

SAFETY AWARENESS WORKBOOK

*Anticipating, Identifying, and Resolving
the Potential Victimization of
Probation and Parole Officers*

Developed by:

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PREFACE

The National Institute of Corrections is a Federal agency established to provide assistance to strengthen state and local correctional agencies by creating more effective, humane, safe and just correctional services.

The writer of this training workbook provided on site technical assistance on a contractual basis, at the request of specific agencies, and through the coordination of the National Institute of Corrections. The direct on site assistance and this workbook are intended to assist agencies in efforts to enhance the effectiveness of their agency.

This workbook was written based on literature in the field, academicians, agency materials received from practitioners, and trainers from around the country. The contents of this document reflect the views and research of the writer. The contents do not necessarily reflect the official views or policies of the National Institute of Corrections.

The writer especially acknowledges J. Richard Faulkner, Jr. for creating a national awareness for officer safety in community corrections; William H. Parsonage for his research in probation worker victimization; R. Scott Schlechter, colleague and trainer under Police S.A.F.E.T.Y. Systems; John Desmedt for the *Use of Force Model* and a dynamic defensive tactics program; and, Nancy Gahl for her strength and inspiration.

Dedication

*To U.S. Probation Officer
Thomas E. Gahl
and all those officers
whose death has taught us
the importance of safety awareness,
survival and training.*

INSTRUCTORS

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1

INTRODUCTION

In a survey conducted of county, state and federal probation and parole jurisdictions, a 43% response rate, found that 14 probation/parole officers had been killed and 7 had been raped since 1980.¹ Given these statistics and the increased potentiality for officer victimization, *safety awareness training* must become mandatory training for new and tenured officers.

It has been said that many people learn from their mistakes but only a wise person learns from the mistakes of others. The content of much of this training, is based on actual experiences of many law enforcement officers. This training will often present *worse case scenarios*. In theory, if one can anticipate, be prepared, plan and properly react in life threatening situations, one should be able to adapt to situations of lesser potential for serious victimization. Concurrently, we must discern the fact that no two situations are the same and not all tactics work all of the time.

Realize that officer safety is foremost a state of mind. It is more than a cognitive issue because of its significant emotional ramifications. Many will listen, learn, adjust their mental attitudes. Many will think and apply tactics. In contrast, many may find the material and training inappropriate, creating paranoia or find it in conflict to what they perceive a community correction's philosophy, mission and practice should be. Let us not give credibility to this training only after a yellow, brown or red stain has emanated from our bodies'. This training and workbook seeks only to sophisticate one's common sense by making safety a decision and an instinctual action. Hopefully, the awareness created during this training will create a commitment to safety and survival.

¹ Thornton, Robert *New Approaches To Staff Safety*. U.S. Department of Justice, National Institute of Corrections, 1994.

▶ STRATEGIC CHALLENGE

To deal effectively with clients, you are required to maintain in close and continuous contact with them and often on their own turf. Although you must be prepared, you cannot adopt an overly defensive posture of extreme caution and still perform your mission with a personal and helpful philosophy.'

▶ PROBLEM STATEMENT

The consequences of actions that officers take in the performance of their duties are measurable in the results of those actions. Many times an officer's duties are strictly routine and require only a minimal amount of preparedness, awareness and energy to accomplish. Prolonged and routine cooperation and compliance by subjects can cause officers to adopt an expectation of non-resistance that leaves them completely unprepared for [dangerous situations], determined or violent assault. This problem is very real; it always exists even if not collectively or individually recognized by officers and administrators?

▶ TRAINING GOALS

- Enhance staff safety: anticipating identifying and resolving threat situations.
- Analyze sensory and environmental cues.
- Develop prevention, crisis management and control techniques.
- Learn emergency responses and how to apply them if necessary.

² James Lindell as quoted in *Speedcuffing, A Tactical Handcuffing System*, John Desmedt and James Marsh, The Police S.A.F.E.T.Y., Great Falls, Virginia, 1983.

³ Ibid. [] additions made to quote.

2.

WORKER SAFETY IN PROBATION AND PAROLE

OBJECTIVE: Create awareness to potentialities and the range of possible dangers that an officer may face.

▶ VICTIMIZATION

VICTIMIZATION is defined as:

" . . . ANY VIOLENCE, THREAT OF VIOLENCE, INTIMIDATION, EXTORTION, THEFT OF PROPERTY, DAMAGE TO ONE'S REPUTATION OR ANY OTHER ACT WHICH INFLECTS DAMAGE, INSTILLS FEAR, OR THREATENS ONE'S SENSIBILITIES."

- *William Parsonage*

When examining the subject of victimization, it is critical to understand that victimization is self-perceived; not other perceived. If someone feels that they have been victimized; they have been. How the event is interpreted by the victimized officer is what is important. Another person's interpretation of the act is not consequential.

Until the research of William H. Parsonage, a professor at Pennsylvania State University, probation workers have not been thought of as a *victim*. Many have proffered that probation and parole workers knew what they were getting into or, because in the conduct of their jobs they are expected to deal with potentially dangerous people and situations. By virtue of the aforementioned definition of victimization, and in spite of the nature of the job, they are as much a victim as anyone.

The ensuing victimization data illustrates the degree, assailant, location and context of victimization of probation and parole workers.

⁴ Parsonage, William H. and W. Conway Bushey, 'The Victimization of Pennsylvania Probation and Parole Workers in the Line of Duty,' A Survey, The Pennsylvania State University, 1988.

▶ CAREER VICTIMIZATION RATES

Fig. 1: National Snapshot: Career Victimization Rates

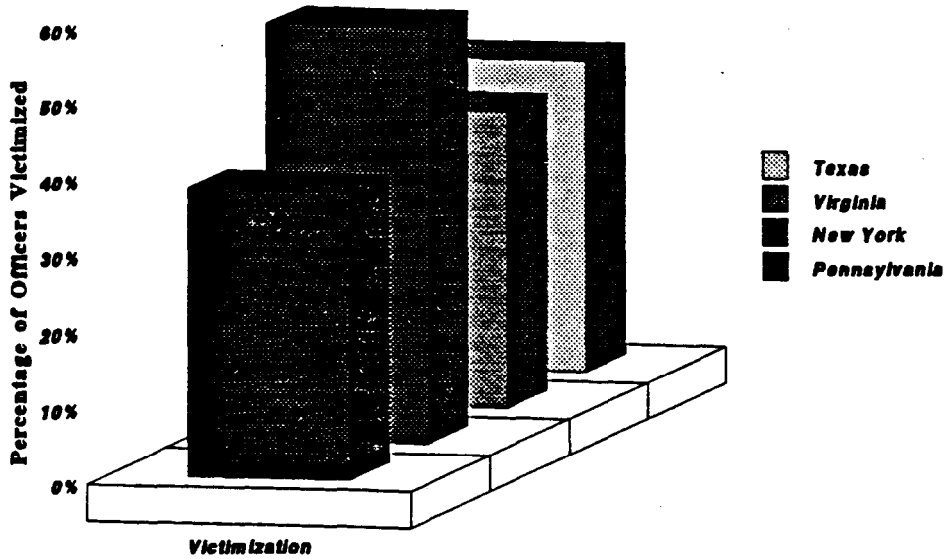


Table 1. National Snapshot: Percent of Officers Victimized in Their Career (1989)⁵

State	Number
Texas Board of Pardons and Parole	41%
Virginia Division of Probation and Parole	39%
New York State Probation	55%
Pennsylvania Statewide Survey	38%

⁵ Parsonage, William H., *Worker Safety in Probation and Parole*, U.S. Department of Justice, National Institute of Corrections, 1990.

Fig. 2: Middle Atlantic States Correctional Association (1990)

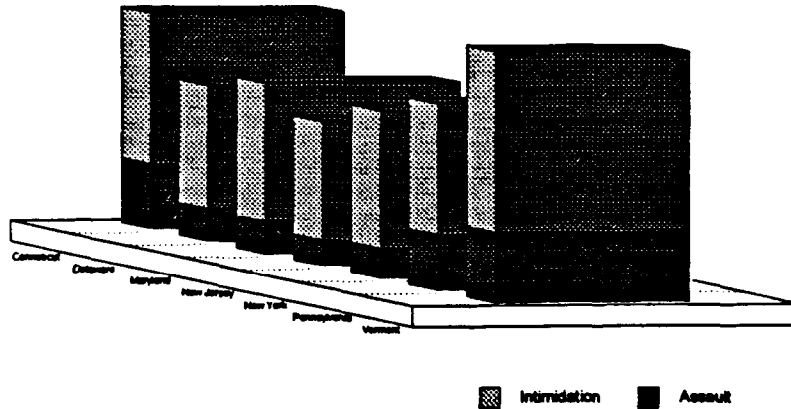


Table 2. Percent of Officers Victimized in Their Career:
Middle Atlantic States Correctional Association (1990)⁶

Incidents	CT	DE	MD	NJ	NY	PA	VT
Career Victim Rates	71%	59%	65%	56%	65%	62%	84%
Assault	30%	15%	15%	12%	14%	26%	33%
Intimidation	70%	57%	64%	55%	64%	61%	84%

⁶ Parsonage, William H. And Joseph A Miller, *A Study of Probation and Parole Worker Safety in the Middle Atlantic Region*, Middle Atlantic States Correctional Association (MASCA), 1990.

▶ **ASSAILANTS**

Fig. 3: Federal Probation Study (1984/1985)

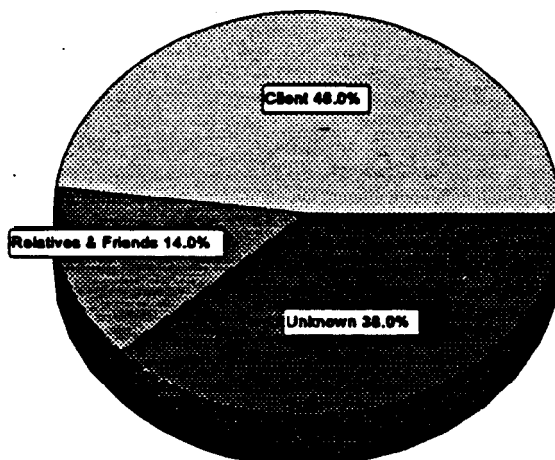


Table 3. Federal Probation Study of Assaultants (1984/1985)⁷

Client	Relatives and Friends	Unknown
48%	14%	38%

⁷ Reported incidents to Administrative Office of Federal Probation between July 1984 through June 1985, "Staff Safety Training Program, Federal Judicial Center, Staff Safety Curriculum Planning Committee, 1986.

Fig. 4: MASCA Study of Assailants

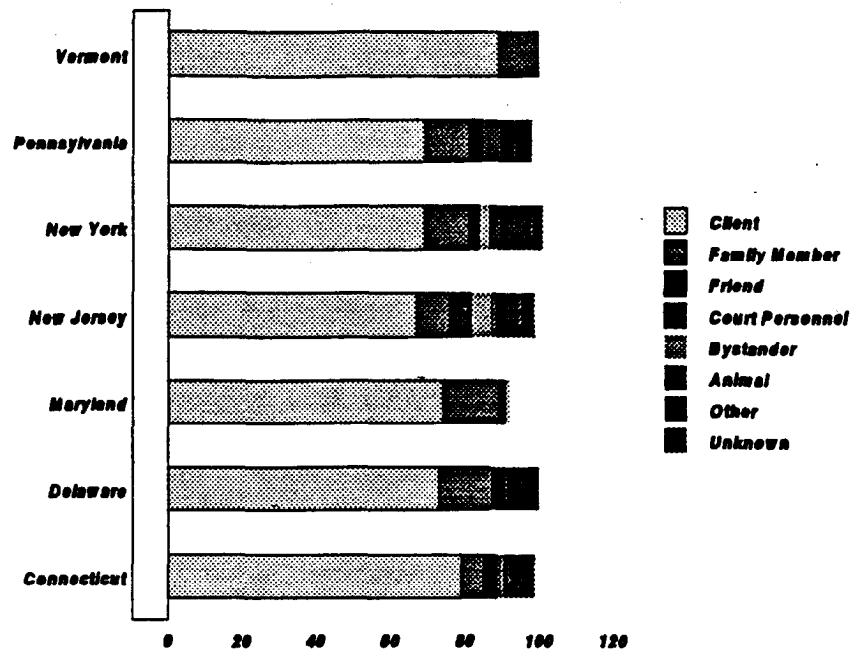


TABLE 4. Middle Atlantic States Correctional Association Study of Assailants (1990)⁸

Assailant	CT	DE	MD	NJ	NY	PA	VT
Client	79%	73%	74%	67%	69%	69%	89%
Family Member	6%	14%	15%	9%	12%	12%	11%
Friend	4%	0%	2%	5%	2%	4%	0%
Court Personnel	0%	0%	0%	1%	1%	0%	0%
Bystander	0%	0%	1%	5%	2%	0%	0%
Animal	1%	0%	0%	1%	3%	4%	0%
Other	2%	4%	0%	7%	9%	4%	0%
Unknown	7%	9%	0%	4%	3%	5%	0%

⁸

Parsonage and Miller, *op. cit.*

▶ LOCATION

Fig. 5: Federal Probation Study of Locations

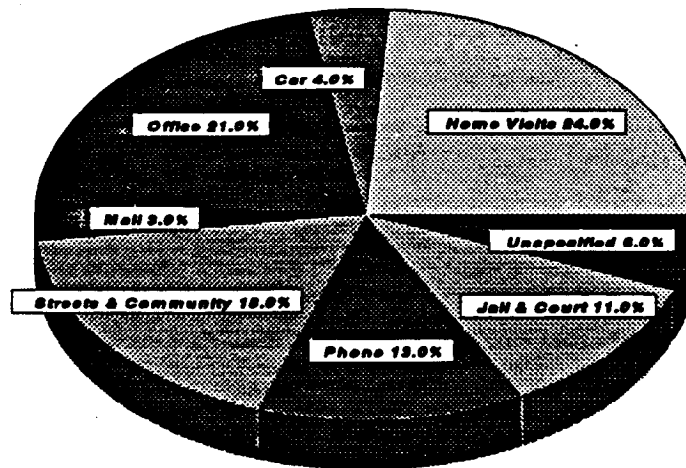


TABLE 5. Federal Probation Study of Locations (1984/1985)⁹

Location	Percentage
Home Visits	24%
Office	21%
Streets and Community	18%
Phone	13%
Jail/Court	11%
Car	4%
Mail	3%
Unspecified	6%

⁹ Reported incidents to Administrative Office of Federal Probation between July 1984 through June 1985, "Staff Safety Training Program, Federal Judicial Center, Staff Safety Curriculum Planning Committee, 1986.

Fig. 6: Kutztown University Survey

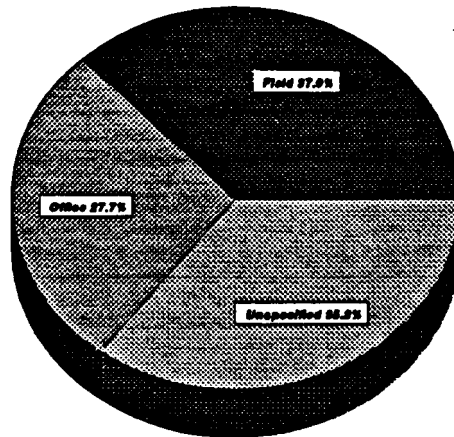


TABLE 6. Kutztown University Survey of Locations in Pennsylvania (1987)¹⁰

Field	Office	Unspecified
37%	28%	35%

¹⁰ Renzema, Mark, "The Dangers of Probation Work A Progress Report on an Exploratory Survey," Kutztown University, 1987.

Fig. 7: MASCA Study of Locations

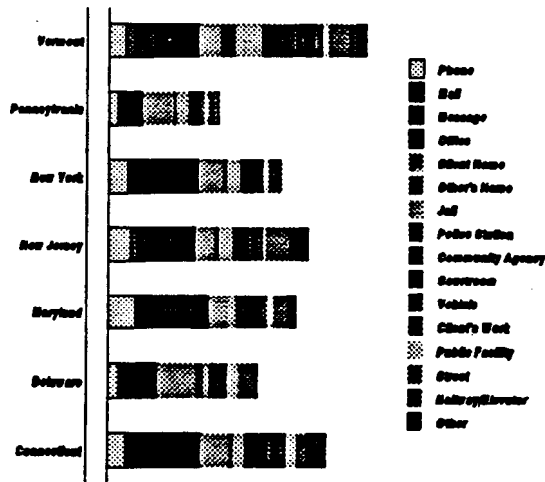


TABLE 7. Middle Atlantic States Correctional Association Study of locations (1990)

Location	CT	DE	MD	NJ	NY	PA	VT
Phone	16%	9%	24%	20%	17%	8%	15%
Letter or Mail	1%	0%	3%	6%	3%	1%	7%
Message by Other	14%	9%	9%	9%	11%	3%	18%
Office	53%	27%	55%	43%	50%	19%	41%
Client's Home	24%	32%	14%	15%	21%	26%	18%
Another's Home	4%	9%	2%	6%	4%	4%	15%
Prison or Jail	10%	4%	7%	12%	11%	10%	22%
Police Station	4%	4%	0%	4%	2%	0%	30%
Service Agency	6%	0%	7%	3%	6%	2%	7%
Courtroom	12%	4%	17%	8%	6%	9%	11%
In Vehicle	12%	0%	4%	9%	5%	2%	7%
Client's Work Site	4%	9%	1%	3%	2%	1%	0%
Public Facility	8%	9%	4%	2%	4%	3%	4%
On the Street	8%	14%	11%	20%	13%	8%	18%
Hallway/Elevator	12%	0%	2%	10%	0%	1%	7%
Other Location	8%	4%	8%	9%	0%	2%	11%

► **CONTEXT**

Fig. 8: MASCA Study of Context



TABLE 8. Middle Atlantic States Correctional Association Study on the Context for Most Serious Victimization (1990)¹²

Context	CT	DE	MD	NJ	NY	PA	VT
Announced Visits	32%	32%	50%	35%	41%	20%	33%
Surprise Visits	37%	45%	25%	37%	30%	15%	30%
Offender Arrest	24%	41%	4%	11%	14%	18%	22%
Other Arrest	0%	9%	4%	3%	2%	7%	4%
Offender Call for Help	9%	4%	13%	11%	11%	6%	11%
Family Call for Help	12%	9%	10%	8%	9%	2%	18%
Domestic Dispute	16%	4%	3%	8%	10%	2%	7%
Offender Transport	14%	9%	6%	7%	5%	9%	7%
Other Context	30%	24%	32%	37%	38%	22%	50%

¹² Parsonage and Miller, *op. cit.*

▶ STREET FACTS ¹³

- Nothing is *routine*.
- No two *situations* are ever exactly alike.
- *Behavior* is not predictable.
- The only predictable is *the unpredictable*.
- Each step of the way you must consider *opportunities* the a subject might have to injure you.
- Whenever possible you want to cultivate *tactics* for the unexpected.
- Whether attacks and assaults are elaborately or hastily planned, or are the result of an *impulsive* act, it can be carried out without difficulty, or time consuming and complex preparation.
- No special *skills* are required.
- The *means* and *opportunity* to carry out an attack and assault against you generally are readily at hand.
- There are no predictable recurring patterns of physical behavior or physical circumstances that can be *identified* and *isolated* as *reliable indications* of an assailant personality or provocation for an attack.
- Almost anyone, male or female, young or old, intelligent or stupid, can *successfully* attack and assault you.
- Most attacks are conceived and executed by subjects who are generally acting *alone* and without ties to criminal or deviant groups.
- An assailant can decide when, where and whom to attack, on grounds that are purely selfish or totally *irrational* and discriminate.
- In most instances, a subject may do so out of panic, desperation, confusion, anger, fear,

¹³ "Ambush Attacks," Police Weapons Center, LEAA, U.S. Department of Justice, Research Division of the International Chiefs of Police, 1974.

derangement, exasperation, revenge, intoxication, hallucination, political zeal, suicidal yearning, or. . . .

- Times, places, configurations and methods of attacks and assaults do not frequently evidence any readily suggested common *denominators*.
- Attacks and assaults can *be* carried out *by straight forward visible approach* or by a *hidden and inconspicuous ambush*.
- The method of the assault can be by *corporal strike* or *by a dangerous or deadly weapon*.
- Weapons can be easily *hidden* on or about the person.
- *Suitable weapons* can be procured from anything.

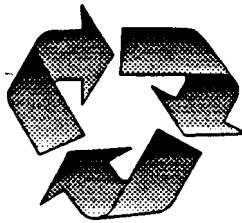
3 MENTAL ATTITUDES

OBJECTIVE: Assess and determine officers' attitudes and "survival state of mind."

▶ **ROLE CONFLICT CONTINUUM**

COURT

CLIENT



COMMUNITY

Where would you place yourself?

Police Officer

Social Worker



▶ WHY OFFICERS UNDER-REACT”

- Failure to understand the *dynamics* of confrontations.
- Failure to *be mentally prepared*.
- Failure to *receive* training,
- Failure to *believe* in training.
- Failure to believe in their *ability*.
- *Mythical Thinking*.
- *Inhibition*.
- *Moral Repulsion*.

• FATAL TENDENCIES¹⁵

- Act without *waiting for backup*.
- Rely heavily on *reading* people.
- Drop guard when *good* is perceived.
- *Unbalanced* Public Relations/Service orientation.
- *Shortcut* rules and procedures.
- Use *less* force than peers.
- Use force *later* than peers.

¹⁴ Adams, Ronald J., Thomas M. McTeman and Charles Remsberg. *Street Survival: Tactics for Armed Encounters*. Calibre Press, Inc: Northbrook, Illinois (1986 ed.), 1980.

Remsberg, Charles. *The Tactical Edge: Surviving High Risk Patrol*. Calibre Press, Inc: Northbrook, Illinois (1993 ed.), 1986.

¹⁵ I b i d .

4

SURVIVAL SENSITIVITY

OBJECTIVE: Increase officers' survival sensitive.

▶ TRIAGE

TRIAGE is a french word meaning: *PICKING, SORTING, CHOOSING.*

Triage is designed to affect the way you
prepare, plan and react
to keep you alive in real situations.

They fall into two categories:"

- Those that will help you *prevent* risky situations from *escalating* into life threatening encounters; and,
- Those that can help you *survive*, if despite your best efforts, violence does erupt.

Most triage techniques:

- Are simple and based upon *common sense*; however, they require *extensive use and application* to be successful.
- They must become *honed in, natural and reflexive* for under stress, in a crisis, you will instinctively revert to the way you have been trained.

With a triage orientation, you keep firmly planted in your mind
that you are always approaching a situation
anticipatinga dangerous situation."

16 Adams, McTeman and Remsberg, *op. cit*

17 Ibid.

▶ SURVIVAL STATE OF MIND¹⁸

- First step in surviving on the job is to adjust *mental attitudes*.
- You must remind yourself repeatedly that probation is a *hazardous* occupation, demanding your constant vigilance.
- A subject's background, attitudes, motivation, willingness to reason and inclination for *aggressive and violent behavior* may be quite different from yours.
- There are legal, moral and psychological implications that must be *anticipated* and *personally resolved*.
- You must operate at a heightened *sensory and intuitive level*.

▶ REACTION BALANCE¹⁹

OVER-REACTING

- Taking more action than necessary.
- Over extending beyond your capabilities.
- Rushing up on dangerous situations or people.
- Rushing into threat locations.
- Acting on impulse.

UNDER-REACTING

- Not taking enough action.
- Underestimating your adversary (misread capability)
- Exhibiting carelessness.
- Giving into complacency.
- Refusing to make a decision.

¹⁸ Adams, McTernan and Remsberg, op. cit.

¹⁹ Ibid.

▶ **ADRENALINE DUMP REACTION²⁰**

- New or dangerous situations trigger the "fight or flight" response.
- Whether you face real or imaginary fear, physical danger, or emotional stress, the reaction is the same.
- Stressful reactions will cause adrenaline dump, thus speeding up the cardiovascular system.
- Adrenaline dump becomes energy.
- Your pulse quickens.
- You muscles tense.
- The resulting rush of adrenaline equips you for any extra effort you might need.

▶ **AWARENESS CODE SYSTEM²¹**

- Condition WHITE
- Condition YELLOW
- Condition ORANGE
- Condition RED
- Condition BLACK

²⁰ Desmedt, John, Police S.A.F.E.T.Y. Systems, Inc., 1989, as instructed by R. Scott Schlechter, Assistant Examiner, Police S.A.F.E.T.Y. Systems.

²¹ Cooper, Jeff, *Principles of Personal Defense*, Paladin Press: Boulder, Colorado, 1972.

▶ **STREET SURVIVAL²²**

STREET SURVIVAL is the:

Realistic anticipation of threats that may arise;
and, developing options for preventing or resolving those threats safely.

▶ **PROPER ACTION REQUIREMENTS²³**

- Remaining *alert*;
- Being *decisive*, and,
- Having a planned and *practiced response* in mind.

The difference between
paranoia and awareness
is
CONTROL.

²² Adams, McTernan and Remsberg, *op. cit.*

²³ *Ibid.*

▶ AWARENESS MODEL²⁴

- P repare
- O bserve
- L imitations
- I solate
- C ontrol
- E vacuate

²⁴ Desmedt, John and James Marsh, *Speedcuffing, A Tactical Handcuffing System*, The Police S.A.F.E.T.Y. System: Grand Falls, Virginia, 1983.

5 FORCE

OBJECTIVE: Examine the Use of Force.

▶ **FORCE DEFINITION**

FORCE is the means by which you get people to:

Force is the means by which
you get people to stop doing what they want to do
but you don't want them to do ...
and start doing what you want them to do
but they may not want to.

▶ **PURPOSE OF FORCE**

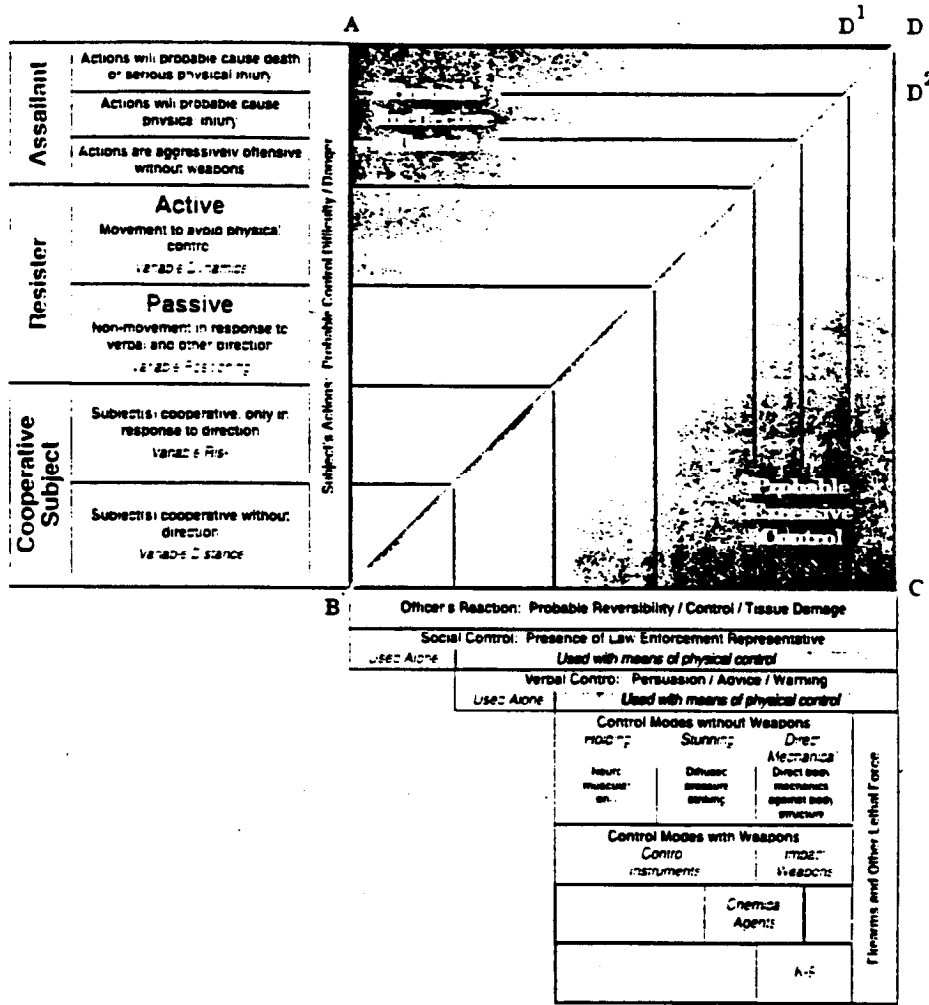
The *PURPOSE* of any level of force is:

CONTROL
and
Maintaining
a Position of
Advantage

USE OF FORCE MODEL²⁵

Use of Force Model

The Use of Force Paradigm for Enforcement and Corrections



Copyright 1982, 1990, John C. Desmedt & James F. Marz

All rights reserved

The Use of Force Paradigm for Enforcement and Corrections

²⁵ Desmedt, John, *The Use of Force Paradigm for Enforcement and Corrections*, The Police S.A.F.E.T.Y. System, 1982, 1990.

▶ **USE OF FORCE TEST²⁶**

What force would a
reasonable officer at the scene
have used under the circumstances?

▶ **USE OF FORCE CONSIDERATIONS²⁷**

- Your need for split-second decision-making.
- Severity of the crime involved.
- Subject's immediate threat to safety.
- Subject's active resistance or attempt to escape.
- Adapting readiness of position in correlation to subject's resistance level.
- If a technique is not working and you can't control the subject, you can always escalate or disengage.

▶ **REASONABLE CONTROL GUIDELINES**

- Match your force to their resistance.
- Correctly apply techniques and equipment appropriate to that force level.
- Apply alternative options if your tactics fail to establish control.

²⁶ Graham v. Connor, 109 S. Ct. 1865 (1989).

²⁷ Adams, McTernan and Remsberg, op. cit.

▶ DEFINITION OF DEADLY FORCE²⁸

Force which, under the circumstances in which it is used, is readily capable of causing death or serious bodily injury.

▶ SERIOUS BODILY INJURY²⁹

- Gaping or open gash or wound (severe tissue damage).
- Major broken bones.
- Damage to internal organs.

▶ REQUIREMENTS FOR RIGHTEOUS DEADLY FORCE³⁰

- Accurately *assessing* subject's immanent potential for attacking in a *life threatening manner*.
- Persuasively *articulating* why you feared for your life (or someone else's) when you took action.

²⁸ Derived from Section 3.11 of the *Model Penal Code*, American Law Institute (1962), and the Joint State Government Commission's (1967) definition of *Deadly Force*.

²⁹ Desmedt, *op. cit.*

³⁰ Cooper, *op. cit.*

▶ **ATTACK POTENTIAL³¹**

All four elements must immediately be present:

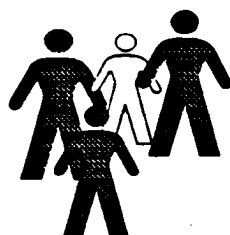
- Intent: *the means to place someone in jeopardy.*
- Weapon: *possessing or having the ability to possess a weapon; reasonable perception of threat.*
- Delivery System: *opportunity.*
- Target: *yourself or another.*

▶ **RESPONSE CONSIDERATIONS³²**

- Preclusion
- Target Identification
- Target Isolation



Can you identify the subject that shot at you?



Do you have a safe background and subject isolation to return fire safely?

³¹ Cooper, *op. cit.*

³² Ibid.

▶ **LIABILITY TEST POINTS**

LEVEL I CASE

- Focuses on the *circumstances* existing at the moment force is used.³³

LEVEL II CASE

- Focuses on the *tactics* that may have caused a deadly force decision to become necessary.³⁴

▶ **DEFENSE OF LIFE RULE**

The use of deadly force only in those circumstances in which a person cannot safely disengage and where deadly force is required to stop and render a person incapable of continuing life threatening actions.

§ 5:21. **Deadly Force Policy**

- | | |
|--|---|
| <p>a. The use of deadly force by officers shall be strictly limited to defensive situations.</p> <p>b. An officer may use deadly force only to defend himself/herself or another person from what the officer perceives as an immediate threat of death or serious bodily injury and when there appears to be no other alternative.</p> <p>c. Officers shall exhaust every means available to disengage safely or by every other reasonable means of defense of themselves or others from death or serious bodily injury before the use of deadly force is contemplated.</p> <p>d. When the use of deadly force is justified, officers discharging weapons shall not shoot to kill nor shoot to wound, but rather to stop the action by causing the instant incapacitation of the subject.</p> | <p>For maximum stopping effectiveness and to minimize the danger to innocent bystanders, officers should shoot at "center body mass".</p> <p>e. Firearms shall not be drawn or displayed routinely during arrests, nor should they be used for any other reason other than as described above.</p> <p>f. Officers shall not utilize deadly force in an offensive posture to effect the apprehension of those persons who commit violations of probation or parole, or any other law amounting to summary, misdemeanor or felony offenses, which do not present the threat of death or serious bodily injury. Nothing contained in this paragraph shall preclude the use of deadly force for self-defense, when warranted.</p> |
|--|---|

© Lehigh County (PA) Adult Probation and Parole
Department Manual of Operations, 1993.

³³ You think a subject is drawing a gun. You shoot. The subject is unarmed. Reese v. Anderson, 926 F.2d 494 (5th Cir. 1991).

³⁴ You misjudge a threat and shoot a subject. The subject blames your approach tactics for "recklessly" creating a dangerous situation. Greenridge v. Ruffin, 927 F.2d 789 (4th Cir. 1991).

Question (True or False)

To keep an assailant from using deadly force against me, I *shoot to kill*?

Answer: FALSE.

Question

If an attorney asks you:

"Officer, did you shoot with the intention of killing?"

Answer: No. My sole purpose was to stop him. I needed to make him incapable of continuing his life threatening actions.

You shoot to stop; incapacitate.

▶ TRAINING CONSIDERATIONS

- Relevant
- Recent
- Realistic
- Dynamic

Officers have a 97% average hit rate against paper targets. They have only an average 18% rate against real life adversaries.

- *Thin Blue Line Magazine (1990)*

▶ LIABILITIES FOR INADEQUATE TRAINING

Popow v. Margate, 476 F Supp. 1237, 1246 (1979)

The court found "a complete failure to train" because (among other things) the accused agency did not provide instruction on shooting at moving targets...night shooting...shooting in residential areas...or any experience films or simulations designed to teach the practical application of deadly force decision-making.

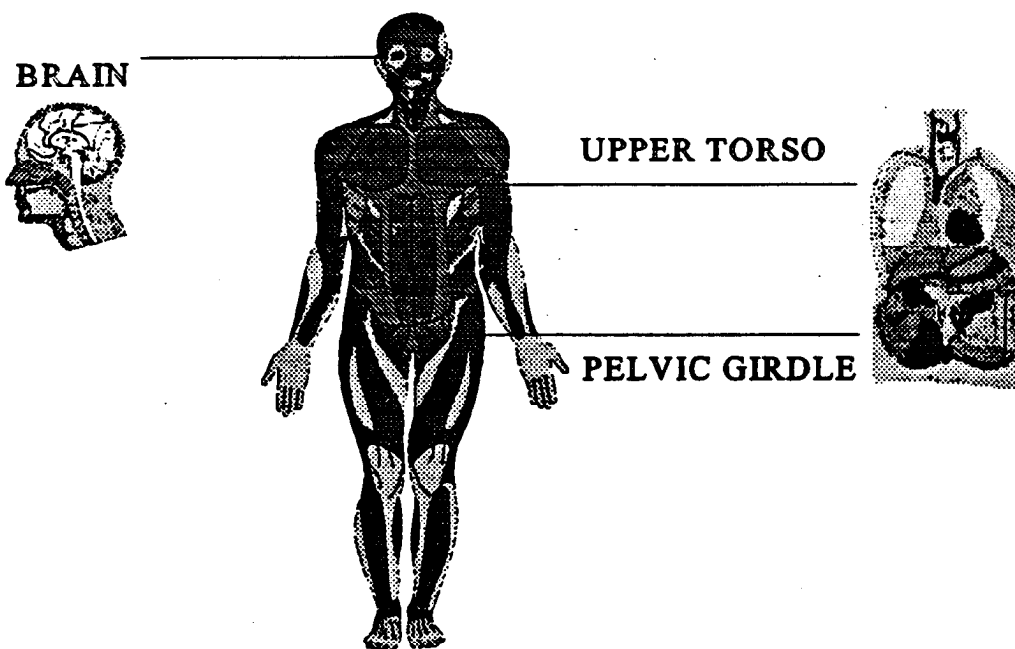
City of Canton v. Harris, 109 S. Ct. 1197 (1989)

The court ruled that inadequate training in the use of deadly force serves to establish an official policy of indifference, exposing the employer to severe liability risks.

▶ **SUCCESSFUL DELIVERING OF DEADLY FORCE³⁵**

- Be prepared to face someone who will act aggressively against your threat and ignore his wounds.
- Generally, *WHERE* you hit (placement, penetration and what you destroy) is more important than what you hit with.
- Rounds are likeliest to be effective, if delivered to *Center Mass; the center of the largest critical area available to you.*
- To hit in a critical area requires an accurate and reliable handgun, and a high degree of shooting skill.
- Effective wounding requires a large permanent cavity, deep penetration and multiple hits.

▶ **TARGET PRIORITY**



³⁵

Deadly Effects: Wound Ballistics, Anite Productions: Pinole, California (1991), 1987; *Police Handgun Ammunition: Incapacitation Effect, Volume II: Experimental Data*, National Institute of Justice Report 101-83.

▶ **MULTIPLE HITS**

QUESTION

Is one shot realistic?

ANSWER: - NO.

QUESTION

If an attorney asks you:

“Officer, why did you keep on shooting after you already hit him once (two or five times)?”

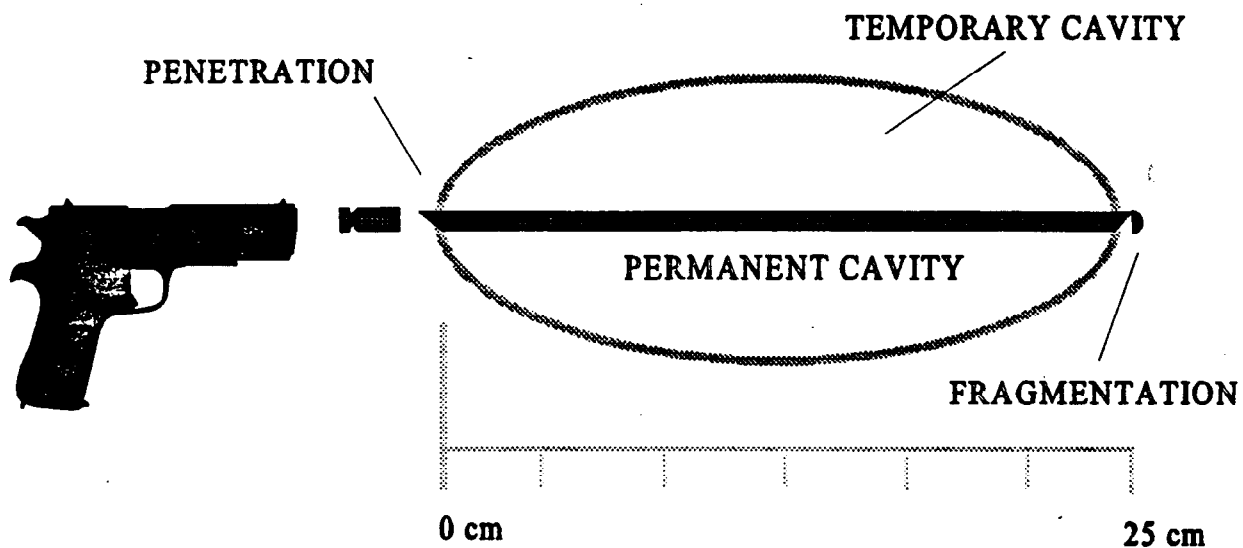
ANSWER: I continued shooting until he ceased to be a threat to my safety (or safety of others). I stopped when I felt my life was no longer in danger.

The best way to buy time
in an armed confrontation is
SHIELDING.

▶ **WOUND CREATION**³⁶

EFFECTIVE INCAPACITATION requires:

- A large *permanent cavity* (big bullet diameter or reliable expanding bullet).
- *Deep penetration* (35 cm or 14" minimum).
 - 125 grain minimum weight; below is not effective.
 - 110 grain has shown forensic penetration of 3".



³⁶

Deadly Effects: Wound Ballistics, "op. cit.

6

SYMPTOMATOLOGY ASSOCIATED WITH POTENTIALLY DANGEROUS SUBJECTS

OBJECTIVE: Recognize and determine overt and subtle symptomatology associated with potentially dangerous situations and subjects.

▶ GENERAL CHARACTERISTICS³⁷

- | | |
|--|---|
| <ul style="list-style-type: none"> • 30% Vocal Cue <ul style="list-style-type: none"> - 7% <i>what</i> is said. - 93% <i>how</i> it is said. | <ul style="list-style-type: none"> • 55% Facial Gesticulation • 15% All Other |
|--|---|

▶ SIGNS OF AGGRESSION, POSSIBLE RESISTANCE OR ATTACK³⁸

- | | |
|---|---|
| <ul style="list-style-type: none"> • <i>Conspicuous ignoring</i> • <i>Repetitious questioning</i> • <i>Looking around</i> • <i>Excessive emotional attention</i> • <i>Exaggerated movement</i> • <i>Ceasing all movement</i>
 • <i>Physical crowding</i> • <i>Assuming a pre-attack posture</i> • <i>Palming</i> • <i>Target glancing</i> • <i>Need to escape</i> | <p>First stage of resistance/ draw you in.
Intimidate or buy time.
Intimidate or buy time.
May compel an officer to over-react.
Exhibits excited movement and gestures.
Folding arms at chest, higher level of resistance.
Closing distance; within two arms length.
Strong side back; bladed position.
Non-extension of fingers and thumb.
Probable strike area.
Fight then flight</p> |
|---|---|

³⁷ Staff Safety Training Program, Federal Judicial Center, Staff Safety Training Curriculum Planning Committee, 1986.

³⁸ Desmedt, *op. cit.*

▶ PROGRESSIVE STAGES OF CRISIS³⁹

FIRST STAGE: PASSIVE-AGGRESSIVE

VERBAL CUES

- Conspicuous ignoring
- Periods of silence and retorts; i.e., "I already told you that."
- Slightly increased voice volume.
- Still logical, but questioning; somewhat defiant; i.e., "I don't see why you want me to do that."
- Repetitious questioning.

NON-VERBAL CUES

- Unique to each individual and environment.
- Looking around.
- Eye contact may be intermittent.

SECOND STAGE: REFUSAL

VERBAL CUES

- Excessive emotional attention.
- Overt resistance to directions or orders; i.e., "I won't do that!"
- Direct challenges to authority; i.e., "Who do you think you are?"
- Challenging you to assert yourself; i.e., "Make me!"
- Logic and objectivity lost; emotional statements; i.e., "You're just picking on me!"

NON-VERBAL CUES

- Exhibits excited and exaggerated movement.
- Overt physical movement; hand gestures, will get in your face.
- Increased voice volume, inflection.
- Use of four letter words.

THIRD STAGE: BLUFF SIGNS

VERBAL CUES

- Many verbal threats against officers come at this stage.
- Males tend to show more bluff signs.
- Females may be quicker to escalate to the next stage.
- Open hostilities and four letter words.
- Loud verbal responses.
- Usual verbal release will last 15 to 18 seconds.

NON-VERBAL CUES

- Red and flushed facial color.
- Throwing objects; not necessarily at you.
- Distance enhancing signs; i.e., waving arms, backing away, leaving the room.

FOURTH STAGE: DANGER SIGNS	
VERBAL CUES	NON-VERBAL CUES
<ul style="list-style-type: none">• Often very few.• Not thinking clearly.• Responses can be defensive, aggressive, irritable or impulsive.• Quiet, quiescent; but don't mistake this for submission.	<ul style="list-style-type: none">• Tight white lips, mouth slightly open.• Body flexed, arms cocked.• Target glancing.• Ceasing all movement; arms folded high at chest.• Physical crowding; closing distance.• Fixed stare; often at strike area.• Fighting stance; squaring-off towards you.• Palming• Toes pointed outward.• If subjects leaves, likely to return.• Need to escape, fight then flight.

▶ **TYPES OF AN EMOTIONALLY DISTURBED PERSON (EDP)**

- *Long-term* Chronically mentally ill.
- *Chemical-abuser* Under the influence of a drug and/or alcohol.
- *Short-term* Episodic, temporarily out of control.

▶ **BEHAVIORAL CHARACTERISTICS OF EDP**

- All categories of EDPs are human powder kegs.
- Withdrawal from reality.
- Feelings of suspicion, defensiveness or persecution.
- Fearful or violent hallucinations/delusions.
- Resentment or fear of authority.
- Distorted self-image (i.e., god or superman).
- Exaggerated need to "right wrongs." (Not a crusade.)
- Ability to change behavior rapidly.

7

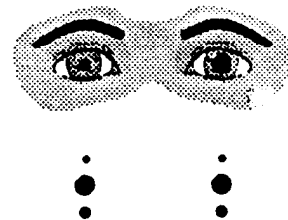
DRUG PHARMACOLOGY AND SYMPTOMATOLOGY

OBJECTIVE: Recognize and determine overt and subtle symptomatology associated with subjects under the influence of chemicals.

▶ **GENERAL INDICATIONS⁴⁰**

EYES

- Very large (dilated) or extremely small (pinpoint) pupils.
- Bloodshot
- Watery
- Red-rimmed.



SKIN

- Injection tracks.
- Scars.
- Sores.



ODOR

- Body odor.
- Bad breath.

BODY TEMPERATURE

- Subject's core body temperature inconsistent with environmental temperature.

⁴⁰ O'Neill, John F. And Thomas C. Vellela, *Pharmacology and Addiction*, Pennsylvania Department of Health, Office of Drug and Alcohol Programs, 1986; *Common Drugs and Narcotics*, Education Aids of Long Beach: Long Beach, California, 1970.

▶ **MAJOR RULES⁴¹**

- When coming into contact with drugs or drug addicts; use gloves.
- Do not handle any substance if you do not know what it is without gloves.
- DO NOT test drugs by putting them in your mouth.

▶ **SEDATIVE HYPNOTICS (Central Nervous System Depressants)⁴²**

CLASSIFICATION

- Sedative, tranquilizer, hypnotic or anesthetic (i.e., barbiturates, methaqualone)

PHARMACOLOGICAL EFFECTS

- Ataxia (staggering)
- Loss of motor coordination
- Interference with sleep
- Drowsiness
- Impaired performance and judgement
- Subtle alterations of judgement, motor skills and behavior which may persist for hours or day
- Decreases in blood pressure and heart rate; and/or depression

PHYSICAL EFFECTS

- Slurred speech
- Staggering
- Wobbling

PSYCHOLOGICAL EFFECTS

- Irrational
- Suicide tendencies.
- Loss of memory
- Quarrelsome
- Confusion

WITHDRAWAL

- Rebound of sleep
- At high dosages; convulsions, hallucinations and even death.

⁴¹ Aleman, Omar, D.E.A. Special Agent, training guidelines.

⁴² O'Neill and Vellela, op. cit.

▶ NARCOTICS (Opiates)⁴³

CLASSIFICATION

- Opium, heroine, dilaudid, percodan, morphine.

PHARMACOLOGICAL EFFECTS

- Sedation, constipation, decreased respiration rate, pinpoint pupils.
- Euphoria, feelings of warmth, well-being, peacefulness, contentment, and/or dreamlike state.

PHYSICAL EFFECTS

- Physically depressed.
- Blunts senses.
- Craves sweets.

PSYCHOLOGICAL EFFECTS

- Mentally depressed.
- Stupor.

WITHDRAWAL

- Similar to a severe case of the flu; may last 4 to 7 days.
- Restlessness, craving for drug, sweating, extreme anxiety, fever, chills, retching and vomiting, increased respiratory rate (panting), cramping, insomnia, explosive diarrhea, aches and pains.
- Violent behavior.

▶ CENTRAL NERVOUS SYSTEM STIMULANTS⁴⁴

CLASSIFICATION

- Amphetamines, cocaine, caffeine, phenylpropanolamine.

PHARMACOLOGICAL EFFECTS

- Elevate mood, induce euphoria, increase alertness, reduce fatigue.
- High dosage: irritability, anxiety and possible psychotic behavior.
- Low dosage: stress response, fight and flight.
- Moderate dosage: stimulate respiration, slight tremors, restlessness, increase motor activity, insomnia and agitation.

PHYSICAL EFFECTS

- Dilation of pupils.
- Bad speed often causes abscesses, swollen lips and eyes.

PSYCHOLOGICAL EFFECTS

- Talkative, excited, restless, reckless, aggressive.
- Excessive abuse can cause loss of memory.
- Sick, violent and insane behavior.
- Paranoia.
- Hallucinations.

⁴³ O'Neill and Vellela, *op. cit.*

⁴⁴ *Ibid.*

▶ **PSYCHEDELICS (MIND EXPANDING)⁴⁵**

CLASSIFICATION

- Mescaline (peyote), LSD (lysergic acid diethylamide).

PHARMACOLOGICAL EFFECTS

- Visual, auditory hallucinations, disturbances in cognition and perception and may produce behavior patterns similar to psychotic behavior, sensory disorders.
- Onset from 30 to 60 minutes with a duration of 10 to 12 hours.

PHYSICAL EFFECTS

- Increase in body temperature.
- Dilated pupils.
- Slight elevation in blood pressure.
- Sweating and chills.
- Headache, nausea and vomiting.
- Convulsions.

PSYCHOLOGICAL EFFECTS

- Bad trip: fear, paranoid behavior.
- Suicide attempts.
- Panic.
- Violent behavior.
- Hallucinations.

▶ **SOLVENTS (SNIFFING)⁴⁶**

CLASSIFICATION

- Glue, paint thinner

PHARMACOLOGICAL EFFECTS

- Hallucinations.
- Damage to internal organs.
- Fatigue

PHYSICAL EFFECTS

- Blurred vision.
- Dizzy.
- Headaches, nausea.
- Weight loss.

PSYCHOLOGICAL EFFECTS

- Confusion

⁴⁵ O'Neill and Vellela, op. cit.

⁴⁶ Ibid.

▶ ALCOHOL⁴⁷

CLASSIFICATION

- Central nervous system depressant.

PHARMACOLOGICAL EFFECTS

- Ataxia (staggering).
- Loss of motor coordination.
- Drowsiness.
- Impaired performance and judgement.
- Subtle alterations of judgement, motor skills and behavior.

PHYSICAL EFFECTS

- Slurred speech.
- Staggering.
- Wobbling.
- Odor of alcohol.
- Odor of mouthwash, breath mints, etc. to mask breath from alcohol.
- Bloodshot eyes.

PSYCHOLOGICAL EFFECTS

- Irrational.
- Quarrelsome.
- Confusion.

WITHDRAWAL

- Shakes.
- At high doses: convulsions, hallucinations.

8

MENTAL HEALTH DISORDERS

OBJECTIVE: Recognize and determine overt and subtle symptomatology associated with mental illness.

▶ NEUROSES⁴⁸

- *Anxiety neurosis* - a term used to describe both a normal emotional reaction to a problem or situation and a psychic affliction; in the latter, the source of apprehension cannot be identified by the subject and the anxiety is the outward expression of an inner fear.
- *Phobic neurosis* - A morbid, abnormal fear, usually without adequate cause.
- *Hysterical neurosis* - A psychoneurotic disorder arising from an emotional conflict, in which repressed material finds an outlet through sensory disturbances, such as blindness, loss of certain sensations, and paralysis of the limbs, with loss or impairment of speech function.
- *Conversion type* - a mental mechanism through which a painful emotional conflict finds outlet via bodily expression, often in a somatic symptom (rash, motor disturbance, gastric ulcer, etc.).
- *Dissociative type* - an unconscious mechanism by which an idea or a group of ideas split off from the main body of the personality and become inaccessible to the conscience.
- *Depressive neurosis* - Abnormality enters the picture when a person is overwhelmed by melancholia for no apparent reason or when the reason for the sadness is comparatively trivial.
- *Obsessive-compulsive neurosis* - A constant, irresistible preoccupation with a single thought or complex of thoughts, observed commonly in neurotics.
- *Neurasthenic neurosis* - The principal manifestation was fatigue, which led to the belief that it was due to some "weakness" of the nervous structure.
- *Depersonalization neurosis* - Loss of the sense of personal identity, usually accompanied by feelings of unreality about the environment or oneself.

⁴⁸ Developed from the *Diagnostic and Statistical Manual of Mental Disorders*, (3rd ed., revised), American Psychiatric Association: Washington D.C., 1987; *Diagnostic and Statistical Manual of Mental Disorders IV*, American Psychiatric Association: Washington D.C., 1994.

PERSONALITY DISORDERS⁴⁹

- *Paranoid Personality*- A major psychotic reaction characterized by suspiciousness and egocentricity woven into the pattern of a highly organized, often complex system of persecutory delusions; there is often a strong homosexual component.
- *Cyclothymic personality*(affective personality) - A cycle of emotional variation in moods, of a milder form than the manic-depression reaction.
- *Schizoid personality*- A major psychosis, characterized by introversion, regression, childishness, asocial (possibly antisocial) behavior, hallucinations, delusions, depersonalization, and aberrant ideas.
- *Explosive personality*- Extrovert personality.
- *Obsessive compulsive personality*- A constant preoccupation with a given thought or a complex of related thoughts, which the neurotic person can't shake. A compulsion is an irresistible urge to some kind of action, usually the physical translation of an obsessive thought.
- *Hysterical personality*- A psychoneurotic disorder arising from an emotional conflict, in which repressed material finds an outlet through sensorimotor disturbances, such as blindness, loss of certain sensations, and paralysis of the limbs, with loss or impairment of speech function.
- *Asthenic personality*- A constitutional body type characterized by preponderance of perpendicular development over girth, with pale complexion, bluishness of earlobes and finger tips, visceroptosis (dropped abdominal organs), and slow cardiac and respiration action believed to be associated with a withdrawn, antagonistic, often bitter personality.
- *Passive aggressive personality*- Reactions to life situations with passive measures that have an aggressive tinge, such as pouting, stubbornness, procrastination, inefficiency, and obstructionism. Typical of this group is the chronic objector to progressive change.
- *Antisocial personality*- Exhibiting attitudes and overt behavior contrary to accepted customs, standards, and moral principles of society.
- *Inadequate personality*- Finding the person feeling insecure.

⁴⁹ Developed from the *Diagnostic and Statistical Manual of Mental Disorders*, (3rd ed., revised), American Psychiatric Association: Washington D.C., 1987.

▶ SCHIZOPHRENIA⁵⁰

- A major psychosis, not attributable to physical conditions, characterized by introversion, regression, childishness, asocial (possibly antisocial) behavior, hallucinations, delusions, depersonalization, and aberrant ideas.
- *Simple type* - Expresses his distaste for life by utter indifference and apathy.
- *Hebephrenic type* - A "tired mind", symbolic of the patient's total indifference, apathy, regression, asocial manner, and complete disinterest in reality.
- *Catatonic type* - May exhibit waxy flexibility, language may be stereotyped, "breakdown" in posture and muscle tone.
- *Paranoid type* - Reactions to ever-changing, illogically associated delusions. He is outstandingly suspicious, withdrawn, disagreeable, uncooperative, defiant, antagonistic, and asocial.
- *Acute schizophrenia episode* - Symptoms often involve perplexity, confusion, emotional turmoil, delusions of reference, excitement, dreamlike dissociation, depression, and fear. The individual seems to undergo a massive breakdown of filtering processes, with the result that the experience becomes fragmented and disorganized, taking on the qualities of a nightmare.
- *Latent* - Characterized by various symptoms of schizophrenia but lacking a history of full-blown schizophrenic episode.
- *Residual type* - Mild indications of schizophrenia shown by individuals in remission following a schizophrenic episode.
- *Schizo-affective type* - Characterized by a mixture of general schizophrenic symptoms, in conjunction with more pronounced obvious depression or elation-not typical of the usual surface pattern of "flattened affect".
- *Childhood type* - Preoccupation with fantasy, and markedly atypical and withdrawn behavior prior to puberty.
- *Chronic Undifferentiated type* - Although manifesting definite schizophrenic symptoms in thought, affect, and behavior, not readily classifiable under one of the other types.

⁵⁰ Developed from the *Diagnostic and Statistical Manual of Mental Disorders*, (3rd ed., revised), American Psychiatric Association: Washington D.C., 1987.

▶ **AFFECTIVE DISORDERS⁵¹**

- **Affective Psychoses Not Attributable to Physical Conditions**
- *Manic - depressive illness* - An affective psychosis in which the symptoms are predominantly expressed in emotional outbursts or apathy, hyperactivity or hypoactivity, elation or depression, often with mood swings between the extremes of these characteristics.
- *Paranoid states* - Applicable to any unorganized persecutory trend of ideas seen in senile psychosis, schizophrenia, or other mental disorders, where the specific structure of true paranoia is not present.
- *Evolutional paranoid state* - A group of several types of pathologic reactions occurring from middle life to the onset of old age; the principle characteristics are depressive or paranoid trends, uncontrollable fits of crying, and feelings of unworthiness or failure.
- *Psychotic depressive reactions* - There are periods of an upsurge of the symptoms followed by a waning or disappearance of them. The sequence of their appearance and disappearance seems related to the amounts of tension the individual is experiencing. Some example of reactions could be peptic ulcers, migraine headaches, asthma, eczema, and hypertension.

⁵¹ Developed from the *Diagnostic and Statistical Manual of Mental Disorders*, (3rd ed., revised), American Psychiatric Association: Washington D.C., 1987.

9

SEX OFFENDERS

OBJECTIVE: Recognize and determine overt and subtle symptomatology associated with sex offenders.

▶ **GENERAL WARNING SIGNS AND RED FLAGS⁵²**

- Sexual offenders tend to decompose quickly under stress and any situation that produces or exposes an offender to stress should be monitored quickly.
- Each type of sexual offender has their own set of warning signs.
- Loss of control of their behaviors (i.e., gambling, battering).
- Sleep; last to bed, first to rise, up at night (is this a manipulation to gain access?).
- Stated over-confidence; especially regarding impossibility of re-offending.
- Job stress; fired, laid off or change in job description.
- Rapid religious conversion.
- Not able to account for money, gift, loans, purchasing of drugs, alcohol, gifts for children.
- Frequency of masturbation, content of fantasies, look for degree of aggression, look for antecedents of deviant fantasies.
- Medication; taken as prescribed or abused.
- Pomography; especially if this is part of their offense pattern.
- Minor events should not be overlooked (i.e., positive urines, hassles on the job) the officer should be aware of the person's customary methods of releasing anger or expressing aggression.
- Impulsivity; quitting a job on a moment's notice, free and easy spending, citations for reckless driving, frequent explosions reported by spouse.

⁵² Unpublished training notes of Robert Csandl, Executive Director, Confront Changes (Sex Offender) Program, Confront Incorporated, Allentown, Pennsylvania, 1988.

▶ **INCEST FATHER⁵³**

- Spouse of an incest father stating, "He's still the same old Hitler" (over controlling).
- Leaving bedroom or bathroom door open.
- Wearing inappropriate clothing (i.e., robe only, no underwear, exposing genitals yet having a valid excuse such as broken zippers)
- He will be manipulative by making himself a hurt party (i.e., physical complaints to play for sympathy or playing the victim especially in the presence of a victimized child).
- May play childish or seductive games, or any behaviors that are part of his offense pattern.
- Over inquisitive interest in dating behavior of his daughters.
- Wanting to teach his daughters about sex.
- Tucks daughter in bed at night alone and without being asked.
- Spouse reports poor communication and decrease in their sexual activity.
- Daughter may show an increase in anxiety.

▶ **PEDOPHILE⁵⁴**

- May begin to hang around school yards or other areas where children frequent.
- Retreats into childhood behaviors of clothing, language, games, etc. The officer should go beyond initial statements and actions.
 - Is he attending movies? [Kiddie Matinees].
 - "I just joined a baseball team." [Coaching little league].
 - "I'm starting to date." [A women with young children]
 - "I just got a job." [School Bus Driver]
 - "I've been going to the library." [Children's sections or spending time there for no reason. Libraries are favorite places of pedophiles].

⁵³ Unpublished training notes of Robert Csandl, Executive Director, Confront Changes (Sex Offender) Program, Confront Incorporated, Allentown, Pennsylvania, 1988.

⁵⁴ Ibid.

▶ **RAPIST⁵⁵**

- May begin to show signs of depression, social withdrawals, anxiety, overly sensitive, uptight, hostility.
- Use of drugs or alcohol.
- Unresolved marital conflict.
- Domestic violence.
- Refusal to discuss problems.

⁵⁵ Unpublished training notes of Robert Csandl, Executive Director, Confront Changes (Sex Offender) Program, Confront Incorporated, Allentown, Pennsylvania, 1988.

10 TACTICS

OBJECTIVE: Deal with positive tactics officers can employ in the field and in the office to effectively enhance their safety and welfare and the safety and welfare of others.

▶ TACTICAL CONSIDERATIONS

- There are no *absolutes* in tactics.
- *Action* is always quicker than *reaction*.
- No set of procedures are *always* effective.
- When you least expect it, *expect* it.
- Always let the *circumstances* dictate tactics, not vice versa.

Action
is always quicker than
reaction.

▶ S.A.F.E.T.Y. MODEL⁵⁶

TACTICS should be:

- **S** **imple** **Easy to learn and apply.**
- **A** **ceptable** **To the officer, administration and general public.**
- **F** **ast** **The longer a physical confrontation lasts, the less chance the officer has in prevailing without resorting to extreme measures.**
- **E** **ffective** **It can work for all officers.**
- **T** **rainable** **For officers at all skill levels.**
- **Y** **ielding** **The officer may increase or decrease the amount of control. The system will work even if the officer makes mistakes.**

▶ BEHAVIORAL CHANGE METHODOLOGY

- **Power assertion.**
- **Love withdrawal and guilt.**
- **Induction.**

⁵⁶ Desmedt, *op. cit.*

▶ ATTACK MANAGEMENT⁵⁷

SHIELDING

- Shielding (also known as cover) is something that will absorb the power of attack.
- Shielding will deflect or slow down an attacker, bullets or other types of weapons or projectiles. It is meant to protect you from bodily injury.
- Shielding awareness applies whether you are in your car or on foot, approaching a location or subject, or eating your lunch.

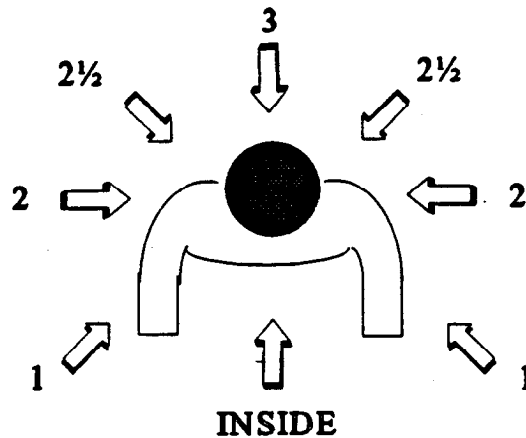
DISTANCE

- Close to a situation as tactical is a tactical myth.
- Stay at least two (2) arm lengths away; this removes you from striking distance.
- If you are less than two arm lengths from the subject, you can not count on stepping to evade. You will not be able to step out of the way of a sudden attack, even if you are paying strict attention to the subject. To do so, is beyond the limitations of your nervous system.

MOVEMENT

- The effect of an assault is harmless outside of the power envelope; that is close to defend from a strike before it develops power or moving out of the power envelope.
- If you are the proper distance from a subject, you have a good ability to evade an assault by stepping out of the power envelope.
- It is harder to assault a moving target.

RELATIVE POSITIONING⁵⁸



INSIDE

- In front of the subject or between his arms is the most vulnerable position for you to assume.
- This is the most dangerous place because the human body is made to perform in a forward motion.
- This position is compounded if you are not in the proper position (within two arms length) since you are in striking distance of a subject's hands, elbows, knees and feet.

OUTSIDE (Anywhere that is not inside, is an outside position)

- **Position 1:** Forty-five (45°) degree to the front (inside) of the subject. Better relative position than the inside; decreased vulnerability. Feet shoulder width; body bladed to subject; weak side front.
- **Position 2:** Facing the subject at the side of his or her body (90°). You can assume control in this position. You are facing (fight forward) the subject but he/she is not facing you.
- **Position 2½:** On a line 45° to the rear of the subject. This is the weakest position for the subject's arms or legs to reach. Best position; least vulnerable. ESCORT POSITION.
- **Position 3:** Facing the rear of the subject body. The optimum position from which to assume control since the subject is facing in the opposite direction.

▶ POSITIONING FOR CONTROL⁵⁹

- Always try to be in and control from an outside position.
- Try to get to the highest position you can in order to establish control.
- Try to stay one height level above subject; have the subject seated.
- Keep centered, balanced.
- Keep both of your feet on the ground.

▶ CONTACT/COVER⁶⁰

CONTACT OFFICER

- Conducts all communication with subject; issues commands when required.
- Performs searches of subjects and environments.
- Handcuffs all arrestees.
- Recovers evidence and contraband.

COVER OFFICER

- Devotes full attention to the subject(s) through a position of surveillance and control.
- Discourages hostile acts by the subject(s).
- Alerts contact officer to any weapons, or

POSITIONING OF COVER OFFICER

- Personal *shielding*.
- *Unobstructed* view of contact officer and subject(s).
- Safe background (isolation) for *shooting*.
- *Peripheral* view of surrounding area.
- Control of likeliest *escape* route(s).
- attempts to hide, discard or destroy evidence and contraband.
- Intervenes with force if necessary to protect contact officer.
- Resists distraction.
- Constitutes an unspoken force presence.

⁵⁹ Desmedt, *op. cit.*

⁶⁰ Morrision, John. San Diego Police Department, California.

► VERBAL CONTROL⁶¹

QUESTIONING

- Provide needed instructions in a calm, simple manner.
- Ask questions and receive information about the general source(s) of the problem.
- Allow for some controlled venting (i.e., Tell me what has you so upset. What do you hope to gain from this?)
- Avoid why questions; could suggest criticism or judgement of their behavior, evoke rebellion and escalate a situation.
- Focus on what and how questions.
- Be careful of trigger words; prejudicial, defamatory, threatening.
- Don't be power assertive.
- Most useful in passive/aggressive and refusal stages.

DISTRACTION

- If direct questions do not seem to work, try questions or conversation unrelated thus focusing attention away from the problem.
- How are your kids? That's a nice shirt, where did you get it?
- Request a favor (i.e., Could I borrow a pen or pencil).
- If it takes the person out of the room or your observation, ACCOMPANY THE PERSON.
- Confuse a person with a bizarre question or statement (i.e., Columbo approach).
- Most useful in passive/aggressive and refusal stages; may work with bluff signs.

HUMOR

- May ease tension, but may escalate situation. Subject may feel that you are not taking him seriously.

PARADOX

- Providing a prescription to what they are already doing (i.e., I don't think you could stop pacing and sit down for a minute. I don't think you can listen to me without interrupting me).
- Can be risky, can escalate a situation.

⁶¹ Staff Safety Program, op. cit.

VERBAL COMMANDS

- You are now becoming more power assertive. It is no riskier because you are demonstrating more authority and control.
- You are now becoming or are perceived as a potential threat, which may escalate a situation.
- Direct and repeated instructions (i.e., CALM DOWN!; SIT DOWN AND CHILL OUT!).
- Use simple direct language.
- Stay in control of your emotions, remain calm .. in control.
- Model controlled behavior.
- Don't be condescending (i.e., YOU IDIOT!).

DISENGAGE

- When all else fails disengage; bail out.
- Hopefully you have assessed your escape route.
- Engage the person verbally (i.e., I'm leaving now, we'll talk later).
- Don't turn your back on the individual, retain eye contact.
- Follow-up with increased manpower/intervention (i.e., police).
- **IMPORTANT: SELF PRESERVATION IS YOUR GOAL WHEN THE SITUATION IS BEYOND YOUR CONTROL.**
- **THERE IS NO FAILURE ... NO GUILT.**

▶ HANDLING EMOTIONALLY DISTURBED PERSON (EDP)

- Never underestimate the intelligence of an EDP.
- EDPs require contact and cover, get backup immediately.
- Maintain distance and escape routes.
- Be ready to use force or disengage, if necessary.
- Suicide can easily turn to homicide. Only difference between suicide and homicide is the target.
- Take your time.
- Try to calm the subject (listen, offer help).
- Talk softly, slowly and simply.
- Don't be lulled by apparent cooperation.
- Change environment, you change response.

▶ EGOTISTICAL DANGERS (PISSING OFF PEOPLE)

- Facial Expressions
- Attitude
- Mannerisms
- Profanity
- Buzz Word(s)
- Verbal Parting Shots

When an officer becomes personal, they become their own worst enemy. As tempers rise, safety goes down. Primarily because when officers become tense, they become egotistical. When they become egotistical, they turn inward. And when they turn inward, they become blind to their greatest safety too . . . *EMPATHY.*

Officer safety begins and ends with an officer's ability to empathize with another. The moment an officer thinks only from his or her own point of view, it is the moment of greatest danger.

Of the 855 officers killed in the line of duty between 1980-1990, and the more than 700 times that number hurt and maimed . . . almost all of these violent encounters began with a loss of *MIND-AND-MOUTH HARMONY.*

We deal with crap on a daily basis, we must be able to *DEFLECT IT* not *take it.*

Thompson, George J. "The Peace Warrior," *Police*, 16, 12 (December 1992). President of the Verbal Judo Institute, Albuquerque, New Mexico.

11

CONTACT QUESTIONS

OBJECTIVE: What if?

▶ WHO IS THE SUBJECT?

- Assess subject's *actual* and *potential* profile.
- Assess *signs* of deteriorating behavior.
- Assess subject's *stress* factors.

▶ WHAT IS THE PURPOSE OF THE CONTACT?

- Necessity of contact.
- Scheduled, surprise or surveillance.
- Locating an absconder.
- Making an arrest.
- Responding to a perceived or actual crisis.

The purpose of your contact
will always
dictate your approach and tactics.

▶ SCHEDULED CONTACT ?

- Scheduled contacts allow subjects to prepare and conceive an image, personality or environment.

▶ SURPRISE CONTACT ?

- Surprise contacts causes the subject to be at greater risk with a higher propensity to be caught in compromising situations.
- Surprise contacts usually provide more information about the subject.

Contacts with a
predisposition for problems
must be approached
with tactics in mind.

▶ TACTICAL CONSIDERATIONS

- Postpone the contact if in doubt.
- Get backup.
- a response to anyone's request for help, requires a *minimum* of 2 officers.

▶ REDUCING THE ODDS OF ASSAULT⁶²

*You reduce the odds
of being attacked by:*

- **70%** with 1 other officer present.
- **90%** with 2 or more officers present.

▶ WHERE IS THE CONTACT TAKING PLACE ?

Office Contact

- Advantage for the officer.
- Availability and quicker response to problems.
- Control people or animals.
- Observation of behavior before initiating contact.
- Screening for weapons or other contraband.

Subject's Residence

- Although it provides more information about the subject; advantage for the client.
- Little control of people or animals present.
- Unfamiliarity of the environment; hiding areas and entrance/escape routes.

Public Place

- Depending on location!
- Either an advantage or disadvantage.
- Neutral environment; parity in control and risk.

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Staff Safety Training Program, *op. cit.*

▶ WHEN IS THE CONTACT TAKING PLACE ?

- Time of day.
- Weather conditions.
- Lighting conditions.

Time of day, weather conditions
or lighting conditions
can be a limitation
for you or the subject.

12

LIGHT CONDITIONS

OBJECTIVE: Adjust to varied lighting conditions and environments.

▶ **LIGHT CONTROL**

- Your risk goes up at night or in dim light environments.
- There may be too little illumination for you to quickly perceive images that warn of danger.
- You need to be constantly aware of sources of light; direct and reflective.
- Be aware of how you can manipulate light and darkness to your advantage and the subject's disadvantage.

▶ **PHYSIOLOGY OF VISION**⁶³

- Your eyes need light to record images.
- Rapid changes can cause temporary blindness.
- Pupils need about 20 seconds to adjust to changing states of light.

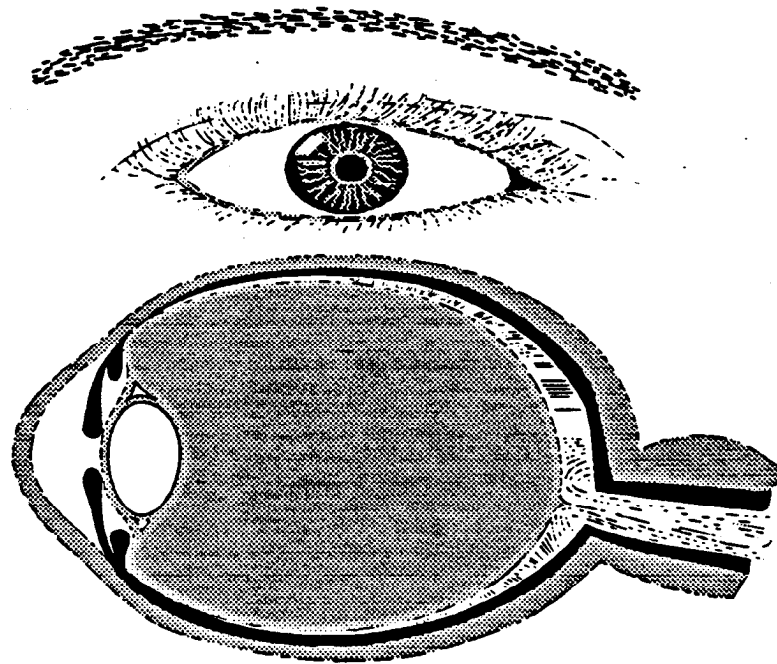
▶ **PHYSIOLOGY OF NIGHT VISION**⁶⁴

- It usually takes about 30 minutes for night vision to develop.
- Colds, headaches, fatigue, smoking, drugs and alcohol significantly reduce night vision.

⁶³ Anthony, Catherine Parker. *Textbook of Anatomy and Physiology*. The C.V. Mosby Company: St. Louis, Missouri, 1967.

⁶⁴ *Ibid.*

▶ ANATOMY OF AN EYE⁶⁵



▶ IN DIM OR DARK LIGHT⁶⁶

- Don't focus directly at an object.
- Utilize off-center vision.
- Look slightly to the side, above or below the object 6° to 10°.
- Scanning strengthens off-center vision.
- Use flashlights.

⁶⁵ Anthony, Catherine Parker, *op. cit.* Rods are highly light sensitive. Cones are less sensitive to light. The fovea which is used in direct vision, contains the greatest concentration of cones and is, therefore, the point of most clear vision in good light. In dim light or darkness, we can see an object better by focusing the image nearer the periphery of the retina where rods are more plentiful.

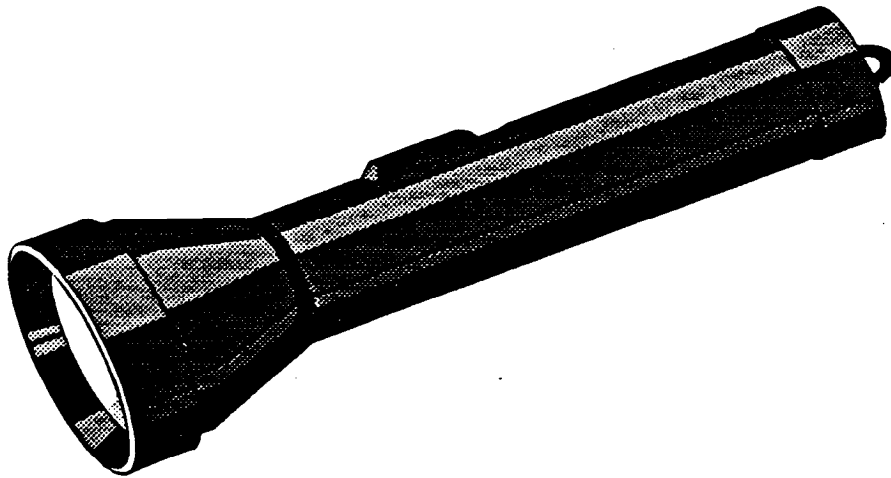
⁶⁶ *Ibid.* In a darkened area, try to utilize off-center vision. Don't focus directly on an object. Direct vision requires the use of eye cells; cones, that are least sensitive to light. When you look slightly to the side, above or below the object (6° to 10°), the image is formed on the area of the eye with cells; rods, most sensitive in darkness. Scanning strengthens off-center vision. If you try to hold an image in the corner of your eye longer than 4 to 10 seconds, it gradually *bleaches* out.

▶ GOING FROM BRIGHT TO DIM LIGHT⁶⁷

- Use sunglasses in bright light conditions.
- Close one eye, after entering dim/dark lighting, open that eye.

▶ FLASHLIGHTS

- An important and versatile tool.
- Can be used as an individual protection device.
- Extend the flashlight away from your body.
- Stay behind the beam of light.



13

APPROACH TACTICS

OBJECTIVE: To safely approach locations and determine limitations.

▶ GENERAL CONSIDERATIONS

- Anticipate the address your looking for as you approach the area.
- Drive-by the location to appraise the environment.
- Visually scan for limitations and problems.
- Be aware that people may be watching you although you may not see them.
- Stay conscious of your surroundings; be alert to possible hiding places, including rooftops and nearby vehicles.
- Utilize all your senses to collect data.
- Be aware of potential booby traps.
- Utilize all your senses to collect data.

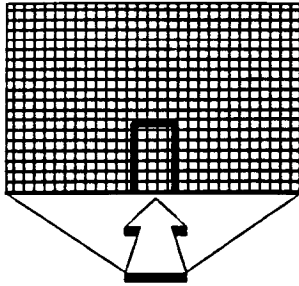
▶ VEHICLE PARKING

- Do not park directly in front of the building; you could be observed and set up.
- Park your vehicle 3 or 4 doors away from the building, on the same side of the street.

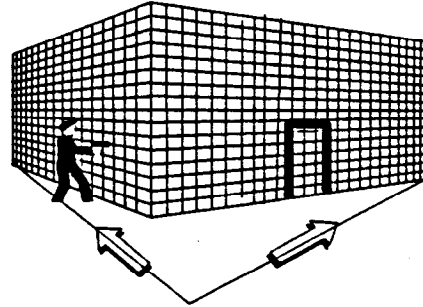


► BUILDING APPROACH

Avoid a *direct* advance.



Use a *triangular* approach.



► VISUAL SCANNING

Quick-peek through doors and windows.

- What are the lighting conditions?
- Can you see weapons, drugs or other contraband in plain view?
- Does the environment look the same or different?
- Are there people and animals present?
- How many?
- Where are they?
- What are they doing?

▶ AUDITORY SCANNING

Listen and identify conversation and noise.

- Number of voices?
- Context?
- Tone/demeanor?
- Animal sounds?
- Music?

▶ OLFACTORY SCANNING

Differentiate odors.

- Cooking aroma or marijuana?
- Medical/Cleaning scents or drugs/cutting agents?
- Alcohol?
- Incense?

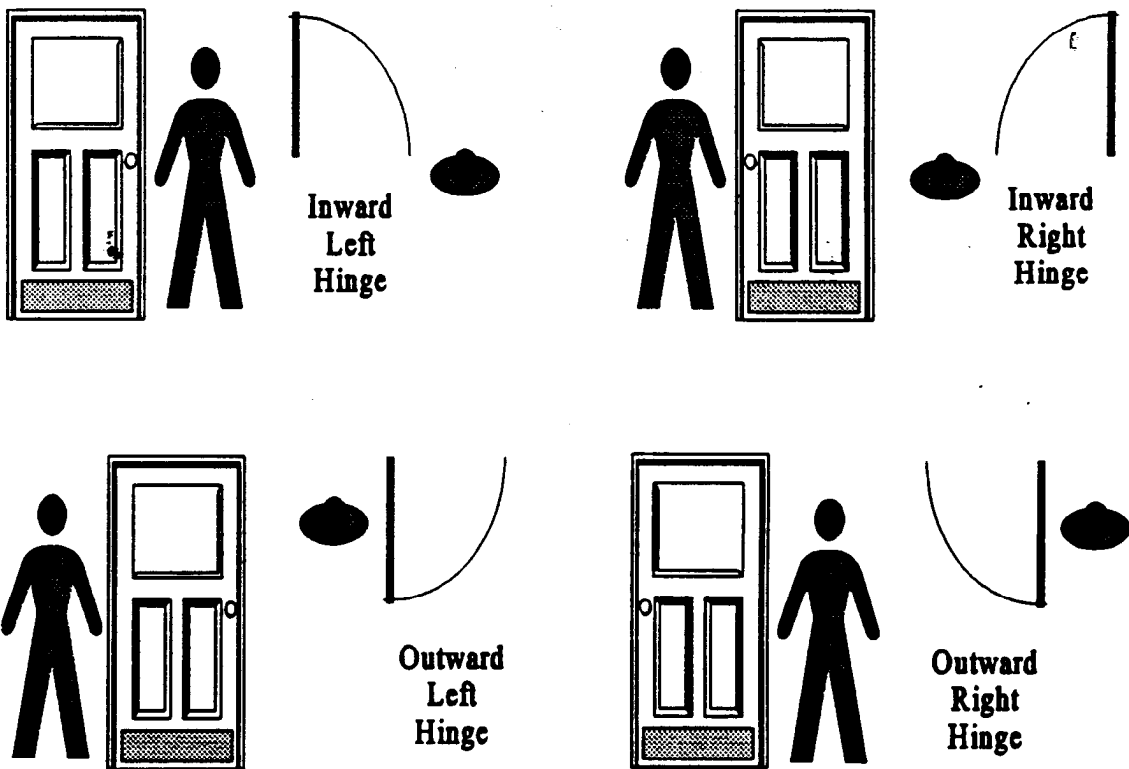
▶ PHYSIOLOGY OF SMELLING ⁶⁸

- Olfactory receptors are extremely sensitive; they are stimulated by even very slight odors, but
- They are easily *fatigued*.

⁶⁸ Anthony, Catherine Parker, op. cit.

▶ DOOR POSITIONING

- Use door jams as shielding.
- Doors and windows provide concealment but usually fail to provide shielding.
- Don't be visible as the door opens.
- Position yourself behind the non-hinged door jam for doors opening inward.
- Position yourself behind the hinged door jam for doors opening outward.



▶ DOOR APPROACH

- Develop a mental picture of what is happening inside.
- Knock or ring the bell in a normal fashion.

If the a subject refuses to answer, despite the fact that you know someone is inside:

- Call from a phone.
- Return later.
- Don't force a confrontation.

If a subject responds:

- Maintain shielding.
- Never enter unless the door is opened for you.
- As the door opens, immediately scan the subject and the environment.

▶ ENTRY

- Don't be too quick to enter.
- Establish the number and identity of people and animals present, resides or frequents the location.
- Give instructions for animals to be removed from your immediate area.
- Assess the environment, demeanor of those present and your limitations to safety.
- Assess subjects' and your escape routes.
- Look for areas where subjects can hide or effectuate an ambush.

14

INTERVIEWING ENVIRONMENT

GOAL: Identify limitations and potential danger signs.

▶ **GENERAL CONSIDERATIONS**

- Ask that masking noises (i.e., radio) be terminated.
- Get a tour of the location.
- Unless required, isolate a subject from others.
- Have subjects sit in a chair.
- Limit yourself to sitting on hardwood furniture.
- Problems With upholstered furniture.

▶ **MAJOR RULES**

- When in doubt, stay out.
- Subjects must always be in view while on their turf.
- Never let subjects leave your presence; always escort them to whatever location they must go.
- Never let subjects go into closets, draws or areas capable of hiding weapons.
- Never let subjects situate themselves between you and an escape route.

15 OFFICE SAFETY

GOAL: Determine security equipment and procedures to reinforce office safety.

▶ **LAYOUT**

- Use a solid door and wall (shielding) to separate the office proper from a waiting area.
- Waiting area should be accessible for observation.
- Position equipment to avoid blind spots or traffic flow.
- Use a sterile interview room or position desk and chairs so a subject is not between you and an exit.

▶ **CONSIDERATIONS**

- All visitors, subjects and guests, must be escorted and under supervision at all times.
- Visitor identification badges are cheap to implement and validates presence.
- Be cognizant of items around that can be used as a weapons.
- Establish a code system for encrypted communication.

16

VEHICLES

OBJECTIVE: Ensure driver and passenger safety.

▶ **CONSIDERATIONS**

- Officers are more likely to be injured in a vehicular accident on duty, than by gunshot or any other form of violence.
- Vehicles can be viewed as deadly force, that is, a force which, under the circumstances in which it is used, is readily can causing death or other serious injury.

▶ **REQUIREMENTS**

Authorization to operate municipal vehicles SHOULD require:

- Successful completion of a tactical safe driving course.
- Demonstration of a working understanding of the policies and procedures pertaining to vehicles.
- A demonstration/check-out drive.

▶ **SAFETY PRACTICES**

- No subject under custody should be transported in a vehicle without a shield.
- All vehicle occupants should wear seat belt restraints.
- Smoking is prohibited in and about vehicles.
- Vehicles should be free from any contraband, debris and refuse. Physical sweeps and disposal of contraband, debris and refuse, should be performed by drivers at the beginning and end of usage of a vehicle.
- Drivers should ensure that vehicles contain at least ½ tank full of gasoline at the end of usage.

▶ HIGH SPEED PURSUIT

- No officer should be authorized to engage and should not engage in high speed pursuit.

▶ PASSIVE PURSUIT

Passive pursuit may be exercised, these guidelines should be considered and adhered to:

- You have evaluated the severity of an offense.
- You know the driver of the suspect vehicle as a subject on probation, parole, A.R.D., P.W.V., intermediate punishment or other sanction, in which, you know of an outstanding warrant, he/she is driving a motor vehicle while under suspension for D.U.I. or other serious violation of statute;
- You have witnessed, first hand, a serious violation of statute.
- As your purpose is to monitor a vehicle or subject, you should be in communication with a police agency via radio, telephone or other communication device. Without this capability, you have no reason to engage in passive pursuit and ensure your safety.
- You are complying with statutes of the motor vehicle code.
- You are aware of your speed, weather, light and road conditions.
- You are aware of your location and possible risks.
- You are aware of the vehicle, pedestrian and population density of the area you are in or headed in.
- You have considered your policy against high speed pursuit, your legal obligations and risk.

▶ **VEHICLES USED IN AN OFFENSIVE POSTURE**

- Vehicles should not be used in an offensive posture to purposely ram, block or make contact with any other vehicle, movable or unmovable property, to effectuate an arrest, stop the escape or flight of a violator or other person.

▶ **SUBJECT TRANSPORT**

- All transports should require a minimum of two officers; a driver and cover/escort officer.
- Cover/escort must be sworn officers, intern students do not qualify.
- When possible, subjects should be transported by a driver or a cover/escort officer of the same sex as the subject.
- When transporting females, communication should be established to log starting location, destination, and odometer mileage, ending location and odometer mileage.
- All subjects, regardless if under custody or general transport, should be searched prior to every vehicle entry or re-entry.
- Subjects under custody should be handcuffed behind their backs, with seat belt restraints properly fashioned.
- Subjects should not be handcuffed to any part of a vehicle.
- Subjects transported in vehicles with shields may ride alone in the rear caged portion of the vehicle. Cover/escort officers should be responsible to monitor their behavior. Subjects posing a risk of inappropriate behavior should be transported with the cover/escort officer accompanying the subject in the rear seat, gun side away from the subject if armed.

▶ **EQUIPMENT**

Vehicles should be *equipped* with the following:

- First aid kit.
- Fire extinguisher.
- Flares.
- Latex gloves.
- Anti-bacterial wipes and 10% bleach solution.
- Handcuffs or flex-cuffs®.
- Blanket.

17

OFFICER VICTIMIZATION

OBJECTIVE: Dealing effectively with officer victimization.

▶ CRITICAL INCIDENT DEFINITION⁶⁹

Any situation that forces a person to face
vulnerability and mortality
 or that potentially *overwhelms* their ability to *cope*;
 pushed beyond normal ability to deal with stress.

▶ CRITICAL INCIDENT CHARACTERISTICS⁷⁰

- Usually *sudden and unexpected*.
- Disrupts *beliefs, values and basic assumptions* about how the world works.
- Jeopardizes a person's sense of *self-control*.
- May include an element of *physical and/or emotional loss*.

▶ CRITICAL INCIDENT FACTS⁷¹

- *NORMAL* reactions to *ABNORMAL* situations.
- *Reactions* to critical incidents come in all *varieties*.
- Critical incidents come in all *varieties*.
- Reactions are a *series* of reactions: critical incident, disorientation, struggle, healing, coping, and point of resolution.

⁶⁹ *Crime Victims in Corrections: Implementing the Agenda for the 1990s. A Training and Technical Assistance Project.* National Victims Center, Office of Justice Programs, United States Department of Justice, 1992.

⁷⁰ *Ibid.*

⁷¹ *Ibid.*

▶ AFTERMATHS OF VICTIMIZATION

TABLE 9. Middle Atlantic States Correctional Association Study of the Aftermaths of the Most Serious Past Year Victimization (1990)⁷²

Aftermath	CT	DE	MD	NJ	NY	PA	VT
Injured by Incident	20%	28%	6%	14%	12%	7%	11%
Chronic Condition	1%	4%	1%	1%	1%	1%	0%
Aggravated Old Injury	3%	0%	2%	1%	2%	2%	0%
Stomachache/Headache	13%	9%	17%	12%	14%	6%	15%
Shaken-up	73%	18%	73%	65%	62%	33%	71%
Fear on the Job	53%	18%	46%	45%	35%	24%	39%
Reduced Confidence	19%	4%	19%	18%	17%	8%	25%
Reduced Trust	54%	27%	49%	51%	48%	45%	54%
Reduced Sensitivity	29%	14%	26%	35%	28%	30%	29%
Less Open with Clients	29%	9%	26%	27%	26%	15%	21%
Less Open with Co-workers	10%	9%	0%	7%	0%	0%	4%
Thought About Quitting	20%	9%	30%	23%	15%	17%	18%
Applied for Transfer	5%	4%	10%	4%	3%	3%	4%
Avoid Contacts with Clients	17%	18%	22%	22%	20%	18%	11%
Increased/Use of Medication	1%	0%	5%	3%	4%	2%	4%
Increased/Use of Alcohol	3%	0%	2%	1%	4%	2%	7%
Disruption of Personal Life	29%	4%	40%	25%	27%	7%	43%
Disruption of Family Life	16%	9%	0%	16%	20%	8%	29%
Enhanced Self-Confidence	23%	50%	22%	24%	24%	26%	25%

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Parsonage and Miller, *op. cit.*

▶ AFTER-BURN⁷³

- After-burn is the tendency of the human mind to dwell on unpleasant, emotion charged events in the wake of their actual occurrence. Sometimes the effect is immediate. Most often, the impact is not so swift. It's likelier to set in days, weeks, even months after an incident.
- In after-burn, you relive and react to an experience churning over and over what you and others did and what you might or should have done differently. This continual reminding and reassessing can be as vivid as the original event - and sometimes even more psychologically upsetting.
- It is important that officer victimization be treated aggressively. Denial and repression of honest emotions can escalate in to full-blown psychiatric problems.

▶ SYMPTOMATOLOGY⁷⁴

The following symptoms and other disturbances in your or the victim's normal pattern may indicate a denial of reality, rejecting work, feeling guilty and a need for help. Ignoring symptoms will probably result in your or the victim's mental state progressively degenerating.

HYPERACTIVITY

- Is your or the victim's mood unusually elevated?
- Have you or the victim turned into a nonstop talker?
- Are you or the victim unnaturally happy-go-lucky?

PREOCCUPATION

- Is it hard for people to get your or the victim's attention?
- Have you or the victim become unfriendly and withdrawn?

⁷³ *Crime Victims in Corrections: Implementing the Agenda for the 1990s, op. cit.*

⁷⁴ *Ibid.*

PHYSICAL SYMPTOMS

- Is sickness, tardiness, forgetfulness affecting your or the victim's work performance?

PERSONAL CARE

- Have you or the victim become sloppy in your dress and grooming?
- Are you or the victim suddenly accident prone?

DISTURBED SLEEP

- Do you or the victim have insomnia?
- Or nightmares that keep coming back again and again?

▶ **CRITICAL INCIDENT RESOURCE TEAM (CIRT)⁷⁵**

- *Focus* on the officer not the incident.
- *Listen* without criticizing or making judgements.
- *Challenge* destructive behavior.
- *Encourage* contact with others who have "been there."

⁷⁵ *Crime Victims in Corrections: Implementing the Agenda for the 1990s, op. cit.; Post Assault Resource*, South Carolina Department of Probation, Parole and Pardon Services Office for Victim Services; *California Department of Corrections Operations Manual*, 1990.

▶ **SUPPORT MECHANISMS⁷⁶**

Protection from media.

Compassionate notification of spouse, [parent or significant other] regarding the event and the officer's condition.

Access to independent legal counsel.

Report-writing procedures that acknowledge stress realities.

Private, non-humiliating replacement of equipment.

Access to EMPLOYEE ASSISTANCE PROGRAMS and CRITICAL INCIDENT RESOURCE TEAM; recovery time off, with pay.

Competent, well-structured investigation, including public support if actions are justified.

Individually tailored re-entry to work.

Ongoing communication on pertinent matters.

Internal analysis of the incident for training purposes.

⁷⁶

Crime Victims in Corrections: Implementing the Agenda for the 1990s, op. cit.

▶ GUIDELINES FOR SURVIVAL WRITING

- Remember: "He/She *forced* me."
- Build up to the most *aggressive* action.
- Document your *state of mind*.
- Don't *lie* or *fabricate* to fill gaps.

▶ DEPARTMENTAL INVESTIGATION (GARRITY RULE)⁷⁷

- The constitutional right to remain silent does not apply to departmental investigations.
- The statement below should be *WRITTEN ABOVE ANY* report an officer is ordered to write by the Department. This insures that the report can only be used against the officer in internal investigations and not used later should criminal charges of any type follow.

"It is my understanding that this report is made for administrative, probation department purposes only and will not be used as part of an official investigation. This report is made by me after being ordered to do so by lawful supervisory officers. It is my understanding that by refusing to obey an order to write this report that I can be disciplined for insubordination and that the punishment for insubordination can be up to and include termination of employment. This report is made only pursuant to such orders and the potential punishment or discipline that can result for failure to obey that order."

▶ CRITICAL INCIDENT PROTOCOL⁷⁸

CRITICAL INCIDENT (CI) INFORMATION

A. Classification

<input type="checkbox"/>	ANXIETY REACTION	<input type="checkbox"/>	NON-PHYSICAL THREAT
<input type="checkbox"/>	DEATH	<input type="checkbox"/>	SERIOUS BODILY INJURY
<input type="checkbox"/>	HOSTAGE	<input type="checkbox"/>	USE OF NON-DEADLY FORCE
<input type="checkbox"/>	MINOR BODILY INJURY	<input type="checkbox"/>	USE OF DEADLY FORCE
<input type="checkbox"/>	MOTOR VEHICLE ACCIDENT	<input type="checkbox"/>	OTHER (Specify):
<input type="checkbox"/>	NON-INJURED ASSAULT		

B. Name of Officer(s) and/or Staff Involved in CI

1. _____ 3. _____
 2. _____ 4. _____

C. CI Location

Numerical Address: _____ Cross Street: _____
 City: _____ Township/Municipality: _____
 Incident Date: _____ Time of Occurrence: _____

D. CI Notification

CI Notification Received by: _____
 Notification Date: _____ Time of Notification: _____

Method of Notification: Phone Radio In person Information Received from: _____
 Affiliation: Department Staff Police Coroner Hospital Other (Specify): _____
 Telephone Number(s): _____ Radio Number: _____

E. CI Team Mobilization

Critical Incident Officer (CIO): _____
 Notification Date: _____ Time of Notification: _____
 Method of Notification: Pager Phone Radio In person

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CRITICAL INCIDENT RESPONSE TEAM (CIRT)

F. Staging Protocol

- *The CO shall.*

- Determine nature, extent and staff involved in possible CI.
- Declare CI.
- Retrieve CI Icd.
- Contact Communications Center and request 10-1 (Air Clearance) on FS.
- Determine the size of the CIRT required.
- Contact and assemble CIRT.
- Determine staging area in proximity to the CI.
- Contact and advise Chief of CI.
- Proceed to CI scene (if not in route).

G. Triage Protocol

- *If first on the scene.*

- Determine the existing level of threat and security of the environment.
- Secure immediate and surrounding area of any existing or potential threat.
- Locate and determine the officer(s) involved.
- Immediately advise Communications of the exact location, the level of threat or secured environment and what personnel is at the scene.
- Determine the type and extent of victimization/injury.
- Immediately advise Communications of the number of injured, their medical condition and needs.
- Begin first aid as required.
- Initiate *Weapon/Shooting Protocol*, if required (Part I).

H. On-Scene Protocol

- *The CO shall.*

- Identify their position and role to law enforcement, medical or media personnel that may exist on the scene.
- Ensure that all CIRT members are displaying identification, badge or tactical jacket.
- Identify staff who are most likely to have crisis reactions and suffer long-term stress reactions as a result of the CI. This shall include but not be limited to an individual who was the subject of an assault, who has used force, who has been held hostage, who has witnessed sudden injury or death, and/or who are close friends of any individual that falls into the aforementioned categories (Part B).
- Assign a CIRT member to each staff person identified as being assaulted or who have a potential for a crisis or stress reaction.
- Assign a CIRT member to family members of victimized staff for the purpose of protecting them from news media and CI notification.
- Order any staff member not a victim or a member of CIRT away from the immediate scene.

I. Media Protocol

- The CIO shall

- Act as media liaison to coordinate media relations with other law enforcement agencies and give regular briefing to the media.
- Assign a CIRT member as a relief media liaison person should the CIO last more than twelve (12) hours.
- Arrange to meet with the media at least once a day.
- Provide for the physical and technical needs of the media.
- Provide and offer media representatives refreshment, food and access to restroom facilities.
- Assure that victims are not identified until their families have been notified.
- Arrange to tape record news conferences, radio and television newscasts.
- Monitor newspaper and wire service reports.
- Advise an emergency command center of significant reports.
- Refuse any reporter an exclusive on an important development.
- Refuse to make off-the-record statements.
- Be prepared to provide background information on the department, history, programs and policies.
- Refuse to answer questions if you don't know the answer. Find out the information if possible and report back.
- Be cautious about making statements that may be libelous or that could affect the future course of an investigation or civil/criminal proceeding.
- Be cautious about using inflammatory statements.
- Be careful in using confusing terminology or abbreviations.
- Provide update reports for staff as well as the media.

J. Hospital Protocol

- The CIO shall provide the CIRT member with the *Emergency Medical Profile* to provide to hospital personnel.
- A CIRT member shall accompany the injured/ill staff member to the hospital.
- Ensure protection from the media and refer all inquiries to the CIO.
- Provide escort and support to injured/ill staff members and family member(s).
- Provide initial status report (hospital, phone number, etc.) and ongoing status reports to the CIO.

K. Family Notification Protocol

- The CIO will advise the CIRT member of the name and location of the emergency contact person.
- Make notification in person.
- Unless directed to make contact with the family, CIRT member should park in proximity to the residence or work site and protect the family from media intrusion.
- Obtain as much information about the victimization and the event as soon as possible from the CIO: what happened, when did it happen, where did it happen and how did it happen.
- Get as much information about the person(s) to be notified as possible.
- Try to ensure that the appropriate closest adult relative receives notification first.
- Try to enter the home before giving information, making sure that everyone is first sitting down and comfortable.
- Tell family member(s) simply and directly what happened. Do not prolong natural anxiety.
- Do not allow any family member to go to the CIO scene unless directed to do so by the CIO.
- Be prepared to present confirming evidence about the event and its consequences in a clear and convincing fashion in the face of denial.
- If there are children in the family, talk to the adult members about how they want to tell the children about the event.
- Answer all questions tactfully but directly. Be prepared for a wide range of questions and concerns.
- Focus on immediate needs of family members.
- If others need notification, offer to help in the process.
- Respect their need for privacy in a crisis, but ensure protection from media or the curious.
- Do not leave family members alone in the aftermath of notification; ask them to get a friend or relative for comfort. Brief them upon their arrival.
- Give family members a specific plan that will be followed for providing updates on the CIO through conclusion.
- Give family members permission to express any reactions and respond non-judgementally.
- Offer to arrange for child care, arrange for transportation, make necessary phone calls, and so forth. Be specific in making such offers so that they can simply respond with a "yes" or a "no".
- Upon the direction of the CIO, provide transportation to a hospital or other location.

L **Weapon/Shooting Protocol**

(NOTE: The police jurisdiction shall have crime scene command and authority; however, a CJRT member shall assist an officer involved in a shooting situation by advising the officer in the following protocol.)

- Place firearm down in the position as when fired.
- Do not unload the firearm. Do not move the cylinder.
- Do not handle the firearm. Preserve fingerprints, especially if there was a struggle.
- Make the evidence person(s) aware that there was a struggle and that the victim may have touched the weapon.
- Immediately demand to undergo a blood test for the presence of drugs and/or alcohol. Note: This should be done within one (1) hour of the shooting.
- Do not wash hands.
- Do not shake clothing.
- Protect clothing for testing.
- Provide a disposable jump-suit for the officer.
- Take clothing off and hang it up (if possible) or place it in a paper bag. This includes shoes and socks. The clothing must be examined for evidence; blood (officer's and the victim's), powder residue from the firearm.
- Request a neutron activation test. This examination is important to help determine the trajectory of the bullet(s) and the range of fire.
- Have your hands photographed and have them tested for the presence of blood, powder residue, etc.
- If rendered first aid to victim and pressure has been applied to the wound with something other than a hand, leave whatever was used at the scene. Advise the evidence person to examine the article used.
- Do not cut through any clothing where there is a hole from a knife or bullet wound.
- Request medical personnel to remove, maintain and preserve the victim's clothing for evidence and testing.
- Do not move anything at the scene.
- In the event of a death, notify the coroner immediately.
- Determine exactly how the victim was standing at the time of firing the weapon and how the officer was standing.
- Determine if the victim was standing sideways or directly at the officer.
- Determine the distance between the officer and the victim.
- Determine if the victim's arm was extended.
- Determine if the victim's arm was at the side or the hip.
- Determine how the officer's arm was extended at the time of the firing?
- Determine if there was anything between the officer and the victim. Note: If there was, it must be tested for powder residue and/or blood.
- Determine what direction the shots were fired.
- Determine what were the exact words used by the victim and what was said by the officer to the victim.
- Determine the lighting conditions (i.e., lights on or off; shades drawn, etc.).
- Determine if there was anyone else at the scene.
- Identify the person(s).

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BIBLIOGRAPHY

Adams, Ronald J., Thomas M. McTernan and Charles Remsberg, *Street Survival, Tactics for Armed Encounters*, Calibre Press, Inc.;; Northbrook, Illinois (1986 ed.), 1980.

Anthony, Catharine Parker, *Textbook of Anatomy and Physiology*, St. Louis, Missouri: The C. V. Mosby Company, 1967.

"Ambush Attacks", Police Weapons Center, LEAA, U.S. Dept. of Justice, Research Division of the International Association of Chiefs of Police, 1974.

Bowers v. DeVito, 686 F. 2d 616, 7th Cir., 1982.

City of Canton v. Harris, 109 S. Ct. 1197, 1989.

Civil Rights Act, 42 USC S1983.

Common Drugs and Narcotics, Long Beach, California: Educational Aids of Long Beach, 1970.

"Contact/Cover", John Morrison, San Diego Police Department.

Cooper, Jeff, *Principles of Personal Defense*, Boulder, Colorado: Paladin Press, 1972.

Crime Victims in Corrections: Implementing the Agenda for the 1990s. A Training and Technical Assistance Project. National Victims Center, Office of Justice Programs, United States Department of Justice, 1992.

Csandi, Robert, (Unpublished) Training Notes, Confront Changes (Sex Offender) Program, Unpublished, Confront Incorporated, Allentown, Pennsylvania, 1988.

Deadly Effects: Wound Ballistics (Video). Anite Productions: Pinole, California (1991 ed.), 1987.

Deadly Force Decisions I (Video). Calibre Press, Inc.;; Northbrook, Illinois, Undated.

Deadly Force Decisions II (Video). Calibre Press, Inc.;; Northbrook, Illinois, Undated.

DeShaney v. Winnebago County, 109 S. Ct. 998, 1989.

Desmedt, John and James Marsh, *Speedcuffing, A Tactical Handcuffing System*, Great Falls, Virginia: The Police S.A.F.E.T.Y. System, 1983.

Diagnostic and Statistical Manual of Mental Disorders, (3rd ed., revised), Washington, D.C.: American Psychiatric Association, 1987.

Diagnostic and Statistical Manual of Mental Disorders IV, Washington, D.C.: American Psychiatric Association, 1994.

Dunton v. County of Suffolk, N.Y., 729 F. 2d 903, 2nd Circ. 1984.

Frye v. Town of Akron, 759 F. Supp. 1320 (Indiana), 1991.

Garrity v. New Jersey, 385 S. Ct. 493, 1967.

Graham v. Conner, 109 S. Ct. 1865, 1989.

Greenridge v. Ruffin, 927 F. 2d 789, 4th Cir., 1991.

Jackson v. City of Rochester, N.Y., 705 F. Supp.779 (WDNY), 1989.

Kramer, Ralph. "Dynamics of Teamwork in the Agency, Community and Neighborhood." *Social Work 1:3*.

Lehigh County Department of Probation and Parole, Operations Manual, 1993 Revision.

Martin v. Swift, 781 F. Supp. 1250 (E.D. Michigan), 1992.

McClellan v. Facticeau, 610 F. 2d 693, 10th Cir., 1979.

National Institute of Justice Journal, U.S. Department of Justice, Office of Justice Programs, National Institute of Justice, No. 225, August 1992.

Newsday, KYW-TV3, "Shooting of State Parole Supervisor Ed 'Willie' Jones (Video)." March 24, 1993.

Nowicki, Ed. *Total Survival*. Performance Dimensions Publishing: Powers Lake, Wisconsin, 1993.

Oklahoma City v. Tuttle, 105 S. Ct. 2457, 1985.

Oklahoma Department of Corrections, Probation and Parole Safety Questionnaire Results, Undated.

O'Neal v. DeKalb County, GA, 850 F. 2d 653, 1988.

O'Neill, John F. and Thomas C. Vellela, *Pharmacology and Addiction*, Pennsylvania Department of Health, Office of Drug and Alcohol Programs, 1986.

Owens v. Haas, 601 F. 2d 242, 2nd Cir., 1979.

Parsonage, William H., *Worker Safety in Probation and Parole*, National Institute of Corrections, United States Department of Justice, 1989.

Parsonage, William H. and W. Conway Bushey, *The Victimization of Pennsylvania Probation and Parole Workers in the Line of Duty, A Survey*, The Pennsylvania State University, 1988.

Parsonage, William H. and Joe A. Miller, *A Study of Probation and Parole Worker Safety in the Middle Atlantic Region*, Middle Atlantic States Correctional Association (MASCA), 1990.

Pennsylvania v. Mimms, 434 U.S. 106, 1977.

Pincus, Allen and Anne Minahan. *Social Work Practice: Model and Method*. F.E. Peacock Publishers, Inc.:Itasca, Illinois, 1973.

Popow v. Margate, 476 F. 2d 1237, 1246; N.J., 1979.

Presideo (Video), Paramount Pictures, 1988.

"Probation: As Partners with the Community." (Brochure) Massachusetts Trial Court, Office of the Commissioner of Probation (Undated).

Reese v. Anderson, 926 F. 2d 494, 5th Cir., 1991.

Remsberg, Charles. *The Tactical Edge: Surviving High-Risk Patrol*. Calibre Press: Northbrook, Illinois, (9th ed., 1993), 1986.

Renzema, Mark, "The Dangers of Probation Work: A Progress Report on an Exploratory Survey," Kutztown University, 1987.

Reported incidents to Administrative Office of Federal Probation between July 1984 - June 1985.

"Safety and Security," A Report of the ad hoc Probation and Parole Security Committee, Division of Adult Community Corrections, Virginia Department of Corrections, December 1988.

"Staff Safety Training Program," Federal Judicial Center, Staff Safety Curriculum Planning Committee, 1986.

Staff Safety: Training Program (Video). Federal Judicial Center, Staff Safety Curriculum Planning Committee, 1986.

"Standards and Forms For Investigations for the Probation Offices of the Superior Court Department." The Commonwealth of Massachusetts, Office of the Commissioner of Probation, December 14, 1979.

"Standards and Forms For Investigations for Probation Offices of the District Court Department and the Boston Municipal Court Department." The Commonwealth of Massachusetts, Office of the Commissioner of Probation, June 13, 1980.

"Standards and Forms for Risk/Need Classification System for Probation Offices of the Superior Court Department, District Court Department, Boston Municipal Court Department and the Juvenile Court Department." The Commonwealth of Massachusetts, Office of the Commissioner of Probation, November 18, 1988.

"Standards for Supervision for Probation Offices of the Superior Court Department, District Court Department, Boston Municipal Court Department and the Juvenile Court Department." The Commonwealth of Massachusetts, Office of the Commissioner of Probation, (Undated).

"Standards Prohibiting Probation Officers From Carrying a Firearm." Massachusetts Trial Court; Office of the Commissioner of Probation, Superior Court Department, Probate and Family Court Department, District Court Department, Boston Municipal Court Department and the Juvenile Court Department, August 1, 1990.

"Standards and Forms For Investigations for Probation Offices of the Juvenile Court Department, Juvenile Probation District Offices of the District Court Department, and Juvenile Sections of Certain Probation Offices of the District Court Department." The Commonwealth of Massachusetts, Office of the Commissioner of Probation, January 19, 1981.

State v. Bowers, 721 P. 2d 268, 39 CrI 2283 (Kansas), 1989.

"Survival Tactics for Probation Officers" (Slides), Lehigh County Department of Probation and Parole, Division of Staff Development and Training, 1990.

"Survival Tactics for Probation Officers" (Video), Lehigh County Department of Probation and Parole, Division of Staff Development and Training, 1990.

Surviving Edged Weapons (Video). Calibre Press, Inc.: Northbrook, Illinois, 1989.

Tennessee v. Garner, 105 S. Ct. 1694, 1985.

Thomton, Robert. *New Approaches to Staff Safety*. U.S. Department of Justice, National Institute of Corrections, 1994.

U.S. v. Moore, 846 F. 2d 1163, 43 CrI 2210, 8th Circ, 1988.

U.S. v. Ralph Joseph Walker, 941 F. 2d 1086 (Utah), 1991.

"Use of Force and Serious Incidents." Oklahoma Department of Corrections Policy and Operations Manual, 1992.