

<b>CHAPTER: SECURITY AND SUPERVISION</b>	<b>Associated Policy #: [413]</b>
<b>Title: Use of Force Field Standard Operating Procedures (SOP)</b>	
<b>Security Level: "A" - Only Department staff may have access to this document.</b>	
<b>Effective Date: 2/25/2022</b>	<b>Next Review Date: 2/25/2023</b>

## **GENERAL GUIDELINES**

### **A. Scope**

1. When an individual under Department of Corrections' (DOC) field supervision ("supervised individual") presents with dangerous behavior, field staff have a responsibility to intervene. Field staff may employ reasonably necessary force consistent with current-communication (e.g., Advanced Communication Techniques or ACT) and use-of-force training to respond to dangerous behavior. Dangerous behavior refers to several kinds of assaultive behavior including, but not limited to: striking, pushing, kicking, biting, spitting, or throwing bodily fluids or feces. It also includes self-harm and situations that require field staff to physically move a supervised individual who is noncompliant.
2. "Use of Force" refers to any situation in which staff use physical force against an incarcerated or supervised individual, or other person, except for those situations in which security restraints are used in a standard manner for escort or transport. It also refers to the physical coercion employed by DOC staff to achieve a supervised individual's compliance with staff instructions.
3. Use of force does not refer when staff: routinely move supervised individuals; physically interact with compliant supervised individuals (e.g., transporting a compliant supervised individual to court or jail); physically assist a supervised individual to do something they otherwise cannot (e.g., stand up, walk); or provide emergent medical care to a supervised individual who is unconscious.

### **B. Preconditions**

1. All field staff ("staff") may use force when reasonably necessary to protect themselves or other persons.
2. Except in emergent situations, prior to the use of force, staff shall:
  - a. make every effort to de-escalate situations (e.g., exhaust verbal interventions) to the greatest reasonable extent to avoid the need to use force; and
  - b. provide the potential recipient of force with clear directions and a choice to cooperate, if feasible.

### **C. Less-Than-Lethal Force**

Staff shall only use as much force as is reasonably necessary to control the situation with less-than-lethal force strategies and techniques that minimize the likelihood of injury to any person involved. Staff shall only use force when they have a control advantage or are responding to an emergent situation.

### **D. Training Requirement**

Only currently trained, and certified (where appropriate), staff shall engage planned use of force techniques.

1. Staff who are not currently certified in use of force may only use force that is reasonably necessary to protect themselves or others.
2. Trained staff may also use force in additional situations as outlined in the Procedural Application sections below.

**E. Use of Force Visibility**

Staff shall conduct themselves in a professional manner at all times. Staff should recognize that they may be audio- or video-recorded at any time in their workplace, possibly by bystanders.

1. Staff shall refrain from interfering with, or preventing, this type of recording.
2. Staff shall document whether they observed any type of recording of a use of force in their written report of the use-of-force incident.

**PROCEDURAL APPLICATION**

**A. When Force May Be Used**

1. Trained staff may use force (e.g., control and restraint techniques), in accordance with the guidelines established by this SOP and related training only when:

[REDACTED]

5. Only properly trained, and certified (if applicable), staff are authorized to use restraints and oleoresin capsicum (OC) devices.
6. Routine use of restraints during the transportation of compliant supervised individuals does not qualify as a use of force.

**B. Prohibitions on the Use of Force**

Staff shall not:

[REDACTED]

[REDACTED]

6. leave a supervised individual face down after a use of force. Staff shall take actions that prevent positional asphyxiation.

**C. Factors Affecting Use of Force**

1. When using force with a supervised individual, staff shall consider, whenever possible:

[REDACTED]

2. When field staff are faced with a situation where they believe a use of force is necessary, staff shall take into account any factors that could impact the effects of force such as:

[REDACTED]

**D. Levels of Force**

1. Less-than-lethal force is a level of force that would not be reasonably expected to result in serious bodily injury or death.

- a. Staff shall only apply the amount of force that is reasonably necessary to control a situation.
- b. Less-than-lethal force may be employed through the use of control and restraint techniques in accordance with the guidelines established by this SOP and related training only to:

[REDACTED]

- c. Staff shall only have access to, and employ (in accordance with relevant training), less-than-lethal devices that are approved, purchased, and issued by the Department (e.g., OC).
- d. Corrections staff are authorized to use less-than-lethal devices, as addressed in this- and related- document, under the following conditions:

[REDACTED]

- [REDACTED]
2. Lethal Force is force that creates a substantial likelihood of causing serious bodily injury or death. All force has the potential to be lethal, depending on how it is employed and the condition of the individual receiving the force.

#### E. Types of Force

1. Emergent Use of Force
  - a. Emergent uses of force refer to when staff must respond to situations that are unexpected and force is reasonably necessary to gain control of the situation. The following situations are examples:

2. Planned Use of Force (e.g., planned arrest)
  - a. Planned uses of force refer to when staff have the opportunity to plan a use of force. For planned uses of force, staff shall take into account, and employ, resources to maximize the safest outcome. This could include:

#### F. Use of Force Techniques

1. Use of force techniques and tools are available to trained staff so that staff may restrain, secure, or control a supervised individual when reasonably necessary.
  - a. Staff may use control and restraint techniques in the following situations:
  - b. As with any type of force, staff shall only apply the minimal amount of force reasonably necessary under the circumstances to gain control of the situation.
2. Restraints or OC devices are use of force tools that are available to trained field staff so that staff may restrain, secure, or control a supervised individual when necessary.
  - a. Authorized equipment and restraints include:

b. Staff shall not confine a supervised individual in an unnatural or unsafe manner, for example by:

[REDACTED]

ii. securing their feet to the handcuffs behind their back.

**G. Chemical Agent Use [Oleoresin Capsicum (OC) Devices]**

1. The Department shall issue OC devices to all field staff who are currently trained in their use and for those whose positions require them.

2. Staff shall use the following factors to determine whether to use OC devices:

- a. The use of verbal, and other, de-escalation techniques has not resolved the conflict.
- b. The use of non-lethal use of force techniques may result in injury to staff, supervised individuals, or others.
- c. The supervised individual exhibits any of the following:

[REDACTED]

[REDACTED]

[REDACTED]

3. Staff shall use OC devices in accordance with the following:

- a. Staff shall use OC devices in accordance with the manufacturer's specifications and approved training.
- b. Staff shall only use the amount of OC reasonably needed to establish control over the supervised individual and safety for involved persons.
- c. Staff shall only aim the OC (i.e., spray) at the anticipated recipient's face, eyes, nose, or mouth.

4. Staff shall engage in decontamination procedures immediately after control is established and when it is safe to do so. Staff shall make every reasonable effort to employ decontamination procedures for affected individuals as follows:

- a. Read aloud to the individual the O.C. Administrative Warning.
- b. Remove the individual from the contaminated area.
- c. Flush the affected area on the individual's person with clean, cold, water.
- d. Provide fresh air, or another form of ventilation, when practical.
- e. Instruct the individual to breathe normally through their nose.
- f. Provide verbal reassurance and explanation of the effects, as appropriate.
- g. Do not apply lotion, salve, or cream.
- h. Press wet paper towels to the affected individual's face to remove resin from exposed skin; and follow with a dry paper towel.
- i. Instruct individuals wearing contact lenses to remove them before flushing the eyes.

5. Staff shall consider the following:

- a. If the affected individual requests medical attention staff shall immediately summon an ambulance, or other medical assistance. If affected individuals display any symptoms of medical deterioration, even if they reject an offer of medical assistance, staff shall immediately summon an ambulance or otherwise seek medical attention.
- b. If staff employ OC devices while assisting law enforcement, staff shall abide by DOC policy and procedure.

- c. If the affected individual is transferred to the custody of a correctional facility, or another agency, staff shall inform the receiving facility or agency that an OC device was used.
6. Staff shall never use OC devices:
- a. to punish a supervised individual;
  - b. on a supervised individual who is under control or compliant;



**H. Medical Considerations for Use of Force**

1. Universal Precautions:
- a. Staff shall practice universal precautions during uses of force. Universal precautions recommend handling all blood and other body substances as if they are infectious. These precautions are taught in basic First Aid, CPR, and in Bloodborne Pathogens training.
  - b. If a use of force appears imminent staff are encouraged to wear appropriate personal protective equipment.
  - c. Staff shall seek a medical review following any emergent use of force during which they have been, or suspect they have been, exposed to a bodily fluid.

**I. After Care and Injuries**

1. Each District Manager (DM) or designee shall ensure that the following occurs if staff, supervised individuals, or other persons are injured during a use-of-force incident:
- a. Staff shall make a basic assessment of an injured person's medical need to determine next steps (e.g., call 911, direct individual to urgent care facility, apply first aid);
  - b. Staff shall solicit assistance from the most qualified available individual to assess any injuries among persons involved in a use-of-force incident;
  - c. Staff shall call for emergency medical assistance if anyone is injured during a use-of-force incident and one of the following conditions is met: the injured person requests medical attention, or a staff member reasonably believes medical attention is necessary;
  - d. In accordance with the DOC's policy on incident reporting, all staff involved in any use of force shall report to the DM if any injury occurs to them, or there are observable injuries to others, including those that did not require immediate medical attention; and
  - e. Staff shall document the above by completing an incident report and First Report of Injury, if appropriate. A supervisor or DM shall submit the First Report of Injury, as appropriate. Some cases may also require staff to complete a Security and Safety Incident Reporting form (SSIR).
2. Reporting
- a. Staff shall follow the DOC's incident reporting policy to document any use-of-force incident (see also section K. Use of Force Documentation below).
    - i. Incidents involving physical force used by DOC staff to achieve an individual's compliance with staff instructions qualify as use-of-force incidents.
    - ii. Incidents involving routine movement; compliant physical interaction (e.g., transporting a compliant supervised individual to court or jail); staff physically assisting a supervised individual to do something they otherwise cannot (e.g., stand up, walk); or staff providing emergent medical care to a supervised individual who is unconscious do *not* qualify as uses of force.
  - b. Staff shall complete an OMS (Offender Management System) incident report, at a minimum, for any use-of-force incident. Staff shall include the following information:



5. The DM shall report any allegedly excessive uses of force to the Director of Field Services or designee.

**L. Review**

1. DMs (or designees), and a designated operations manager, shall review all of their sites' use-of-force incidents. Additionally, at a minimum, the Director of Field Services, shall review all field use-of-force incidents.
2. The Director of Field Services shall determine if additional review is required by considering whether the incident involved the following factors:
  - a. injuries that required medical attention beyond first aid;
  - b. complaints filed by a party or witness;
  - c. involvement of an individuals with apparent, or known, physical or mental impairments or a developmental disability; or
  - d. whether the DM, Chief of Operations, or their designees, have requested additional review;
3. The Director of Field Services or designee may also require additional review.
4. Incidents requiring additional review, depending on the circumstances, may be reviewed by the Chief of Operations or designee.
5. Any staff member conducting a review shall document the review in OMS.

**M. Training**

1. All field (excluding administrative) staff shall:
  - a. complete the training outlined in the onboarding process (new staff).
  - b. complete and maintain annual certification in Advanced Communication Techniques (ACT).
  - c. complete and maintain annual certification in Non-Lethal Use of Force (NLUOF), including OC.
  - d. complete arrest certification training and any ongoing recertification requirements.
    - i. Staff shall complete their arrest certification prior to conducting physical arrests or handcuffing or performing transports.
2. DMs and Community Corrections Program Supervisors shall ensure that their supervisees are appropriately trained. They shall also ensure that training records are accurate and up-to-date in the appropriate database for their office.
3. Sections M.1. and 2. are not intended to prohibit administrative staff from completing associated training, if authorized.