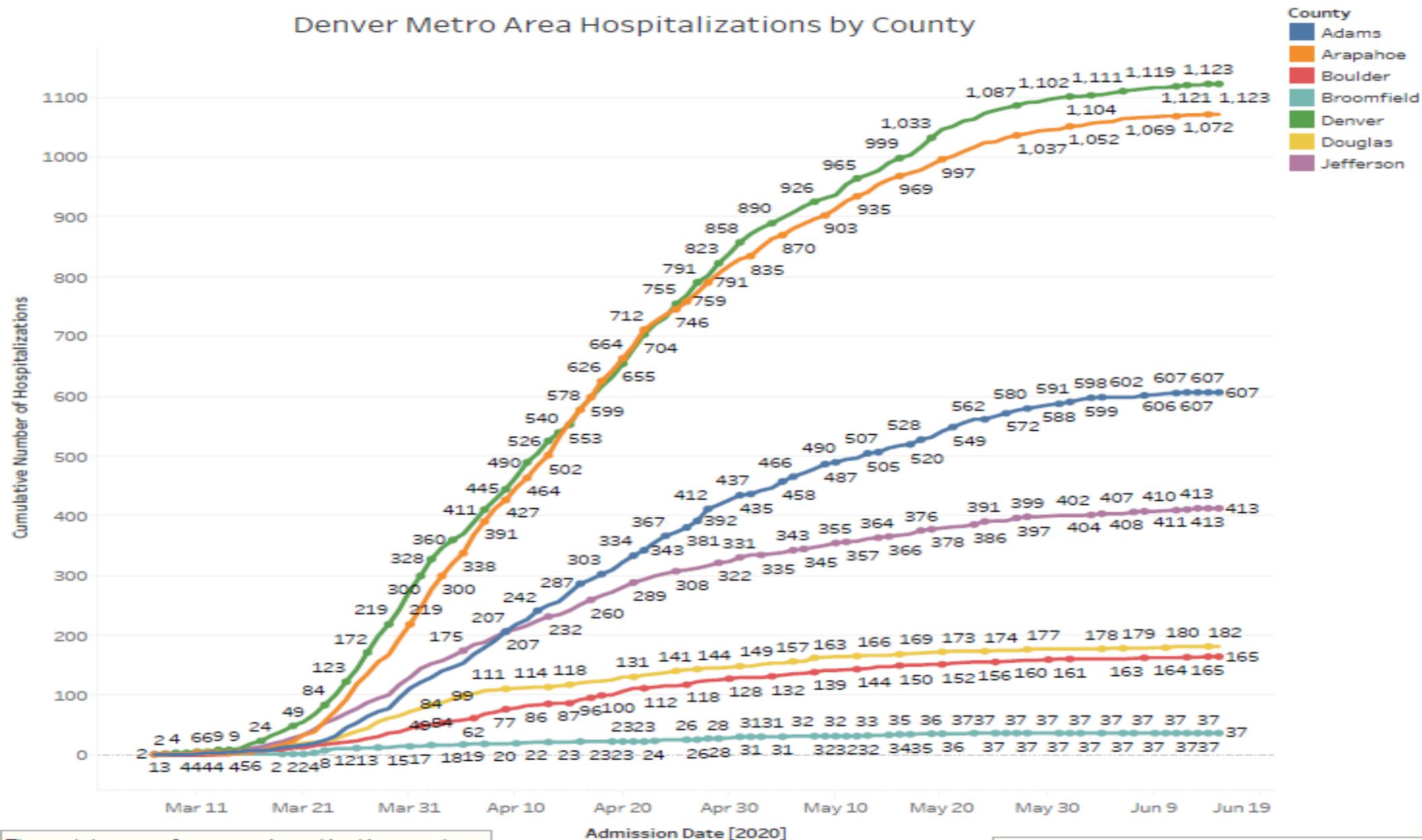
Data Source: The number of deaths come from the Colorado Department of Public Health and Environment - COVID-19 Colorado Case Summary Webpage

Data reflected here may differ slightly from LPHA death totals due to adjustments in timing of reporting and county assignment.

Positive and total COVID-19 PCR (diagnostic) tests by day among Boulder County residents



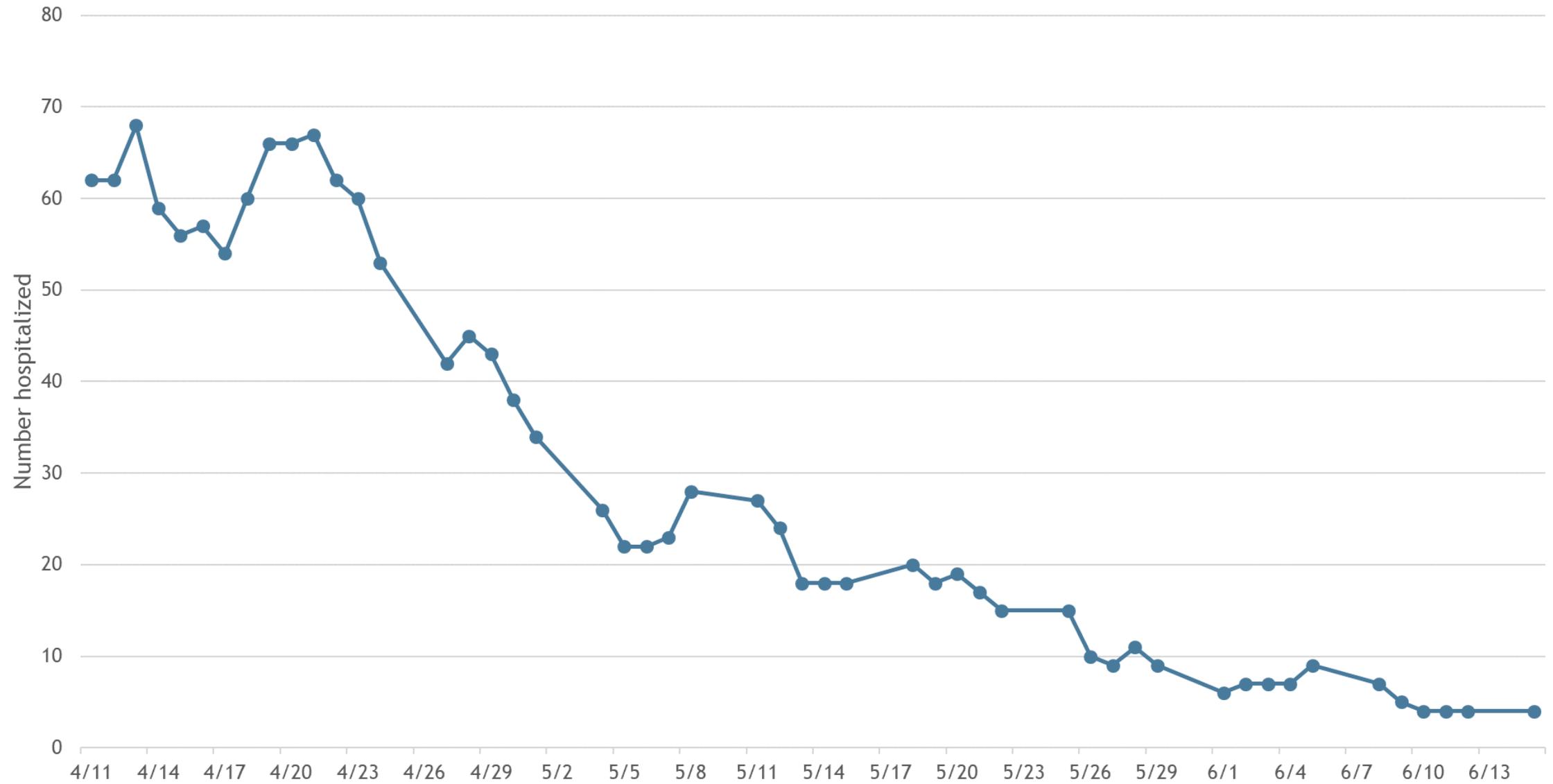
# Denver Metro Area Hospitalizations by County



These data come from case investigations and only represent hospitalization information known at the time of the initial case investigation.

Recent hospitalization data may not be fully represented in these dashboards due to ongoing investigations of recent cases.

Number of patients hospitalized in Boulder County hospitals due to COVID-19, by date



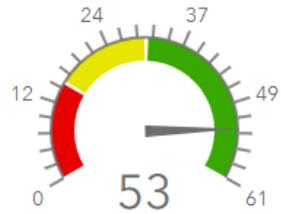


# COVID-19: Hospital Resource Summary

Data Source: EM Resource

Updated Daily

### Available Adult Critical Vents Today



Number of adult critical ventilators available in Boulder County hospitals

### Available Med/Surgical Beds Today

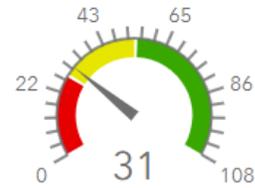


Number of beds used for medical/surgical care in Boulder County Hospitals

Avail Med/Surge Beds

Med/Surge Bed Shortage

### Available ICU Beds Today

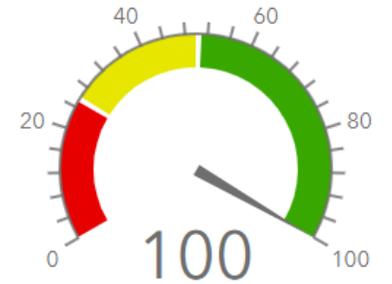


Number of beds used for ICU level care in Boulder County hospitals

Avail ICU Beds

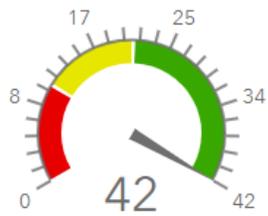
ICU Bed Shortage

### PPE Supply (%)



% of Boulder County hospitals currently reporting sufficient PPE supply for the next week. This includes: N-95s, reusable respiratory protection (& associated filters), eye protection, gloves, and gowns.

### Available Adult Non-Critical Vents Today



Number of adult non-critical ventilators in Boulder County hospitals

### Staffing Shortage (%)



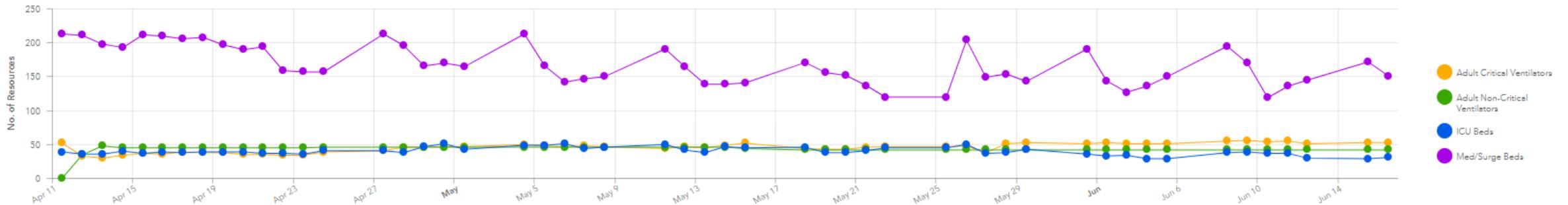
% of Boulder County hospitals currently experiencing a staffing shortage or expect a shortage in the next week

### Hospitals Testing (%)



% of Boulder County hospitals currently testing for COVID-19

### Available Hospital Resources at Boulder County Hospitals (by date)

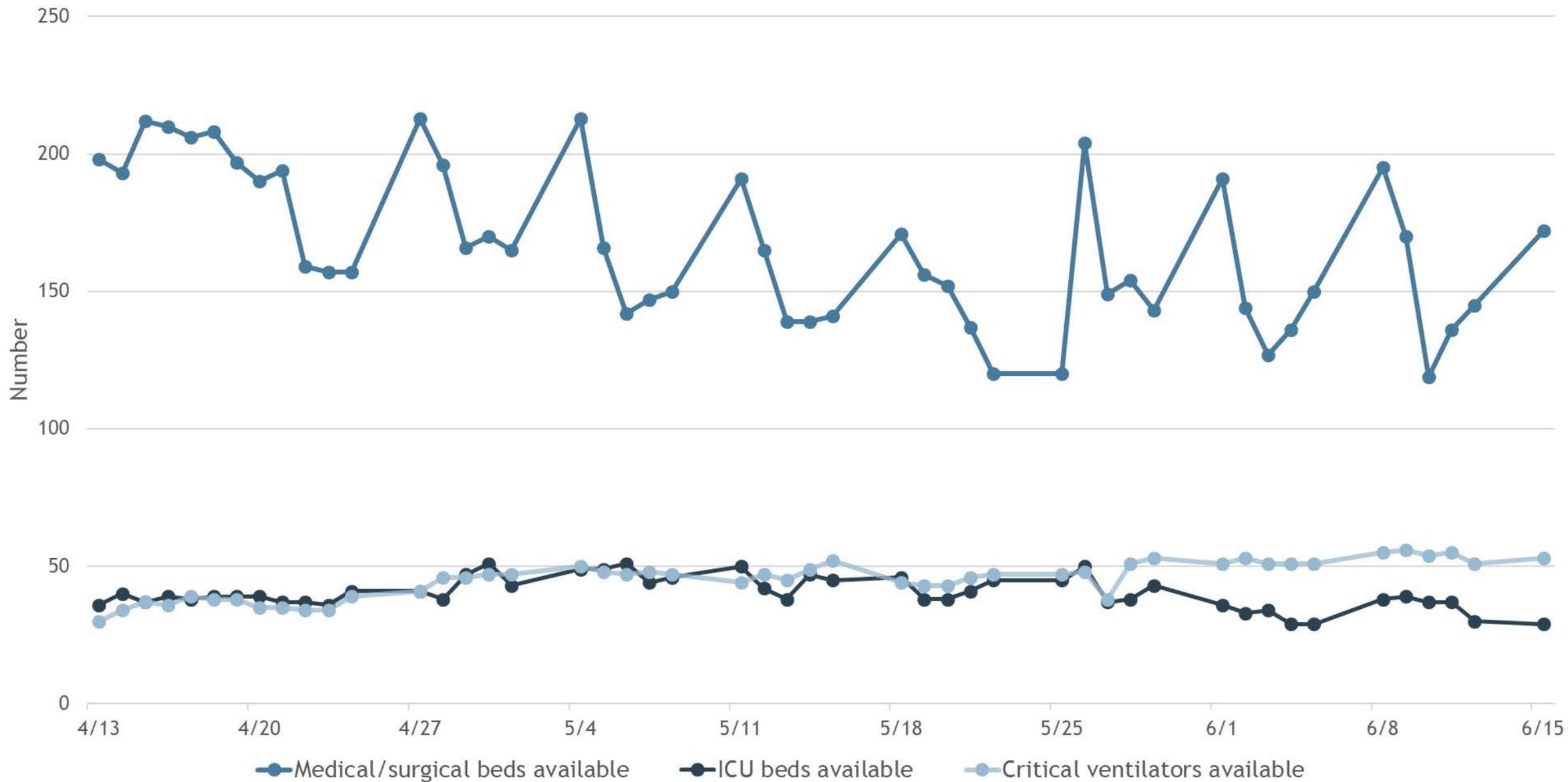


Available Hospital Resources

# Hospitalized

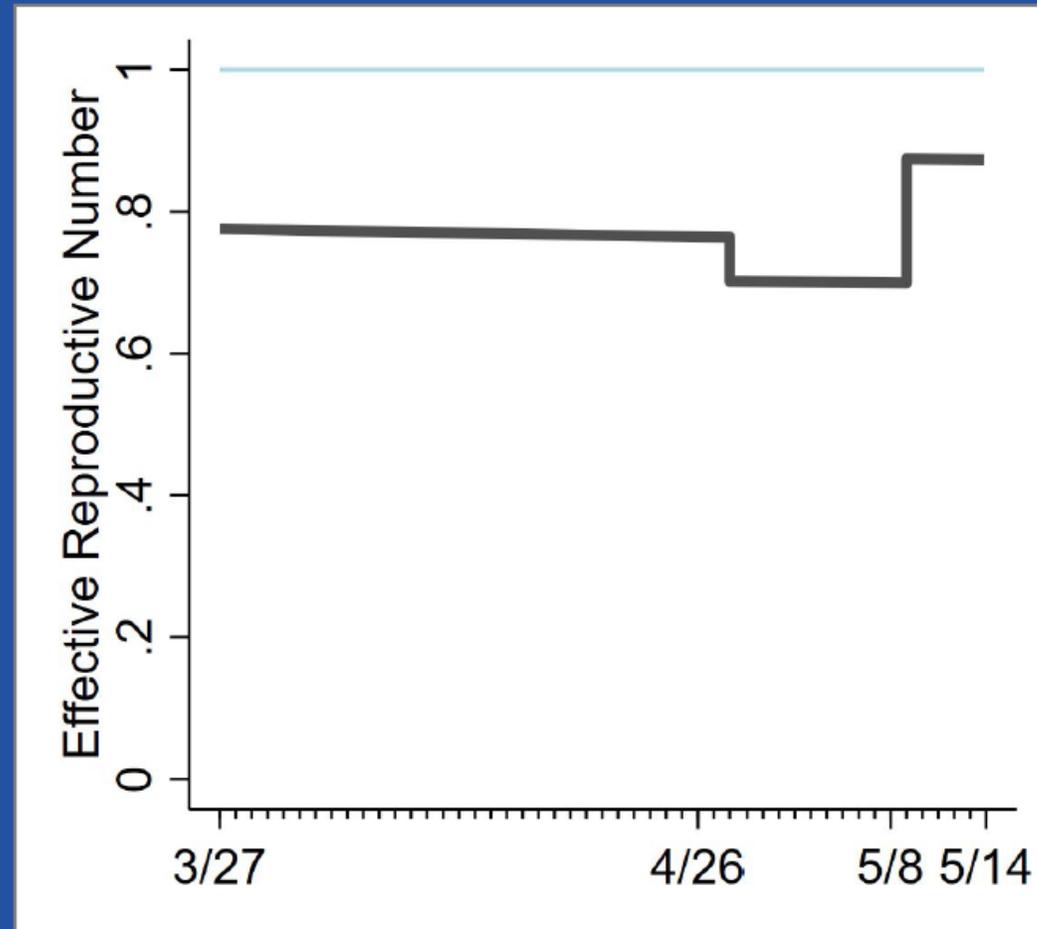
# Discharged

# Hospital resources available in Boulder County hospitals, by date



# REPRODUCTIVE NUMBER AND INFECTIONS

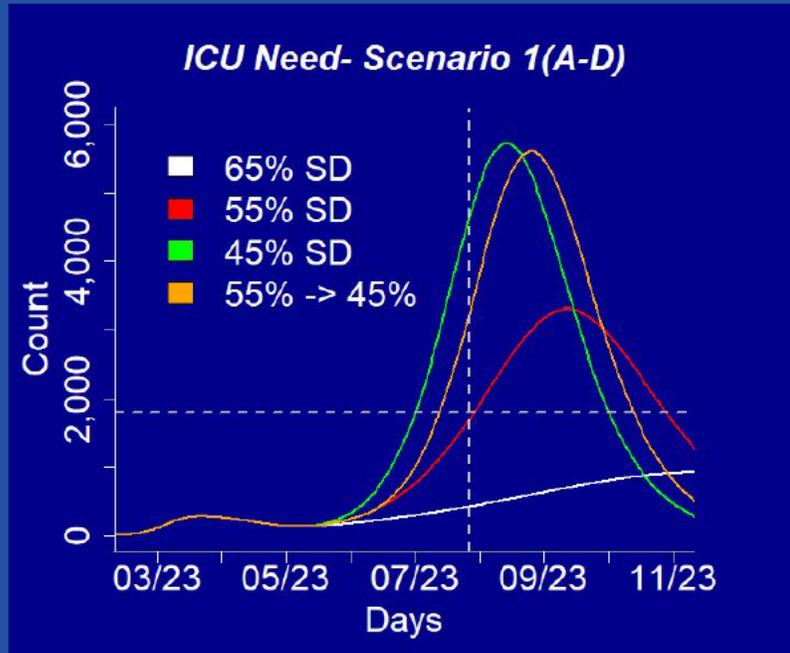
When the reproductive number exceeds 1, infections will increase.



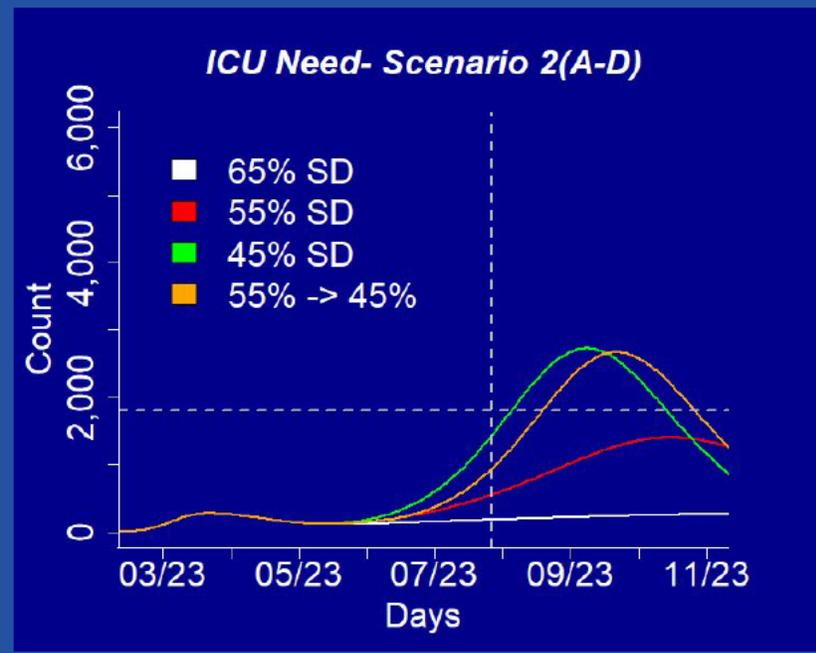
} Safe zone

# SOCIAL DISTANCING SCENARIOS

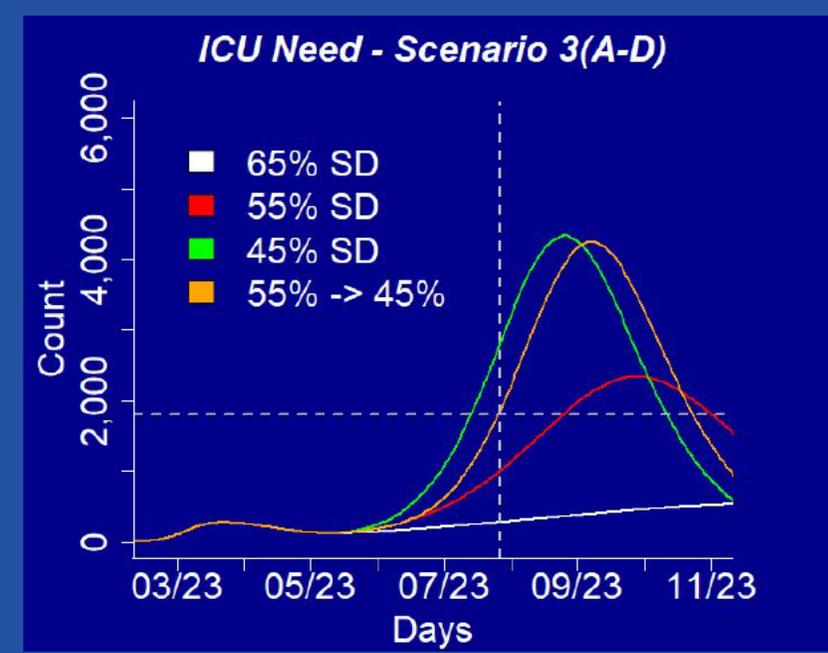
All populations at same level of social distancing



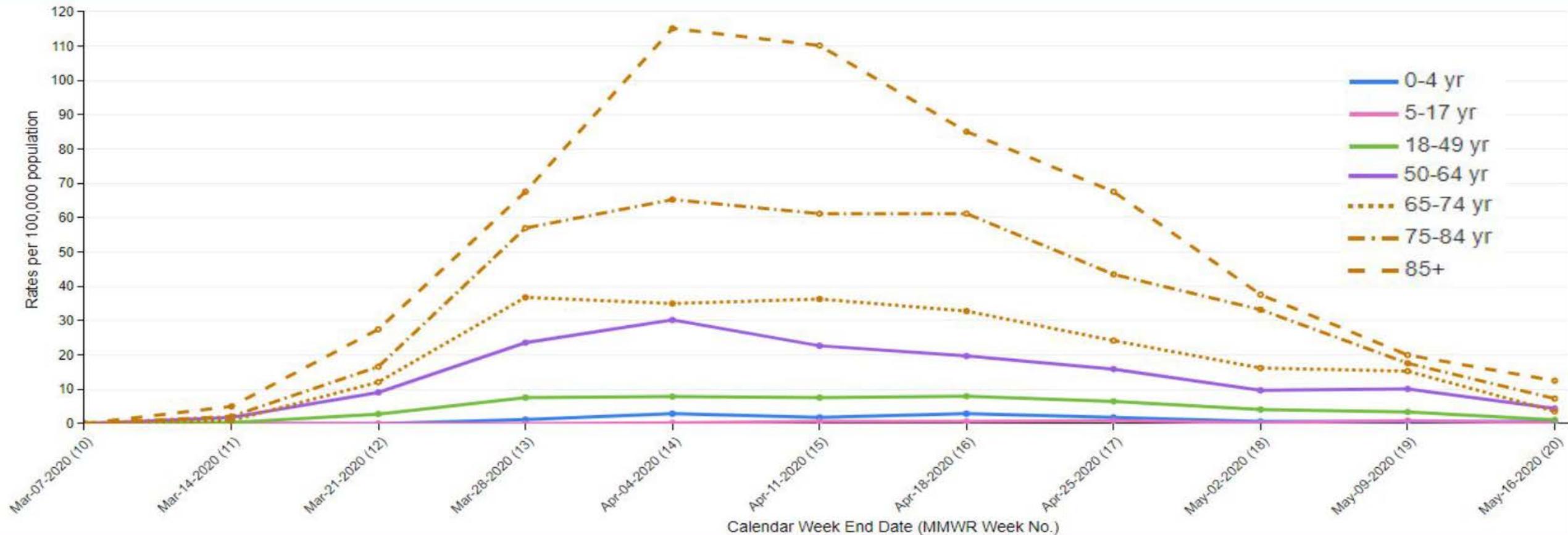
All older populations at high social distancing (80%)



Half of older populations at high social distancing (80%)



# COVID-19 HOSPITALIZATION RATES BY AGE GROUP, COLORADO\*

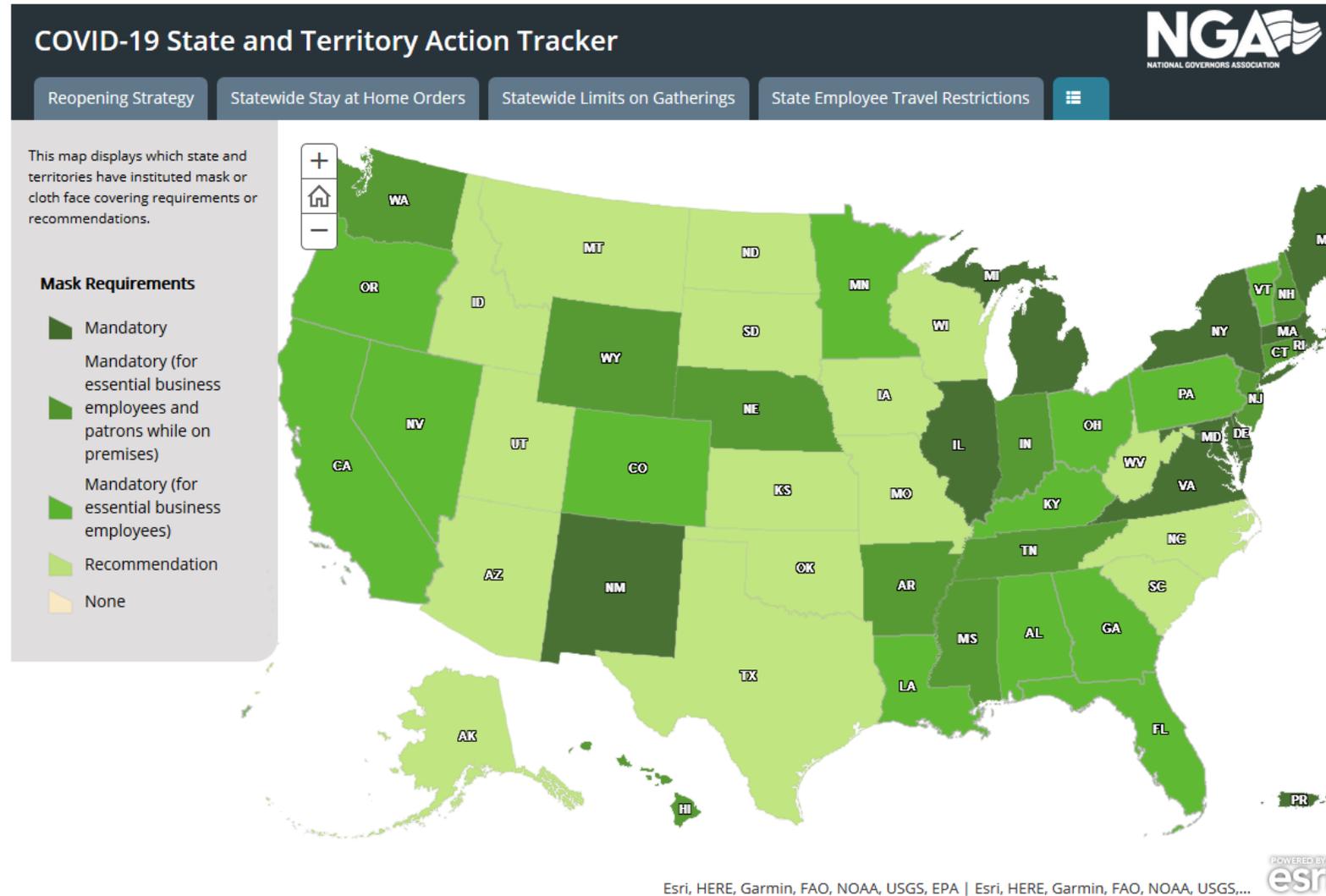


\*From CDC COVID-NET, 5 County Denver Metro Area  
<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html#hospitalizations>



# Every state recommends the public use of face coverings / masks

- > More than 30 states include some mandatory use
- > Science consistent with new CDC and WHO recommendations (June 10, 2020)



# Conclusions

- High levels of social distancing (60-65%) will be needed, along with mask wearing and increases in case detection and isolation, in order to avoid exceeding hospital capacity
- At low levels of social distancing (45%) we risk exceeding hospital capacity by this summer, even if older adults maintain high levels of social distancing
- Around mid-August, the date at which schools generally open, the epidemic curves under all scenarios are rising
- Contact tracing, testing, social distancing of at least 6', washing hands, not touching face and mask wearing all make a difference





# Louisville Police Department



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CITY COUNCIL MEETING  
TUESDAY, JUNE 16, 2020

## Department Commitment

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The Louisville Police Department is committed to providing law enforcement services to the community with due regard for the racial, cultural or other differences of those served.

It is the policy of this department to provide law enforcement services and to enforce the law equally, fairly, objectively and without discrimination toward any individual or group consistent with the City's Mission and Values.

## Department Commitment

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Our organizational culture values diversity and human life, and that starts with every new Officer before he/she puts on a Louisville Police Department uniform for the first time. The Command Staff meets with each new officer, and engage in conversations about the City's Mission and Values, and what it looks like to meet those expectations. We strive to leave every encounter and call we go on better than we found it.

This is reinforced with current Department members during incident debriefs, Department-wide meetings, and during collective policy reviews. We help ensure understanding and conformance to our Mission, Values and Department Polices through our on-going discussions, training, and testing.

## Education & Training

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Officers are educated on such topics during onboarding and participate in ongoing training. The Department also has specific contemporary policies in place to maintain peace in the community and ensure equality and justice. The City's Police Department Policy Manual can be found on the City's website at <https://www.louisvilleco.gov/residents/police-554>.

## Use of Force – Resistance to Response

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In 2019, The Department adopted the Critical Decision Making Model (CDM) as the contemporary standard, replacing the more long-standing Use of Force Continuum. In moving to this model, the Department reviewed research and recommendations from the Police Executive Research Foundation (PERF), and the Internal Association of Chiefs of Police (IACP).

The Police Department utilizes the CDM in training officers to evaluate critical incidents, including those in which they may use force. The four elements at the core of CDM include: ethics, department mission/values, concept of proportionality and sanctity of all human life.

## Use of Force – Resistance to Response

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De-escalation tactics and techniques are actions used by officers, when safe and without compromising law enforcement priorities, that seek to minimize the likelihood of the need to use force during an incident and increase the likelihood of voluntary compliance.

An officer shall use de-escalation techniques and other alternatives to higher levels of force consistent with his/her training whenever possible and appropriate before resorting to force and to reduce the need for force.

Whenever possible and when such delay will not compromise the safety of the officer or another and will not result in the destruction of evidence, escape of a suspect, or commission of a crime, an officer shall allow an individual time and opportunity to submit to verbal commands before force is used.

## Use of Force – Resistance to Response

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An officer shall use only the force reasonable, necessary, and proportionate to effectively bring an incident or person under control, while protecting the lives of the officer or others.

In other words, officers shall only use objectively reasonable force, proportional to the threat or urgency of the situation, when necessary, to achieve a law enforcement objective. The force used must comply with federal and state law and Louisville Police Department policies, training, and rules for specific instruments and devices. Once it is safe to do so and the threat is contained, the force must stop.

Sometimes the use of force is unavoidable, and an officer must exercise physical control of a violent, assaultive, or resisting individual to make an arrest, or to protect members of the public and officers from risk or harm.

## Use of Force – Resistance to Response

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An officer may use deadly force to stop a fleeing subject when the officer has probable cause to believe that the person has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, **and the officer reasonably believes that there is an imminent risk of serious bodily injury or death to any other person if the subject is not immediately apprehended.** Under such circumstances, a verbal warning should precede the use of deadly force, where feasible.

## Use of Force – Resistance to Response

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Effective June 15, 2020...

A peace Officer is prohibited from using a chokehold upon another person. For the purpose of this section “chokehold” means a method by which a person applies sufficient pressure to another person to make breathing difficult or impossible and includes but is not limited to any pressure to the neck, throat, or windpipe that may hinder breathing or reduce intake of air. “Chokehold” also means applying pressure to the neck on either side of the windpipe, but not to the windpipe itself, to stop the flow of blood to the brain via the carotid arteries.

## Use of Force – Resistance to Response

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Discharging a firearm at an occupant of a moving vehicle is only authorized when the officer is authorized to use deadly force against that occupant and the officer reasonably believes that the risk to the officer or others created by discharging a firearm is outweighed by the need to apprehend the suspect(s) without delay.

Officers shall not discharge a firearm from a moving vehicle unless a person is immediately threatening the officer or another person with deadly force.

Discharging a firearm at a vehicle, whether or not it is moving, with the sole intent of disabling the vehicle, is prohibited unless the officer is authorized to use deadly force against all occupants of the vehicle.

## Use of Force – Resistance to Response

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In addition to the reporting requirements described below, the Department also voluntarily reports any use of force that results in serious bodily injury to the Colorado Bureau of Investigation (CBI), who in turn reports this information the Federal Bureau of Investigation (FBI). In 2019, and 2020 year to date, the Department has not had any use of the force that resulted in serious bodily injury.

Any use of force by a member of this department shall be documented promptly, completely, and accurately in an appropriate report.

## Use of Force – Resistance to Response

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The officer should include at least the following in his or her narrative report:

The threat perceived, or underlying basis for the application of force, including the severity of the threat or security problem;

The subject's level of resistance;

The force applied;

The subject's response to each application of force;

The extent of injuries to the subject and/or officer(s) involved, if any, and any medical aid rendered.

## Use of Force – Resistance to Response

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Any officer present and observing another officer using force that is clearly beyond that which is objectively reasonable under the circumstances shall, when in a position to do so, intercede to prevent the use of unreasonable force. An officer who observes another employee use force that exceeds the degree of force permitted by law must promptly report these observations to a supervisor.

The officer shall verbally report such force to a supervisor as soon as practical, and provide a written report within 24 hours. The report is to include the date, time, and place of the occurrence; the identity and/or description of the participants; and a description of the events and the force used. **Supervisors must immediately report any such allegation to the Staff Duty Officer.**

## Bias-Based Policing

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Bias-based policing is strictly prohibited. Every member of the Department shall perform his/her duties in a fair and objective manner and is responsible for promptly reporting any suspected or known instances of racial- or bias-based profiling to a supervisor. Members should, when reasonable to do so, intervene to prevent any biased-based actions by another member.

Officers contacting a person shall be prepared to articulate sufficient reason for the contact, independent of the protected characteristics of the individual. To the extent that written documentation would otherwise be completed (e.g., arrest report, Field Interview (FI) card), the involved officer should include those facts giving rise to the contact, as applicable.

## Professional Standards

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The intent of the Professional Standards policy is to maintain the integrity of the Department by “conducting thorough and impartial investigations of complaints of member misconduct, to protect the community from member misconduct and to protect members from false or malicious allegations.

The Police Department takes seriously all complaints regarding the service provided by the Department and the conduct of its members. The Department accepts and addresses all complaints of misconduct in accordance with this policy and applicable federal, state and municipal statutes and ordinances.

It is also the policy of the Department to ensure that the community can report misconduct without concern for reprisal or retaliation.

## Portable Audio Video Recorders

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Officers should activate recorders any time they believe it would be appropriate or valuable to record an incident.

The recorder should be activated in any of the following situations:

- \*All enforcement and investigative contacts including stops and field interview (FI) situations
- \*Traffic stops including, but not limited to, traffic violations, stranded motorist assistance, all crime interdiction stops, and vehicle searches
- \*DUI investigations, including field sobriety maneuvers
- \*Vehicle Pursuits

## Portable Audio Video Recorders

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\*Self-initiated activity in which an officer would normally notify the Communications Center

\*Arrests

\*Any contact within the confines of the jail, Addiction Recover Center (ARC), Juvenile Detention Center, Courts, etc. in which a use of force, beyond compliant handcuffing, may be reasonably expected to occur

\*Any other contact that becomes adversarial after the initial contact in a situation that would not otherwise require recording.

## Portable Audio Video Recorders

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Members should remain sensitive to the dignity of all individuals being recorded and exercise sound discretion to respect privacy by discontinuing recording whenever it reasonably appears to the member that such privacy may outweigh any legitimate law enforcement interest in recording.

Requests by members of the public to stop recording should be considered using this same criterion.

Recording should resume when privacy is no longer at issue unless the circumstances no longer fit the criteria for recording.

## Portable Audio Video Recorders

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Once activated, the portable recorder should remain on continuously until the officer reasonably believes that their direct participation in the initial incident that caused the activation has concluded or the situation no longer fits the criteria for activation. Recording may be stopped during significant periods of inactivity such as report writing or other breaks from direct participation in the incident.

## “8 Can’t Wait” Movement

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According to the author, research shows that eight policies have demonstrated the ability to decrease police violence by 72%.

- 1 - Ban chokeholds and strangleholds
- 2 - Require de-escalation
- 3 - Require warning before shooting
- 4 - Exhaust all other means before shooting
- 5 - Duty to intervene
- 6 - Ban shooting at moving vehicles

## “8 Can’t Wait” Movement

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- 7 – Require use of force continuum
- 8 – Require comprehensive reporting

The Department’s current policies and procedures speak to each of these policies and as a result, the City is in compliance and doing its part to reduce police violence.

Questions &  
Comments

Public  
Feedback

