Less-lethal Weaponry Case Study

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Background

In early 2002, officers from the Long Beach Police Department’s (LBPD) south patrol division were dispatched to a busy downtown area street regarding a woman armed with a knife. During this confrontation, she refused to drop her knife and continued to advance toward officers. Using the less-lethal weaponry available at the time, officers shot her with four beanbag rounds from a less-lethal shotgun, all of which failed to disarm her. The incident ended shortly thereafter with an officer-involved shooting that resulted in the woman’s death. The woman’s death created a divide within a segment of the Long Beach community, which asked the police department to address their concerns.

In the subsequent search for additional less-lethal weaponry options, Chief Anthony W. Batts was searching for innovative tools that would not only decrease injuries to both officers and suspects, but would also help limit the liability and damage claims filed against the department. Chief Batts contacted Deputy Chief Frank G. Fernandez, a colleague with the City of Miami, Florida, Police Department, who was able to refer him to Miami’s recent success with less-lethal technology. In late 2002, the LBPD training division began testing TASER International’s M26 TASER for limited use in the field. Since 2003, when the LBPD widely adopted the Taser, Long Beach has recorded a marked decrease in use-of-force-related officer injuries as well as a drop in liability claims filed against the department.

Long Beach, as any other police department will need to do, had to consider several factors before authorizing the use of the electro-muscular disruption technology as an alternative use-of-force weapon. Departments deploying this technology will need to consider factors including officer and suspect safety, community acceptance, policy, training, liability, and cost. LBPD’s lessons learned may help other departments facing this same challenge.
Deployment

Original Taser deployment in 2002 was limited. At first, the Taser was assigned to field sergeants’ patrol vehicles, SWAT personnel, and the advanced officer training instructors. Its use proved so valuable that additional Taser units were purchased and distributed for further testing in the patrol arena. Select officers were assigned the Taser as a personal weapon so they did not have to wait for a patrol sergeant to arrive on scene.

In 2003, the department purchased the X26 TASER, which was not only smaller, but also more effective due to adjusted wattage and pulse capabilities. The department upgraded its entire cache to the newer model and distributed the Taser to as many officers as there were weapons available.

As of 2006, approximately 900 Tasers are issued throughout the patrol bureau, gang enforcement section, detective bureau, motor division, and SWAT. To preserve the Taser’s field availability, the training division maintains a small surplus to temporarily replace those units that need repair. The manufacturer trained and qualified training division personnel in routine weapon maintenance, part replacement, and general repairs so the units can be refurbished on site. Additional digital power magazines (batteries) and dart cartridges are also maintained to ensure weapon availability.

Policy Considerations

The Taser is considered a less-lethal weapon, and its deployment falls within the department’s use-of-force paradigm. Officers are authorized to deploy the weapon when suspects have made credible threats to harm themselves, others, or officers. Other authorized uses include defending against aggressive actions by a suspect, in riot or unlawful assemblies, during incidents of active resistance, or when it may be necessary to subdue an attacking animal.

Unless reasonable alternatives would pose a greater safety risk to the subject and/or the officer, officers will not use the Taser against handcuffed prisoners, pregnant females, pre-teen children, the elderly, or the physically disabled. Because the Taser is designed to temporarily incapacitate by making the muscle tissue uncontrollably contract, officers are encouraged to target major muscle groups such as the back or legs, avoiding the head and neck.

Each successful Taser deployment, whether a dart or direct contact stun, requires a medical evaluation by emergency room personnel before booking the suspect. In addition to ensuring the suspect receives mandatory medical treatment, the officer who deployed the Taser must complete a use-of-force report. The field supervisor also files a summary report and notifies necessary officials. Once written, the reports are reviewed by several different command levels, including internal affairs, to ensure officers’ policies and training needs remain current, practical, and met.

If the review process reveals issues of concern, department-wide training is instituted to ensure officers are well informed and proficient with the changes and/or clarifications. Debatable deployments are reviewed so that policy changes, retraining, or disciplinary concerns are quickly and consistently addressed if necessary.

Training

Currently, the department has two expert lead instructors as well as several other qualified co-instructors. Each officer undergoes 10 hours of hands-on training when issued the weapon for field use. Re-certification occurs every year, at which time the Tasers are cleaned, tested, and downloaded to ensure the time-stamping mechanism and deployment records are accurate. Officer training and re-certification include simulated scenarios as well as written exam questions at the end of each class.

Benefits

Since the department-wide Taser distribution took place in 2003, the Taser has

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Electro-Muscular Disruption Technology: A Nine-Step Strategy for Effective Deployment

The International Association of Chiefs of Police, supported by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice and in collaboration with the Montgomery County, Maryland, Police Department, developed an executive brief to inform law enforcement leadership on the deployment challenges surrounding the EMDT technology.

This executive brief offers a step-by-step guide to aid law enforcement agencies in selecting, acquiring and using EMDT. The brief focuses on managing the technology to help leaders develop policies, procedures, and training curricula that are responsive and relevant to the needs of their departments and communities.

To obtain a copy of the executive brief, contact the International Association of Chiefs of Police, 515 N. Washington Street, Alexandria, VA 22314; 800-THE-IACP, or visit the IACP web site at http://www.theiACP.org/research/CuttingEdge/EMDT9Steps.pdf

become the most frequently used tool when compared to arrest control techniques and other impact weapons. Using data from June 2003 through June 2005, the other use-of-force options experienced a decline in usage ranging from 27 percent to 63 percent. The impact batons accounted for the smallest drop, while the largest reduction occurred with pepper spray. Because officers would not deploy a Taser against a suspect armed with a gun, there was no change in the officer-involved shooting category.

In spite of a 2 percent increase in arrests and an 8 percent increase in overall uses of force during the same time period, arrest-related officer injuries decreased 25 percent. The significant drop in officer injuries, however, did not carry over to the suspects, whose injuries actually rose 10 percent. The data revealed that the officers inconsistently reported "redness" as an injury rather than a non-injury, which potentially skewed the numbers.

Of the 284 instances where the Taser was deployed between June 2004 and June 2005, only three cases involved serious injuries, while 19 involved moderate injuries. In all three cases involving serious injuries, the injuries were caused by something other than the Taser, and none of the injuries led to death. In most of the 19 cases where moderate injuries were incurred, the injuries were also caused by something other than the Taser. Injuries attributed to the Taser included abrasions and lacerations routinely caused by the fall to the ground after the subject loses muscle control. Due in part to the constant review of policies and procedures, there have been no deaths associated with the use of the Taser.

Effectiveness

Of the 284 Taser deployments, 219 were dart cartridge discharges while 65 were direct skin or clothing contact "drive stuns." 221 incidents were effective (78 percent), and the suspect was taken into custody without further incident. The 63 ineffective deployments related to the distance at which the Taser was fired, thick or impenetrable clothing worn by the suspect, or both darts not striking the suspect for the connectivity of the charge, and other similar factors.

Because the Taser is less invasive than other force options—such as the impact baton or carotid restraint hold—the department anticipated fewer damage claims against the department and internal affairs complaints. This is, in fact, the case. Liability claims filed against the police department fell 33 percent, while internal affairs complaints dropped 9 percent.

Although difficult to quantify, anecdotal reports indicate officers' morale improved with the Taser distribution. Good officer tactics dictate distance as a critical safety factor. Generally speaking, many officers and combative subjects incur injuries when the distance is eliminated and the officer is forced to go hands on with the aggressive subject.

The Taser essentially creates a 21-foot safety zone for the officer in which to gain...
the subject's compliance. Officers immediately acknowledged the Taser's usefulness and recognized the benefit to themselves, the subjects they touch, and the community members who may witness the altercation.

Recommendations
More and more police departments will probably undertake deploying some form of electronic control weapon. Reflecting on the LBPD's experience, any department considering deploying this technology should consider the following:
- Create a searchable, computerized database to compare, cross-reference, and analyze Taser deployments within the scope of all use-of-force options. Include the following categories:
  - Type of deployment (dart cartridge discharge or direct contact stun)
  - Each deployment's effectiveness
  - Injuries to both officers and subjects caused specifically by Taser use
  - How often the Taser is the only response to a combative subject versus how many times it is used in conjunction with other use-of-force options
  - Number of cycles used for each deployment
  - What effect Taser deployment has had on excessive force complaints and liability claims filed against the department
- When writing a deployment policy, clarify who the Taser should and should not be used against, in order to help avoid the potential for death or serious injury to subjects incapable of withstanding the stun.
- Discuss the type of clothing the subject is wearing to ensure the pulse of the darts can penetrate the garments.
- Perform a daily spark test (with the dart cartridge removed) to keep the digital power magazine sufficiently charged for immediate field use. The spark test will also alert officers about any maintenance issues.
- Because the Taser may be used more frequently than other use-of-force options, conduct periodic refresher training for the force options used less frequently.
- Educate officers on the civilian Taser model (X26c) and its stun capabilities. Although the civilian model's wattage is less than the law enforcement model's, the stun cycle's timing increases from five to 30 seconds.
- The LBPD's Taser success has allowed the department to enhance professional service to Long Beach residents while giving officers better options for solving problems, preventing injuries, and ensuring safety. Because the community and media focus on law enforcement tactics and liability, the Long Beach Police Department will continue to search for innovative ways to positively impact our community.

1. Electro-muscular disruption technology (EMDT) uses pulses of electricity to incapacitate suspects. The weapons are designed to deliver up to a 50,000 volt charge with low power and can incapacitate at a distance. Two metal probes connected by thin insulated wires are propelled by either gunpowder or nitrogen gas into the targeted suspect. Once the connection is made, electrical pulses are conducted through the wires for a number of seconds. The electric pulse delivered by EMDT incapacitates suspects by causing the muscles to contract, resulting in the loss of body control.
