KANSAS CITY, KANSAS POLICE GENERAL ORDER

SUBJECT: Use of Force

ORDER NUMBER: **1.02**ISSUED DATE: 08/18/2022
EFFECTIVE DATE: 08/18/2022
RESCINDS: 1.02 Issued 10/18/2021

REFERENCE: CALEA Ch. 1

CROSS REFERENCE:

CONTENTS:

- I. PURPOSE
- II. DEFINITIONS
- III. LETHAL FORCE RESTRICTIONS
- IV. PROHIBITED DISCHARGE OF FIREARMS
- V. AUTHORIZED USE OF FIREARMS
- VI. DRAWING, EXHIBITING, AND ACTIVELY POINTING FIREARMS
- VII. OFFICER INVOLVED CRITICAL INCIDENT TEAM
- **VIII. NON-LETHAL USE OF FORCE**
- IX. RESISTANCE/CONTROL CONTINUUM LEVELS OF RESISTANCE
- X. RESISTANCE/CONTROL CONTINUUM LEVELS OF CONTROL
- XI. ESCALATION AND DE-ESCALATION OF FORCE AND VARIABLES THAT AFFECT THE RESISTANCE/ CONTROL CONTINUUM
- XII. RESTRAINTS AND SPIT SHIELDS
- XIII. PRONE RESTRAINT CONSIDERATIONS
- XIV. USE OF FORCE FOR NONCRIMINAL SITUATIONS
- XV. MEDICAL CONSIDERATIONS
- XVI. REPORTING USE OF FORCE

XVII.MANDATORY TRAINING AND CERTIFICATION

XVIII.TRACKING OFFICER DEFENSIVE ACTION INCIDENT IN BLUE TEAMS

I. PURPOSE

- A. To provide sworn personnel with a single document explaining the Department's policy of Lethal and Non-Lethal Use of Force.
- B. The primary responsibility of the Department and each of its sworn officers is to protect the lives of the citizens we serve. It is critical that every action of the Department and its officers are consistent with that responsibility. The officers of this Department are granted extensive powers to meet these responsibilities. These powers have been set forth by virtue of Kansas Statutes Annotated 21-5227. Each officer is accountable to this Department, the Unified Government, and its citizens for the manner in which they exercise these powers.
- C. The Department values the physical safety and the protection of constitutional rights of the citizens of the community and the officers who serve the public. Officers should use force with the highest tactical degree of restraint which is reasonable under the circumstances. Officers will use only the force necessary to accomplish lawful objectives. It is the policy of the Department that the use of lethal and non-lethal force be used only as set out in this policy.
- D. This policy is solely for the officers of the Kansas City, Kansas Police Department. It should not be construed to be anything but this Department's policy on Use of Force, and not to conflict with applicable Kansas State Statutes, and, in particular, KSA 21-5227 and any amendments thereto.

E. The "use of force continuum" described is recognized and well established as a guide to using force when faced with a confrontation or arrest situation. Officers must understand that situations occur where the escalation and/or de-escalation of resistance or aggression is sudden, and consequently the officer's appropriate response may occur anywhere along the continuum which is an objectively reasonable response to the actual or reasonably perceived threat being presented by the subject.

II. DEFINITIONS

- A. Deadly or Lethal Force: Intentional force which is likely to cause death or great bodily harm or which creates some specified degree of risk that a reasonable and prudent person would consider likely to cause death or great bodily harm. This includes, but is not limited to, discharging a firearm intentionally at another person. This definition does not include special purpose firearms specifically employed as less lethal alternatives.
- B. Probable cause for use of lethal force: facts or apparent facts viewed through the eyes of a reasonable, trained officer, which would lead a reasonable person to believe that the circumstances presented meet the legal requirements for justifying lethal force.
- C. Reasonable suspicion for drawing or exhibiting firearms: Facts or apparent facts viewed through the eyes of a reasonable, trained officer, which would lead a reasonable person to suspect that a situation may escalate to a lethal force confrontation.
- D. Active Pointing: Active pointing is when an officer covers any part of a person with the firearms muzzle, intentionally and/or during a search
- E. Less Lethal force: The use of particular extended range kinetic impact weapons or devices that are intended to incapacitate, stun, or immobilize a person in a manner that is less likely to cause death or great bodily harm than a traditional lethal weapon. KCKPD less lethal impact projectiles include 12 gauge bean bag rounds, 40 mm impact rounds, and .68 caliber plastic rounds.
- F. Serious Use of Force: Lethal and less-lethal actions by officers including:
 - Any firearms discharged by an officer. Euthanasia of large animals and other exceptions are defined in General Order 50.13.
 - 2. Any use of force by an officer resulting in broken bones or great bodily harm requiring treatment at a medical facility.
 - Any head strikes with an impact weapon.
 - 4. Any use of force by an officer resulting in the loss of consciousness, or which creates substantial risk of death, serious disfigurement, disability or impairment of the functioning of any body part or organ.
 - 5. Any incident where a person receives a bite from a police canine resulting in a great bodily injury.
 - 6. Any other use of force by an officer resulting in a death.
- G. Use of Force: Any physical effort used to control, restrain or overcome the resistance of an individual. The term shall not include compliant handcuffing or soft, empty hand control techniques involving light contact used to guide a subject who is not resisting.

III. LETHAL FORCE RESTRICTIONS

- A. The discharge of firearms, an intentional vehicular collision, and setting roadblocks are all prohibited in the apprehension of misdemeanor suspects.
- B. Lethal force is legally permissible to prevent escape when it is necessary to prevent the arrest from being defeated by resistance or escape and:
 - 1. It is necessary to prevent death or great bodily harm to the officer or another person; or
 - 2. There is probable cause to believe the suspect has committed or attempted to commit a felony involving death or great bodily harm; or
 - 3. The suspect is attempting to escape by use of a deadly weapon; or
 - 4. There is probable cause that the suspect will endanger human life or inflict great bodily harm unless arrested without delay.
- C. Lethal force will only be used when all reasonable lesser alternatives have failed or appear impractical.
- D. Officers are not permitted to fire at suspects, intentionally collide with a suspect vehicle, or set a roadblock when there is any substantial danger to innocent bystanders.

IV. PROHIBITED DISCHARGE OF FIREARMS

- A. Officers will not use warning shots for any purpose. Warning shots place the lives of innocent bystanders in jeopardy, and in many instances, may provoke a suspect into returning fire.
- B. Due to the uncertainty of shot placement, officers will not fire their weapons from a moving vehicle.

C. Officers will not fire at a moving vehicle, its tires, etc., with the intent of rendering it inoperable. However, this does not prohibit firing at the occupants inside the vehicle when the occupants are using deadly force against the officer or others by means other than the vehicle itself. An officer threatened by an oncoming vehicle should move out of its path if possible. Officers may fire at a driver using a vehicle as a weapon when the officer is not reasonably able to move out of its path or when the vehicle is being used to assault another person who does not appear able to escape the vehicular assault.

V. AUTHORIZED USE OF FIREARMS

- A. Officers are permitted to use any force necessary, including deadly force, to insure the safety of themselves and others from imminent death or great bodily harm.
- B. When an officer reasonably believes it does not place the officer or others in further jeopardy, a verbal warning should be given prior to the use of deadly force.

VI. DRAWING, EXHIBITING, AND ACTIVELY POINTING FIREARMS

- A. An officer's decision to draw or exhibit a firearm should be based on the tactical situation and the officer's reasonable suspicion that there is substantial risk that the situation may escalate to the point where deadly force may be justified. When an officer has determined that the use of deadly force is not necessary, the officer should holster or secure the weapon as soon as is practical.
- B. Unnecessarily or prematurely drawing or exhibiting a firearm limits an officer's alternatives in controlling a situation, creates unnecessary anxiety on the part of citizens, and may result in an unwarranted or unintentional discharge of the firearm.
- C. Actively pointing a firearm at another person in the course of duty, except controlled training scenarios, requires filing a Defensive Action Report and field supervisory inquiry.
 - 1. Tactical operations, to include search warrants and barricades, are not exempt from this reporting requirement.

VII. OFFICER INVOLVED CRITICAL INCIDENT TEAM

A. The Officer Involved Critical Incident Team (OICIT) will investigate uses of force by police officers which result in unconsciousness, head strikes with impact weapons, substantial risk of disfigurement, disability, or impairment of the functioning of any body part or organ, broken bones, hospitalization, and other uses of force as directed by the Chief of Police (Refer to General Order 50.13)

VIII. NON-LETHAL USE OF FORCE

- A. It may be necessary for officers to use some level of physical contact and/or force to overcome resistance, effect arrest, or to protect themselves or others.
 - 1. The amount of physical contact may be as minimal as placing a hand on a subject's shoulder or arm and directing the subject to place his/her hands behind the back for handcuffing. This amount of control would be considered mere physical contact using soft empty hand control and is not recorded as a use of force.
 - 2. Depending on the level of resistance offered, the officer may use physical force to influence behavior in order to apply handcuffs to achieve control of the subject. These techniques would consist of touch pressure, strength or muscling techniques, joint locks, leg/hand strikes, the use of intermediate weapons, or lethal force if justified by the resistance offered.
- B. For the purpose of this policy, the use of force will be examined from two perspectives: resistance and control. Both resistance and control can be in the form of verbal directives/responses or physical action:
 - 1. Resistance: The subject's attempt to evade an officer's attempts of control. The amount and type of resistance will vary based on a variety of factors.
 - 2. Control: Force used by an officer to influence or overcome the unlawful and/or physical resistance of the subject. Physical control methods will be used:
 - a. To stop potentially dangerous and unlawful behaviors.
 - b. To protect the officer or others from injury or death.
 - c. To protect subjects from injuring themselves.
 - d. Affecting an arrest when the subject offers resistance as defined in Section IX.
- C. Justification for the use of force will be measured by three broad standards.
 - 1. The officer's use of control was initiated to overcome the subject's resistance.
 - 2. The level of physical control used by the officer was necessary and not excessive considering the type of resistance offered by the subject.
 - 3. The force was used only to accomplish lawful objectives.

IX. RESISTANCE/CONTROL LEVELS OF RESISTANCE

A. Psychological Intimidation

1. Psychological intimidation consists of non-verbal actions, often called body language, which influence officers' decisions on how to approach a subject, or what level of control to use if the subject starts to resist the officer. Non-verbal intimidating actions may include, but are not limited to, clenching the fists, widening the foot stance, or wearing a blank expression, which may warn officers of an individual's emotional state. These non-verbal intimidating actions often warn an officer of a subject's potential for violence when the subject has offered no verbal threats. A subject's non-verbal intimidation signal should be used as information to mentally prepare officers for alternatives to personal attack, not as justification for attack by the officer. An officer who reads non-verbal signals and reasonably believes that physical control is necessary to prevent a subject from injuring himself, others, or the officer, may initiate action before any other moves are made by the subject.

B. Verbal Non-Compliance

A subject's statements that offer the threat of physical resistance to an officer's commands are not normally considered resistance
until those persons physically resist attempts of control. Threats of physical injury may influence officers' opinions as to the amount
of force needed to effect control. Offenders may boast of their fighting skill or their intention to injure the officers.

Note: A person has a constitutionally protected right to express verbal protest with an officer. As a general rule, speech that falls short of a direct threat to an officer's safety is protected by the First Amendment. Kansas law requires a citizen to submit peacefully to arrest and to cooperate with the lawful orders of an officer during such arrest. When a person's actions or conduct reasonably appear to create an imminent threat of physical harm to an officer or others, reasonable force may be necessary to prevent physical injury to the officer or others.

2. The reaction to verbal threats made by a subject will differ from officer to officer. An officer's decision regarding the level of force necessary to control the subject will be based on the officer's perception of the threat and the subject's apparent ability to carry out that threat. An additional factor is the officer's knowledge of his or her own physical capabilities to manage the threat presented.

C. Passive Resistance

1. This is the lowest level of actual physical resistance. The subject resists control through passive physical actions. At this level, the offender does not make an attempt to defeat the physical control by the officer. Passive resistance is usually in the form of relaxed or "dead weight" posture intended to make the officer lift, pull or muscle the subject to establish control.

D. Defensive Resistance

1. Physically resisting the officer's attempt at control by direct, overt, physical actions. At this level of resistance, the subject does not attempt to strike the officer but attempts to push or take other physical action in a manner that does not allow the officer to establish control. Physically running away from an officer is another example of defensive resistance.

E. Active Aggression

1. Overt, physical actions of force where the subject assaults, or attempts to assault the officer, or uses techniques, which could result in bodily harm to the officer or others.

F. Deadly Force Assault

1. Overt, physical actions of force where the subject assaults, or attempts to assault the officer with a weapon, and/or uses techniques or objects which could result in death or great bodily harm to the officer or others.

X. RESISTANCE/CONTROL LEVELS OF CONTROL

A. Force that the officer uses to gain control over a subject's resistant actions is divided into the following categories: officer presence, verbal direction, empty-hand control, intermediate weapon and deadly force. In appropriate control situations, officers will give loud, repetitive, verbal commands ordering the subject to stop resisting and to comply with further orders.

B. Officer Presence:

- When the officer arrives on the scene, it is reasonable to expect that the mere appearance of the officer in uniform or otherwise
 properly identified, and exhibiting a command of authority, should deter a subject from continuing inappropriate and/or unlawful
 acts in the officer's presence.
- 2. It is at this initial stage of police/subject contact the officer shall use non-physical skills to take control of the situation and avoid escalation if possible. The first aspect is non-verbal communication skills, starting with the officer's facial expressions.
- 3. The officer should consciously attempt to maintain eye contact with the subject. This is not only a tactically sound action but will show the officer's concern and interest.
- 4. The second form of non-verbal communication skills is body language. It is reasonable to assume that as the officer is evaluating the subject's body language, the subject is likewise evaluating the officer's body language. The location and tension of the officer's arms and hands could indicate openness and concern, or an authoritative posture. There are situations where the officer must take control. Actions taken at this time could call for strong muscle tension in the arms and hands in an effort to convince the

- subject to comply with the officer's request without physically touching the subject. However, if the officer's intent is to calm the subject down, a conscious effort to relax their upper body and keep their hands open should be made.
- 5. In the event the presence of the officer does not inhibit or decrease the amount of resistance the officer must be prepared to escalate the use of control techniques.

C. Verbal Direction

 Many situations can be resolved by good communication skills or verbal direction. The mere presence of the officer and proper direction will be sufficient to persuade most individuals to follow the officer's directions. In any verbal confrontation, fear and danger must be defused before the subject will be able to understand the officer's commands. This will require good communication skills and patience.

Note: Verbal communication skills, like non-verbal communication skills, may have a great deal of hidden insinuations which may influence a subject's attitude. Voice control will often indicate emotional control. The slow, soft and deliberate voice of the officer will usually infer control, thus mitigating the hostile, verbally aggressive subject and situation. It takes a great deal of physical energy for a subject to maintain a high emotional level. The officer should attempt to maintain a calm lower emotional state, finding that the subject will often emotionally tire and react favorably.

- 2. Successful communication skills may prevent many physical confrontations from escalating to higher levels. However, if the resistance continues after using proper verbal and non-verbal skills, the officer must be prepared to escalate the use of control.
- 3. Actively pointing a firearm at another person coupled with verbal commands, if appropriate, is another example of verbal direction control. An officer may actively point his/her weapon at another person if he/she reasonably believes that a lethal force encounter may occur. Actively pointing a firearm is considered an officer defensive action and completion of the necessary incident in Blue Team is required.
- D. Soft Empty-Hand Control This level of control is designed to control primarily low levels of resistance. Soft empty-hand control techniques are techniques that have a minimal possibility of injury. Generally, these techniques are used to control passive resistance but can be utilized for any level of resistance if appropriate.
 - Standard handcuffing is a soft empty-hand control technique.
 - 2. Joint locks, strength or muscling techniques, and use of pressure points are also soft empty hand control techniques.
- E. Soft Baton Techniques This is an application of the baton using touch pressure, which is less likely to cause temporary or permanent injury than hard empty hand control or other intermediate weapon applications. Soft baton techniques are not a substitute for striking techniques. Officers should not attempt soft baton techniques when by themselves. Officers should be cautious to protect against a baton grab by the suspect whenever attempting any soft baton techniques.
 - 1. Mere placement of a baton in an elbow lock position for an escort is not a reportable use of force as long as it is guiding force only and no resistance is offered.
 - 2. Officers may use the wooden baton or the extended baton to apply pressure to pressure points in order to obtain pain compliance. Pressure points available for touch baton application include the calf, superficial common peroneal area, triceps, and bicep.
 - 3. Officers may also use the baton elbow lock as a balance displacement technique.
 - 4. Soft baton methods will only be applied by officers who have been through department training for their proper application.
- F. Hard Empty-Hand Control Most empty hand control techniques may be used to counter defensive resistance, active aggression, or deadly force assaults. Brachial stuns will only be used defensively, when confronted with active aggression or deadly force assaults. The shoulder pin restraint and occipital stuns will only be used when confronted with deadly force assaults. Hard empty hand techniques are generally applied when lower forms of control have failed or when not applicable because the subject's resistance level was perceived at a dangerous level. Techniques which fall into this level of force have the probability of creating soft connective tissue injury, skin lacerations, or bone fractures. The use of these techniques may cause some minimal injury to the subject. Officers may risk injury to themselves or have to utilize higher levels of control (such as intermediate weapons) if hard empty-hand control is not used. Techniques that are considered hard empty-hand control are:
 - Striking techniques Delivered with an officer's open hand, fist, forearm, leg or foot. The target points of these types of strikes should be major muscle masses in the legs, arms, shoulders, or side of the neck. The strikes should create muscle cramping temporarily inhibiting muscle function. It may be necessary for the officer to strike areas where there is potential for injury, such as the face or other very sensitive areas of the body depending on the situation encountered. Applying striking techniques to those areas which may cause bleeding or the transfer of biological fluids must be taken into consideration by the officer.

a. Target Areas

- (1) Leg target areas are the large muscles above the knee (common peroneal and femoral nerve) and the large muscle below the knee in the rear (tibia nerve). These are the primary targets for hand strikes and leg strikes. Intentionally striking the knee joint itself and the bones of the lower leg should be avoided.
- (2) Arms target areas for hand strikes are the inside and outside of the forearm (radial nerve), above the hand and below the elbow (median nerve).

- (3) Shoulders target areas for hand strikes (unless at deadly force) include muscles in the upper chest closest to the arms (brachial plexus tie-in) and to the rear just above the shoulder blades (suprascapular).
- (4) Side of neck (brachial stun) May be used to defend the officer or another against active aggression. The target area for hand strike (unless at deadly force) is the large muscle on the side of the neck (brachial plexus origin), striking it with an open palm heel, back of hand, or forearm, as covered in stunning techniques authorized by this Department.
- (5) Occipital Stun Used to defend against deadly force assaults. The target area for the strike is the area towards the rear of the neck, where the neck muscles become very thin and the nerves are exposed, near the base of the skull.
- 2. Shoulder Pin The shoulder pin restraint applies pressure to the side of the neck, rather than to the trachea. Any other technique performed by placing the arm around a subject's neck, that is not in compliance with the authorized shoulder pin, will be considered a choke hold and thus is considered a lethal force technique. The shoulder pin allows the officer to use only the degree of force necessary to control the subject. The amount of force needed may be increased or released, as the situation requires. The shoulder pin may only be used when confronted with deadly force assaults.
 - a. There are three distinct levels of control that can be achieved with the properly applied shoulder pin.
 - (1). Level I. The subject is held by the officer placing his or her shoulder of the side that is toward the front of the subject into the subject's armpit. The lock is applied but the subject complies before the officer applies compression.
 - (2). Level II. The shoulder pin is applied with pressure and the subject complies before becoming unconscious.
 - (3). Level III. The lock is applied with compression until the subject becomes unconscious. The pressure is relaxed as soon as the subject stops resisting. If the subject resists to the point of unconsciousness, the subject should be gently placed in the prone position for handcuffing. The subject should be immediately placed into the necessary restraints (handcuffs, leg restraints if appropriate), and removed from the prone position as soon as possible.

b. Medical Considerations

- (1) If a subject is rendered unconscious, the subject should revive in five to thirty seconds without any assistance from the officer. The subject's clothing should be immediately loosened to help insure normal breathing.
- (2) If a subject has been rendered unconscious and is breathing normally, the officer will immediately handcuff the subject to prevent the possibility of having to reapply the shoulder pin should resistance begin again.
- (3) In the event the subject does not revive in twenty seconds, loosen the clothing around the subject's neck and monitor the airway, breathing, and circulation. Immediately request EMS personnel.
- (4) Any subject rendered unconscious, even if subsequently revived, will be transported to a medical facility for medical attention. During the transportation of this subject, a second officer will accompany the transporting officer to serve as an observer to monitor the subject's actions.
- c. An Officer Defensive Action Incident in Blue Team will be required for all levels on the shoulder pin.
- G. Intermediate Weapon Control. This level of control employs the use of Departmental approved equipment which provides a method of controlling subjects when deadly force is not justified or appropriate but when empty-hand control techniques are not sufficient in controlling the subject or affecting an arrest. Whenever an officer uses an intermediate weapon for control, it should always be with the intent to temporarily disable an offender and never with the intent of creating permanent injury. Officers should not unnecessarily brandish or use an intermediate weapon to intimidate a person unless the officer is attempting to prevent further escalation of resistance and force.
 - 1. Chemical Agents Department approved Oleoresin Capsicum Spray
 - a. This chemical agent is a tool which can provide a means by which officers can defend themselves or others from injury and as a means of controlling a subject when the officer is facing resistance at the level of defensive resistance or greater. The chemical agent must get in the suspects eyes to be effective. The chemical agent will interfere with the subject's vision, breathing, and create pain. The policy of carrying and use of the Department approved chemical agents follows:
 - (1) No officer shall carry any chemical agent until he or she has completed annual certification.
 - (2) Uniform officers will carry the chemical agent in an appropriate pouch. Non-uniform officers will carry the chemical agent in a pocket or utilize the attached clothing clip. No officer will display or point the chemical agent at another individual inappropriately.
 - (3) Absent the presence of unusual situations, the chemical agent will not be used when there are infant children in the immediate area, on elderly subjects, or in enclosed areas where the possibility of secondary contamination to officers or others could occur. The application of chemical agents in a closed environmental condition such as hospitals is prohibited unless all other alternatives have been exhausted. The consideration of secondary contamination in closed environmental conditions must outweigh the application of the chemical agent and the officer must consider those factors.
 - (4) Officers will not deploy OC on a subject who is operating or in control of a motor vehicle.

- (5) Unless at lethal force, officers will not deploy OC on a subject who is in an environment that could lead to serious injury if vision become restricted (such as a tree or rooftop).
- (6) Officers will not deploy OC directly to the eyes with a Q-tip or other object.
- (7) Officers will not deploy OC on children or anyone known or showing obvious signs of a medical condition.
- (8) It may become necessary for an officer to strike a subject while holding an OC canister. Officers will not strike vital areas of the body with the canister unless at lethal force.
- (9) Normally an OC agent should not be sprayed on any subject from within a distance of three feet. The justification for deviating from this and spraying OC from within 3 feet will be specifically documented on the Officer Defensive Action Incident in Blue Team. Supervisors are also issued the MK 9 OC stream units. For the MK 9, a subject should not be sprayed within a distance of six feet.
- (10) The officer will verbally warn the subject that he/she is about to be exposed to a chemical agent. Verbal warning is not required when the subject is resisting at defensive resistance or greater; or, when there is a risk to the safety of the officer or others if the application of the chemical agent is delayed.
- (11) The application of chemical agents against large groups of people is discouraged but may be employed in unusual situations.
- (12) Anytime the chemical agent is used for controlling a subject, application of the chemical will end when the subject discontinues resistance or other aggressive behavior.
- b. Criteria for the use of chemical agents:
 - (1) The Departmental approved chemical agent has displayed a high level of effectiveness and low potential for long lasting physical injury. However, the Department discourages the officer from becoming over reliant on the product. The Department emphasizes the use of chemical agents is not universally effective; consequently, chemical agents should be a supplement to, rather than a replacement for, empty-hand control techniques and other methods authorized by the Department.
 - (2) The use of chemical agents will be restricted to the situation in which the officer believes that empty-hand control techniques would be or would reasonably appear to be ineffective and they are not yet at lethal force. Chemical agents may be used in lieu of the baton when necessary.
 - (3) Chemical agents should be administered at distances of three to fifteen feet. Spray should be administered in approximately one (1) second durations.
- Following the discharge of a chemical agent against or on a subject, the officer will do the following:
 - (1) Remove the subject from the area of exposure and place them in fresh air.
 - (2) Ask the subject if he suffers from any respiratory disease or problems such as asthma, bronchitis or emphysema. If the subject displays respiratory problems, summon medical assistance for the subject immediately.
 - (3) Assure the subject the effects of the chemical agent are only temporary.
 - (4) Flush the subject's face with water to hasten recovery.
 - (5) Contact EMS and ask them to respond to evaluate the subject and assist with further decontamination.
 - (6) The Department issued chemical agents are irritating to the eyes, nose and skin. Anytime the officer uses a chemical agent for the purpose of controlling resistant behavior, the officer will ensure that the subject receives adequate medical attention as soon as possible. When the subject is transported to a detention center, the transporting officer will advise jail personnel the subject has been exposed to chemical agents, thus preventing the unnecessary contamination of other jail occupants or in custody persons.
 - (7) When transporting the subject to booking or a medical facility, the officer will monitor the subject's condition and watch for signs of breathing difficulty, nausea or other physical discomforts. Affected subjects will not be left unattended until the effects have completely diminished or the individual indicates that he/she has sufficiently recovered from the effects of the spray. Officers on the scene of an exposure should not touch their eyes, nose, mouth or other sensitive areas of the body until they are able to wash their hands.
 - (8) Anytime an officer finds it necessary to use a chemical agent for controlling resistant behavior, the officer will immediately contact and advise a supervisor of the nature of the incident.
 - (9) A completion of all necessary reports, including an Officer Defensive Action Incident in Blue Team will be required when the officer discharges a chemical agent on the subject.
- 2. Impact Weapons A Department issued wooden baton or a Department approved collapsible baton listed on the clothing allowance.

- a. The Department approved baton is a tool that can provide means by which an officer can defend himself/herself or others from injury. Escalating to an impact weapon is a means of controlling subjects when the officer is facing defensive resistance, and the officer's empty-hand control is insufficient to control the resistance or, if the officer is facing active aggression or deadly force. The impact weapon may be used in lieu of chemical agents due to the restriction of the chemical agent or reaction time of the officer and subject. The policy of carrying and use of impact weapons is as follows:
 - (1) The wooden baton should be carried in a baton ring. Collapsible batons should be carried in the manufacturer recommended swivel scabbard. Either baton should be held in a low profile position when out of the scabbard but not in use.
 - (2) Officers should not unnecessarily brandish or use the impact weapon as an intimidation device, unless the officer is attempting to prevent the further escalation of force; at which time the officer will hold the baton in an interview or high guard stance.
 - (3) All strikes with an impact weapon should be delivered to the following areas:
 - (a) Primary targets, major muscle masses: The primary targets are the major muscle masses of the forearm, thigh or calf. These locations are primary targets because of low implication of injury to the subject. Impact weapon strikes to these areas of the body normally create muscle cramping and pain which inhibits the subject's ability to continue aggression.
 - (b) Deadly force targets for impact weapon strikes include the head, neck, throat, and clavicle. These striking points have high implications of creating severe injury in the form of great bodily harm or death. Therefore, the officer will avoid these areas during any confrontation, unless the level of resistance is to the level of deadly force.
 - (4) The collapsible baton will not be used for striking when it is in its collapsed, or un-extended, state. It is intended for use as an impact weapon only when extended to its full length. If there are exigent circumstances and the officer is unable to properly extend and use the collapsible baton, the justification will be documented on the Officer Defensive Action Incident in Blue Team.
- b. Use of Alternate Impact Weapons: In the event an officer's primary impact weapon has been lost, broken, or taken away, the officer may be justified in using an alternative impact weapon. When an alternative impact weapon is used, it will be used in a manner consistent with training for the Department issued impact weapon. Officers will include their justification for using an alternative impact weapon in their Officer Defensive Action Report. Alternative impact weapons will not be used as a deadly force instrument unless deadly force is justified.
- 3. Conducted Electrical Weapon: The Department approved Conducted Electrical Weapon is an intermediate weapon designed to incapacitate a subject from a safe distance without causing death or permanent injury. The Department issued Conducted Electrical Weapons are the only electrical energy intermediate weapons authorized for use by employees. Officers will use this device to defend themselves or others from injury as a means of controlling a subject when the officer is facing resistance at the level of defensive resistance or greater. Officers are prohibited by law and policy to deploy the Conducted Electrical Weapon as a form of punishment.
 - a. Officers will not use or carry the Conducted Electrical Weapon until they have completed an initial certification and maintain annual recertification, to be administered by the Use of Force Coordinator during annual in-service training.
 - (1) This recertification will consist of a written and practical test, administered by a Conducted Electrical Weapon certified instructor, during annual in-service. Manufacturer's recommendations will also be followed concerning the firing of 2 test air cartridges to complete the recertification. All test firing of air cartridges will take place under the supervision of a certified instructor unless approved by a Division Commander or higher rank. Only a Bureau Director will authorize distribution of available Conducted Electrical Weapons to any specific unit or officer.
 - (2) All officers will carry the Conducted Electrical Weapon in an approved holster or pouch. While on duty and in the Department authorized uniform, it shall be mandatory that Conducted Electrical Weapon be worn on the external vest or on opposite side of the body from the officer's duty weapon, preferably in the cross-draw position. No officer will display or point the Conducted Electrical Weapon at another individual inappropriately. The Conducted Electrical Weapon should not be aimed at the eyes or face unless deadly force is justified. Conducted Electrical Weapons and air cartridges will be securely stored at all times.
 - (3) To ensure the weapon is in proper working order, the following procedures should be followed: Visually inspect the weapon for any obvious damage. Insure that the weapon is pointed in a safe direction, remove any air cartridge attached, and turn the weapon on by turning off the safety. Perform a spark test and read the battery level from the Central Information Display and then return the safety to the on or safe position. (This will turn the weapon off.) If the battery level is below 20%, contact a supervisor for a replacement battery. Batteries depleted below 20% will be returned to the Academy.
 - (4) If the CEW is damaged or does not function properly, the officer will notify a supervisor. If the problem is a battery, it may be handled at the division level. For any other functional problems, the CEW will be immediately removed from service. A supervisor or commander will make arrangements to take the CEW to the Academy, where the assigned Academy staff will examine the CEW and issue a replacement if needed. A report or email will be generated describing the problem with the CEW.

- b. Target Areas and Considerations
 - (1) Although the Conducted Electrical Weapon will work from 0 to 21 feet, the recommended minimum distance is 3 feet. The optimum distance for deployment is 7 to 15 feet from the target.
 - (2) When possible, avoid chest shots with CEWs. Back shots remain the preferred area when practical.
 - (3) A subject shall be handcuffed, preferably in conjunction with the use of the Conducted Electrical Weapon or as soon as possible after being exposed to the Conducted Electrical Weapon. Officers shall also be prepared to employ other means to control the subject, including, if necessary, other levels of force consistent with Department policy.
 - (4) The officer will verbally warn the subject that he or she is about to be shocked. Verbalizing and warning are not required when there is a risk to the safety of the officer or others if the application of the Conducted Electrical Weapon is delayed.
 - (5) The Conducted Electrical Weapon causes brief Neuromuscular Incapacitation (NMI) and should not be used if it puts the incapacitated person in a dangerous circumstance. Generally speaking, officers should refrain from using this device on children, elderly persons, or others where the officer has reasonable beliefs that the use of the weapon may cause potentially serious medical risk(s) unless lethal force is justified.
 - (6) When practical, avoid prolonged or continuous exposure(s) to the Conducted Electrical Weapon's electrical discharge. In some circumstances, (in susceptible persons), it is conceivable that the stress and exertion of extensive repeated, prolonged, or continuous application of the Conducted Electrical Weapon may contribute to cumulative exhaustion, stress and associated medical risk(s).
- c. Improper Use The Conducted Electrical Weapon will not:
 - (1) Be considered an effective defense against a deadly weapon as the probes may miss or the weapon may otherwise be found ineffective. In a situation when a Conducted Electrical Weapon may be used as an alternative to deadly force, a cover officer should also be present and prepared to use lethal force if the situation warrants.
 - (2) Be aimed at the eyes or face unless deadly force is justified.
 - (3) Be fired near flammable liquids or fumes. The Conducted Electrical Weapon can ignite gasoline or other flammables. Some self-defense sprays are flammable: The Kansas City, Kansas Police Department issued self-defense spray is not flammable.
 - (4) Be utilized on a pregnant woman unless deadly force is justified.
 - (5) Be used for prodding or escorting individuals.
 - (6) Be used on individuals operating a motor vehicle.
 - (7) Be used to shock a person after the offender discontinues resistance or other aggressive behavior.
 - (8) Be used in a drive stun capacity with the cartridge off, unless it is an exigent, defensive use of the Conducted Electrical Weapon. Drive stuns will not be directed to the groin, head, neck, and face areas of an individual unless deadly force is justified.
 - (9) Be used on a subject who is running unless the officer is at lethal force. This is because during Neuromuscular Incapacitation (NMI) the subject will be unable to use his arms to protect himself as he falls, making a serious head injury more likely.
 - (10) Be used on a subject when the threat of great bodily harm is great for other reasons, unless the officer is at lethal force. For example, when the suspect is in a tree, on a platform, or on another high place; or when the officer can see that the ground presents an unusual hazard such as a dense field of dangerous debris, like scrap metal or glass.
- 4. A Stun-Cuff is a pre-positioned device applied to a subject's person which, when activated by remote control, discharges an electrical current. The current disrupts voluntary muscle control to limit resistance and uses pain to encourage compliance with officer commands. Unlike a Taser, a Stun Cuff will not cause Neuromuscular Incapacitation (NMI) over a broad area of the body. NMI effects will usually be limited to a single area of the arm or leg. In the case of the leg, the subject may roll to the ground. Officers need to be prepared to take physical control of the subject. Likely effects include pain to the affected area, balance impairment (when placed on the leg), and/or localized NMI/motor dysfunction.
 - a. As with any weapons platform, there is no guarantee of incapacitation. Officers need to be prepared to give follow-up cycles, gain physical control of the subject, or transition to a different force option. Do not assume a single cycle from the device will end resistance and gain compliance.
 - (1) Officers may only use the Stun-Cuff once they have been trained by a Defensive Tactics Instructor.

- b. The Stun Cuff may be operated by remoted control from approximately 100 yards within line of sight. It is effective through wood, glass, sheet rock; it is likely to be ineffective through a cinderblock obstruction.
- c. The Stun Cuff may be used anytime a violent felon has been taken into custody. It will be used when other forms of restraint are not optimal i.e. hospital, court room, live line-up.
 - (1). In medical emergencies involving a detainee, the stun cuff should be applied as soon as practical.
- d. Preparation A fully charged stun cuff should be functional for approximately ten (10) hours. When applied the cuff will be changed every 4 hours, or when deemed necessary.
 - (1). A spark test cycle will be completed at division before it is applied.
 - (2). To activate the cuff, swipe the remote control charging pins over the face of the device. It is active when the light on the device glows green.
 - (3). Then hold the remote control's "on" button until the device light flashes quickly. After this, the green light on the device should begin to pulse periodically. This means the device is armed.
 - (4). A red or orange light on the Stun Cuff means low battery. Note that even if the battery is low, the Stun Cuff should be able to deliver at least one full cycle.

e. Application

- (1). Inspect and photograph the site where the Stun Cuff is going to be applied.
- (2). Make sure the straps are open before applying the Stun Cuff. Do not attempt to slide the cuff on or off.
- (3). The strap should be firm but not overly tight. Allowing the probes to move offers the best effect.
- (4). When using the Stun-Cuff on the leg it should be placed toward the outside Achilles tendon region of the ankle, with the electrical points on the upward side away from the foot.
- (5). When using the Stun-Cuff on the forearm it should be placed on the inside of the forearm, with the electrical points away from the palm.
- (6). The strap should be firm but not overly tight.
- (7). The Stun-Cuff Notification Form (Appendix C) will be read aloud to the detainee prior to or during each application, when appropriate. Officers will record witness information as well as the time and date the notification was read.
- f. Appropriate Activation of Stun Cuff Device
 - (1). The Stun Cuff is not a substitute for negotiation or other use of force tactics. It is simply another use of force option. Officers must articulate the reason for each cycle given from the device.
 - (2). The device may be fired if the prisoner poses an immediate threat to the officer or others. This includes:
 - Physical or attempted physical violence towards any person
 - Attempts to escape; or
 - Tampering or attempting to remove the device
 - (3). A warning may be given prior to deployment if the officer has time and believes it is appropriate.
- g. Changing cuffs during a guard rotation
 - (1). Four officers will be present when the Stun Cuffs are switched out. Always make any adjustments in controlled environments using at least two officers.
 - (2). The old Stun Cuff must remain armed until the new Stun Cuff is in place. Once the new Stun Cuff is in place, carefully remove the old Stun Cuff. Once it is removed, inspect and photograph the site from which it was removed.
 - (3). Once the Stun Cuffs have been switched out, notify Dispatch for notation in the CAD.
 - (4) Issuing Warnings: Once the new Stun Cuff is on and the old one has been removed, the "Stun Cuff Notification Form" (Appendix C) will be read to the prisoner. Four officers will be present when this is read and all will sign the form. There is a space for an additional witness if needed.
 - (5) If the light on the device glows orange, red, or stops pulsing green, immediately apply a new Stun Cuff and take the one that stopped working to Division for charging.

h. Reporting

- (1). Anytime the device is discharged, a supervisor will be notified as soon as possible and a defensive action incident will be completed in Blue Team.
- (2). The cuff will be replaced in accordance with the above procedures so the information on the used device can be downloaded.
- 5. Less Lethal Munitions Department approved projectiles are less lethal kinetic energy rounds. The goal of deploying this type of munition with these kinetic energy rounds is to induce psychological deterrence, pain compliance, distraction and temporary incapacitation (stunning) to attain compliance and control.
 - a. Only specifically designated Department shotguns or special munitions launchers will be utilized as extended range impact weapons. The Special Operations Unit maintains 40 mm launchers and Byrna .68 caliber CO2 powered Mission 4 ARs.
 - b. The use of kinetic energy impact rounds is generally restricted to instances of subject resistance at the active aggression or deadly force assaults level. Officers may utilize less lethal munitions when no other means of subject control may be asserted without endangering the life or safety of the officers or bystanders. For example, they may be employed as part of an arrest plan for a suspect armed with a knife.
 - c. Officers will deploy less lethal munitions only when the officers attempting to use it are in a reasonable position of safety.
 - d. Less lethal munitions will only be deployed when a lethal force cover officer is present.
 - e. Less lethal munitions may be used in other circumstances not specifically addressed by this order. However, any deviation must be under a supervisor's direct supervision and the cause for such deviation articulated in appropriate reports.
 - f. FD-EMS Department personnel will respond and examine all subjects struck with a kinetic energy round to examine the subject and help determine the appropriate means of transportation to a medical facility. All subjects struck with a kinetic energy round will be examined at an appropriate medical facility.
 - g. Appropriate sections on the Officers Defensive Action Incident in Blue Team must be completed to properly document the use of less lethal munitions.
 - h. Photographs of all injuries sustained from kinetic injury impacts will be taken at the medical facility where the subject is examined. The taking of these photos at the medical facility will help to insure the privacy and dignity of the individual being photographed.
 - i. Digital copies of the photographs will be attached to the Defensive Action Incident in Blue Team. The entire incident will then be forwarded through Blue Team to the Police Academy Unit Commander and Internal Affairs Unit Commander.
- H. Lethal Force The final level of control is lethal or deadly force. Lethal or deadly force is defined in Section II and discussed further in Section III. Deadly force is not limited to the use of a firearm. It may become necessary for officers to protect themselves or others with means other than a firearm. Officers may use whatever means available in order to protect themselves or others when at a deadly force level of control. The officer will be required to justify the action taken.

XI. ESCALATION AND DE-ESCALATION OF FORCE AND VARIABLES THAT EFFECT THE RESISTANCE/CONTROL CONTINUUM

- A. When officers determine that they must use physical force, the level of force to be used is dependent upon the officer's perception of the resistance encountered, or whether the resistance is placing the officer or others in jeopardy of serious injury or death. It is important to note that each officer's perception of danger and level of resistance will be based upon the officer's training, experience, skill, and knowledge of physical control techniques authorized and taught by the Department.
- B. If the officer's presence and verbal direction are not successful in establishing control, the officers are trained to escalate the level of control. Escalating the level of control is accomplished by using the one plus one theory of escalation.
 - 1. The "one plus one" theory of escalation advocates that officers may use one level of control greater than the level of resistance used by the subject. The escalation in control to the next level will be justified when officers reasonably believe the lower level of control is insufficient to overcome the resistance encountered.
- C. The determination will then be made to escalate the level of control in order to control the resistance. Officers must also be prepared to deescalate the force being used.
- D. There are several variables that will affect an officer's force response. Examples include: the type of crime committed or attempted; relative size/stature of the officer and subject; exigent conditions; number of officers; number of subjects involved, availability of backup; relative strength; subjects access to weapons; subject under influence of alcohol or drugs; exceptional abilities/skills (e.g. martial arts); injury to, or exhaustion of, the officer; weather or terrain conditions; immediacy of danger; distance from the subject; and special knowledge.
- E. When possible, officers will attempt to use reasonable de-escalation techniques prior to using force. In accordance with training, officers will attempt to use tactical communication techniques to establish rapport and increase the likelihood of defusing potential conflict and gaining voluntary compliance before force becomes necessary.

- 1. Circumstances may permit an officer to determine whether an individual's failure to comply is due to their deliberate refusal or whether additional factors, such as the following, are causing or contributing to their lack of compliance.
 - Medical or mental conditions;
 - Physical limitations;
 - Language barrier;
 - Severe drug or alcohol intoxications;
 - Behavioral crisis; or
 - Other factors beyond the individuals control.
- Sometimes immediate action is necessary. However, officers must be alert to opportunities to respond in a manner that can slow things down, increase communication opportunities, and mobilize available resources to resolve intense situations with lower risk of injury to all involved. The methods used resemble those used by special operations and negotiators to resolve a barricade, and may include.
 - Containing and isolating the situation;
 - Moving from an exposed position to a safer one;
 - Use distance, cover, and concealment;
 - Use effective communication, including persuasion, listening, informing, and warnings;
 - Mobilizing additional resources, such as:
 - More officers;
 - CIT or specialized officers;
 - Shields and less lethal weapons; or
 - Assistance from other police and non-police organizations.

XII. RESTRAINTS AND SPIT SHIELDS

- A. Handcuffing Restraints The purpose of handcuffs is to restrain the movements of a subject in a manner which provides a safe means of transportation. Restraints also prevent further physical resistance from a subject.
 - 1. All subjects taken into custody should be handcuffed behind their back. This is to ensure the safety of the officer or other persons.
 - 2. Exceptions to standard handcuffing, of a subject under arrest, will be made when the subject has an injury, physical condition, or physical limitation which would necessitate a change in procedure.
 - 3. Once handcuffs are applied, they will be double-locked. The exception to this will be when the arrest environment is tactically unsafe for the officer to double-lock the handcuffs. Then at the earliest possible opportunity, the handcuffs will be double-locked.
 - 4. Any subject posing a danger to themselves and/or others, though not under arrest, may be handcuffed to prevent injury to themselves or others pending the determination of a course of action to be taken.
 - 5. A subject may be handcuffed to prevent escape during the process of an arrest or detention.
 - Except under exceptional circumstances, officers should not handcuff a subject to fixed objects such as posts, parked vehicles, buildings, etc.
 - 7. If a subject complains the handcuffs are too tight, the officer will examine the handcuffs; ensure there is ample distance between the subject's wrist and handcuff and that there is proper blood circulation.
 - 8. When juvenile prisoners are handcuffed, they should not be handcuffed to adults, nor should males be handcuffed to females.
 - 9. It is not uncommon for an officer to arrest a subject, place him or her in restraints, and then have the subject start to resist. If an officer does encounter this type of resistance, the officer should utilize control techniques to prevent injury to the officer or injuries to the subject. However, the control techniques should be limited to those which would not be construed as excessive force.
 - 10. Unless there is some serious and immediate danger to the subject, officers, or others, officers will not use OC, a CEW, or baton strikes on a subject who has been handcuffed, regardless of the subject's position or apparent physical condition.
- B. Leg Shackles. Officers may use leg shackles as an additional security precaution with subjects they believe may present a higher risk of flight or becoming combative. Leg shackles are not intended for use on combative subjects when the strap-style leg restraints are available. There is no risk of injury to the subject by placing him or her in properly applied leg shackles. However, leg shackles do not restrain a combative subject's legs sufficiently to prevent him or her from using their legs to try to attack officers or otherwise prevent control. Mere application of leg shackles is not a reportable use of force and no officer defensive action incident report is required.
- C. Leg restraints refer to strap and loop style restraints. Leg Restraints will be used to control individuals who demonstrate a tendency to use their legs to harm/injure themselves or others; damage property; or otherwise resist arrest or control. On those occasions when an officer finds it necessary-to utilize leg restraints the following considerations will be observed:
 - A supervisor will be notified whenever leg straps are applied.
 - Leg restraints will be applied no tighter than necessary to secure the legs, with the officer checking the tension after application.

- 3. Officers will monitor the subject during the time the leg restraints are used, making sure that the subject is not in unnecessary physical distress. The arresting officers will constantly talk to the subject in an attempt to calm the subject in order to assess any physical distress.
- 4. Officers will document all injuries, or reports of injuries, sustained by the subject during or after application of leg restraints.
- 5. Officers will complete an Officer Defensive Action Incident in Blue Team whenever the leg restraints are applied.
- 6. Application of Leg Restraints:
 - Officers should not attempt to apply leg restraints alone. Back-up officers should be requested and utilized when applying the leg restraints.
 - b. Leg restraints will be placed around the subject's ankles. Once applied, the subject should still be able to walk if needed.
 - c. Leg restraints will be applied by looping both legs together in a "figure 8" application that goes around and in-between both legs, placing each leg in a loop. This "figure 8" application will prevent slippage that could allow the subject to remove the leg restraints. The remainder of the strap should be held by the officer to prevent the subject from tripping.
- If it is necessary to place the leg restraints on with the subject in the prone position, the subject will be removed from the prone position after the leg restraints are applied, as soon as it is safe to do so.
- 8. Once the subject is placed into the transport vehicle, seated upright and seat-belted if possible, the remaining strap will be placed outside the vehicle door and a knot will be tied as close to the door as possible to prevent the subject from pulling the strap through the door. The excess strap will be placed in the front door and secured in order to prevent any possibility of the strap being caught in some manner and causing injury to the subject.
- 9. No subject will be "hog-tied" under any circumstances. Hog-tied is defined as a method of applying leg restraints as well as handcuffs on a subject. Once the leg restraint is applied, it is then connected to the cuffed hands while they are behind the subject's back. The subject is generally then transported in a face down position causing difficulty in breathing, which could result in death.
- 10. At no time will a subject be placed into a transport vehicle face down after having handcuffs and/or leg restraints applied.
- 11. If the subject continues to resist after the officers arrive at the booking location, the leg restraints will remain on the subject until removed by detention center personnel. The leg restraints will be untied, not cut off the subject, and the transporting officer will recover the leg restraints from booking personnel.
- D. Flex Cuffs. Flex cuffs are restraints that use a flexible plastic/nylon band with a one-way fastening and locking system that is specifically designed and manufactured to be placed around a person's wrist (or ankles) for the purpose of restraining the subject. All legal rules and force considerations that apply to standard metal handcuffs also apply to flex cuffs.
 - 1. Flex cuffs may be used by Special Operations Unit personnel during tactical operations. They may also be used during mass arrest situations or when traditional handcuffs are not immediately available.
 - 2. When flex cuffs are used to secure a detainee, the officer applying the cuffs must check the tightness of the restraints.
 - a. To avoid over-tightening, when applying flex cuffs the officer will draw the strap up until most of the cuff is in contact with the subject's skin. As with conventional metal handcuffs, tightness will be checked by inserting an index finger between the strap and the subject's wrist.
 - b. If a subject complains that the flex cuffs are too tight, the officer will check the tightness of the cuffs as soon as possible.
 - (1) If the officer finds that the flex cuffs are too tight, he will remove them as soon as reasonable possible and replace them with new, properly fit flex cuffs or with regular metal handcuffs.
 - (2) If the officer checks the flex cuffs and finds they are properly applied and properly tight then it is not necessary to replace or loosen the cuffs.
 - Officers removing flex cuffs should use special cutting pliers. Flex cuffs will be removed with reasonable care to avoid injury to the subject.
 - 4. Additional flex cuff considerations:
 - Like conventional handcuffs, flex cuffs are only a temporary restraint. Flex cuffs may be more uncomfortable than conventional handcuffs for the person being restrained.
 - b. Flex cuffs cannot be double locked. It is possible for the cuffs to be further tightened after initial application, creating a potential for injury.
 - With enough effort, a subject with great physical strength or under the influence of drugs may be able to break free from flex cuffs.

- d. Subjects may attempt to defeat the flex cuffs by other means. Flex cuffs are vulnerable to being cut with wire cutters or any sharp object, or they may be melted with a cigarette lighter.
- E. Spit Shields: The spit shields will be used only when there is a reasonable belief that the subject will use biological fluids (spit) to attempt to injure or contaminate the officer or others.
 - Officers will contact the field supervisor whenever a spit shield is to be used and advise him or her of the circumstances surrounding the incident.
 - 2. The spit shield will be applied in the manner approved by this Department.
 - 3. In the event the subject was exposed to OC spray, the officer will follow the proper procedures concerning post-exposure treatment, prior to applying the spit shield, if possible.
 - 4. If the subject's actions prevent the officer from properly rendering aid to the subject due to an attempt to spit on the officer, the officer will apply the spit shield and then transport the subject in a manner so as to offer fresh air on the subject's face and OC spray exposed areas.
 - An Officer Defensive Action Incident in Blue Team will be completed whenever a spit shield is used.
- F. Officers will continually monitor subjects in the field while they are restrained. If it appears that the subject is experiencing any medical problems, officers will render assistance and summon medical help if necessary.
- G. Training
 - 1. All sworn personnel shall be trained in the efficient and safe application of handcuffs, leg restraints and spit shields.

XIII. PRONE RESTRAINT CONSIDERATIONS

- A. Handcuffing violent subjects is a necessary part of police work, and following a struggle it will almost always be completed in the prone position. Once in custody, officers will take basic steps to insure the subject is able to breathe as freely as possible. Whenever a subject is handcuffed behind his back in the prone position, the officer will:
 - 1. Remove any pressure on the subject's torso and abdomen.
 - 2. Roll the subject to his or her side as soon as the subject is restrained and it is safe to do so, even if the subject is continuing to struggle.
 - 3. The subject may be placed in a supine or sitting position. The subject may vomit if he has been struggling, and it may be necessary to lay him on his side to prevent choking.
 - 4. Do not sit or lean on a restrained subject's torso or abdomen.
 - 5. Continually monitor the subject's condition.
- B. A subject will not be left unattended while handcuffed in the prone position.
- C. Officers will monitor the condition of a prone subject at all times.
- D. Subjects will not be left in the prone position once they have been restrained and cease to be a threat.
- E. If a prone subject complains of difficulty breathing, the subject should immediately be rolled onto his side or back and helped into a seated position. EMS should be requested without delay.

XIV. USE OF FORCE FOR NONCRIMINAL SITUATIONS

- A. As part of the community caretaker function, there are circumstances when force is necessary to seize a person who is not being arrested or detained pursuant to a criminal matter. Examples of this include seizing a person for medical treatment or enforcement of a civil court order. These acts are still seizures but they must not be confused with an arrest or criminal detention. Unless there is an offense for which the person is also being arrested, the severity of the crime in these instances is zero, and the officer will not escalate to force options which have a high potential of causing injury unless it becomes necessary to defend himself or another person.
- B. Officers do not regularly enforce court orders. An emergency child custody order may require a use of force. If the child in need of care resists, this is not an arrest. Absent a need to defend the officer or another person, care must be taken to avoid the use of tactics we would expect to harm the child.
- C. Seizing a runaway is not normally an arrest, though if resistance is encountered the juvenile may be charged with obstructing, depending on the juvenile's age and other factors.

- D. Force may be necessary to seize a person for emergency medical treatment. Note that an adult who is capable of making a rational decision may refuse medical treatment, even if it is certain he or she will die without it. If the person is not capable of making a rational decision, officers may use reasonable force to place them in protective custody for treatment, to prevent their death or serious harm.
- E. Force may be necessary to seize a person for emergency psychological treatment. Officers may encounter persons who are exhibiting signs of serious mental illness, who are in crisis, or who are suicidal. In accordance with department procedures and training, officers will normally take steps to slow such interactions down, keep things calm, attempt to gain the subject's trust and cooperation, and resolve the issue without using force. This is not always possible.
 - 1. If officers at the scene determine there is probable cause to believe the person is a danger to himself, officers may use reasonable force to take the person into protective custody for treatment at a medical facility. If there is not probable cause that the person is a danger to himself or others, no force will be used to seize the person for psychological treatment.
 - 2. If the seizure is only to take the person into custody for treatment and there is no probable cause for arrest, intermediate weapons will only be used if needed for defense. Intermediate weapons will not be used to overcome passive or defensive resistance.
 - 3. If the subject is a danger to himself only and there is no danger to third person, officers are unable to elicit the subject's cooperation after a reasonable effort, and there is no safe way to seize the person, officers may leave the scene. If this becomes necessary, officers will attempt to follow-up with the subject and discuss available services at a later time.
 - 4. If possible, outside advice by EMS, mental health personnel, or others should be solicited prior to using force. The decision to seize a person for protective custody will ultimately be made by police personnel. It will not be directed by outside entities.
 - 5. In the event there are misdemeanor criminal charges against the subject, summonses will be issued before he or she is placed in a treatment facility. If there are felony charges against the subject, personnel from the Criminal Investigations Bureau will be consulted to determine whether the person will be placed in a treatment facility or in jail. A person seized only for protective custody, with no criminal charges, will not be placed in jail.

XV. MEDICAL CONSIDERATIONS

- A. In the event an officer finds it necessary to strike, or use a chemical agent on a subject it is the policy of this Department that the officer(s) shall:
 - 1. Offer medical attention to the subject and document that medical attention was offered. In the event treatment is given to the subject, a notation will be made in the appropriate sections of the Officer Defensive Action Incident in Blue Team.
 - 2. Immediately contact a supervisor and advise the nature of the incident and any injuries. In the event the supervisor that was contacted is not the officers' regular supervisor, the supervisor who was contacted will review all reports and forward such reports to the officers' regular Shift or Unit Commander in a timely manner.
 - 3. Complete all necessary reports including an Officer Defensive Action Incident in Blue Team. The completion of the Officer Defensive Action Incident in Blue Team must be done prior to the reporting officer's conclusion of duty unless otherwise covered in another General Order.
- B. FD-EMS Department personnel will respond and examine all subjects struck with a kinetic energy round, OC Spray, or a Conducted Electrical Weapon to evaluate the subject and determine whether there is a need to transport to a medical facility. Any subject struck with a kinetic energy round or exposed to 15 or more seconds of Conducted Electrical Weapon shock will be examined at the appropriate medical facility.
 - 1. Conducted Electrical Weapon Medical Considerations
 - After initially deploying the Conducted Electrical Weapon the officer will assess the subject's breathing and evaluate the subject's actions before deploying additional shocks.
 - b. Suspects on which the Conducted Electrical Weapon has been used shall be monitored continuously for indications of medical problems and shall not be left alone while in police custody.
 - c. FD-EMS Department personnel will be immediately called to the scene to evaluate any suspect exposed to the Conducted Electrical Weapon and remove the probes.
 - d. Officers may remove the probes with EMS present unless there are other medical considerations present. Latex gloves should be worn when removing probes from the skin.
 - e. Puncture sites, if any, will be examined by medical personnel.
 - f. An officer shall not remove a probe if the barb is imbedded so deep as to prevent the probe from hanging loosely. Officers will refrain from removing probes from the head, face or neck areas, the groin area, or a woman's breasts and medical personnel will determine safe procedures for removal of probes from these areas.
- C. If a medical emergency arises following a struggle, run or intense physical effort, it may happen very quickly once the subject is restrained.

- Once the subject is moved onto his side, EMS will be contacted if officers determine the subject has used alcohol or drugs recently, or if he has any cardiac or respiratory diseases. Request EMS if any of the following breathing difficulties are observed:
 - a. Rapid, shallow breaths;
 - b. Very labored breaths; or
 - c. Gurgling or gasping breaths.
- 2. If the subject is struggling and suddenly stops moving and becomes quiet, this may be a sign of exhaustion. Monitor the subject and determine if EMS is needed.
- 3. If the subject states at any time that he cannot breathe or complains of breathing difficulty, immediately request EMS. Complaints of difficulty breathing will be taken seriously and should not be discounted because the subject continues to make sounds, struggle, or appear to be able to breathe. A subject can do all of these things and still be experiencing respiratory distress.
- D. The following factors make some individuals more susceptible to a medical emergency following a violent struggle:
 - 1. Obesity:
 - 2. Alcohol or drug use;
 - An enlarged heart;
 - 4. Multiple officers putting weight on the subject when applying restraints; and
 - 5. Pre-existing physical conditions such as asthma, bronchitis, emphysema, or heart disease
- E. If a subject in custody loses consciousness:
 - Immediately request EMS;
 - 2. Remove the handcuffs;
 - 3. Move the subject to a side or supine position; and
 - 4. Begin CPR if there is no carotid pulse.
- F. Excited Delirium: Excited delirium (ED) is a life threatening medical emergency, disguised as a police problem. Once officers encounter a person displaying symptoms of excited delirium, steps may be taken to ensure appropriate medical intervention when it is safe to do so. A person in this acute excited state should be considered in extreme medical crisis and he or she may die, despite all reasonable precautions taken by officer and other emergency responders to help protect him or her. (see Appendix A).

XVI. REPORTING USE OF FORCE

- A. Reporting Requirements for Conducted Electrical Weapons
 - 1. An Officer Defensive Action Incident in Blue Team must be completed following all discharges of the Conducted Electrical Weapon except during testing and training. Include the serial number of the Conducted Electrical Weapon in the appropriate section of the Officer Defensive Action Incident. A supervisor will immediately be notified of all Conducted Electrical Weapon deployments. Firing the air cartridge, or use of the Conducted Electrical Weapon as a stun device are all considered a use of force and an Officer Defensive Action Incident in Blue Team is required. The simple display of the Conducted Electrical Weapon is not considered a use of force.
 - 2. Air cartridges and probes used in a use-of-force incident shall be tagged into evidence and a property report will be completed. Probes may have blood on them and may be a biohazard. The wires shall be wound around the cartridge, with the probes being inverted into the portals from which they were originally, to prevent sharp ends from penetrating the evidence envelope. Tape should be placed over the portals to secure the probes.
 - 3. The unintentional discharge or the malfunction of a Conducted Electrical Weapon will be reported on an Incident Supplement. A supervisor will be notified immediately. The supervisor will review the discharge and send the incident number to the Academy and the Division Commander.
 - 4. The assigned Police Academy personnel will issue and track all Conducted Electrical Weapons, air cartridges, and accessories issued to the Division Commanders. Division Commanders will be responsible for ensuring the accurate check out, check in, and daily accountability of all equipment. The Division Commander shall conduct a monthly audit of the Electronic Control Device data.
 - 5. When a Conducted Electrical Weapon is deployed in a use-of-force incident, the CEW will be removed from service until the Division Commander has uploaded and reviewed the firing data from the CEW.
 - 6. The Academy will maintain a record of Conducted Energy Weapon and air cartridge assignments.
 - 7. Any air cartridge expended for testing or training will be reported to the Police Academy for auditing purposes.

B. Officer Defensive Action Incident in Blue Team:

- 1. An Officer Defensive Action Incident in Blue Team is required when an officer uses soft empty-hand Control techniques or greater levels of control, other than standard handcuffing and mere guiding contact. An Officer Defensive Action Incident in Blue Team will be completed anytime a subject offers physical resistance to the officer.
- 2. If the subject complains of an injury from the application of handcuffs, an Officer Defensive Action Incident in Blue Team will be necessary to document that the handcuffs were checked and proper handcuffing procedures were followed.
- 3. Any time an officer uses force on a subject, however the subject escapes and remains unidentified, an Officer Defensive Action Incident in Blue Team is required to document the actions of the officer. The officer will complete the Officer Defensive Action Incident in Blue Team providing the best information possible as to the identity and actions of the subject.
- 4. A Defensive Action Report is required any time an officer actively points his or her weapon at another person
- 5. When any officer uses reportable force, the officer will notify a supervisor as soon as it is safe to do so. In the event the supervisor contacted is not the officer's regular supervisor, the supervisor that was contacted will review all reports and the incident in Blue Team. They will then forward the reports and the Blue Team Incident to the officer's regular Shift or Unit Commander in a timely manner.
- 6. Officers who use lethal force will not fill out a Defensive Action Report. These incidents will be investigated by the Officer Involved Critical Incident Team in accordance with General Order 50.13.
- 7. The supervisor who is notified will add comments to the Officer Defensive Action in Blue Team.
 - a. For patrol officers, the investigation will be completed by a sergeant or acting sergeant who will then add comments to the incident in Blue Team. For sergeants and detectives, a captain or acting captain will complete the investigation and add comments to the incident in Blue Team. For Captains, a major or acting major will complete the investigation and add comments in the incident in Blue Team.
 - b. Only one Supervisor investigation of the Officer Defensive Action Incident in Blue Team will be completed per incident. If officers from multiple divisions, units or of multiple ranks are involved in an incident, one supervisor or commander will complete the investigation and add comments to the Incident in Blue Team.
 - c. A supervisor will respond to every defensive action scene. An independent field investigation will include speaking with officers involved, any subjects on which force was used, and locating and interviewing witnesses as well as locating and recovering any pertinent video footage or other relevant evidence. The supervisor will enter his or her investigative findings in the comment section of the reporting officers' Officer Defensive Action Incident in Blue Team.
 - d. A Supervisor's Inquiry of Officer Defensive Action will not be completed for incidents that are investigated by the Officer Involved Critical Incident Team.

C. Video Evidence

- 1. Police Video Evidence. If a police use of force or defensive action is recorded on department video, the investigating supervisor will review the video as part of his or her investigation. This includes in-car video, body camera video, and any other video owned by the police department. The supervisor will also make appropriate notifications to insure the video is retained in the case file as evidence.
- 2. Private/Third party videos. If a use of force or defensive action is recorded on a third party camera system (such as a shopping mall, store camera, or cell phone), the investigating supervisor will attempt to review the video as part of the investigation and make arrangements for the department to get a copy of the video to include in the case file as evidence.

XVII.MANDATORY TRAINING AND CERTIFICATION

- A. No officer will be allowed to use or carry a firearm, or Departmental issued intermediate weapon until they have been instructed completely in the Department's use of force policy as outlined in this general order.
- B. Recertification with chemical agents and impact weapons will be conducted annually at in-service. Officers will not carry or utilize chemical agents or impact weapons without completing annual recertification training at in-service.
- C. Training and recertification with less lethal munitions and the Conducted Electrical Weapon will be conducted annually at in-service. No officer will accept, carry, or utilize less lethal munitions or a Conducted Electrical Weapon without successfully qualifying during annual in-service training.
- D. All officers shall train and successfully demonstrate the shoulder pin annually at in-service. This shall include a review of the policy as well as a demonstration of the technique.
- E. Officers will receive practical training in department approved defensive tactics, including empty-handed defensive tactics, at least every two years. This should be conducted at in-service training.

XVIII. TRACKING OFFICER DEFENSIVE ACTION INCIDENT IN BLUE TEAM

- A. Once the officer completes an Officer Defensive Action Incident in Blue Team, they will forward the incident via Blue Team to the supervisor that was notified. The supervisor that was contacted will document the supervisor's investigation pertaining to the defensive action in Blue Team. The report will then be forwarded in Blue Team to that officer's captain for review. The supervisor will CC both the records unit and Defensive Action Reporting, in Blue Team, when forwarding their findings to the officer's captain. Once completed and reviewed by the designated captain, the report will be forwarded to the IA Pro Database.
- B. The Commander who reviews the Officer Defensive Action Incident in Blue Team and the Supervisor's Inquiry will note his or her opinion concerning the incident in Blue Team. The commander will notate if the officers' actions were within department guidelines, the officers' actions were outside of guidelines, training needed consideration, policy change consideration, or other.
- C. The Police Academy Commander will assign an Academy staff member to review Officer Defensive Action Incidents and Supervisors' Defensive Action Reviews in Blue Team. If the staff member sees an item requiring immediate action, he or she will advise the Academy Commander and the Use of Force Coordinator.
- D. The Operations Office will maintain a record of Officer Defensive Action Incidents filed in Blue Team.
- E. The Use of Force Coordinator is responsible for ensuring that an annual analysis of use of force incidents is conducted. The report will address compliance with Department policies. It will also include training and policy recommendations.