

**Maryland Chiefs of Police Association
Maryland Sheriffs' Association**

**Agency Guidelines
For Use of
Electronic Control Devices**

I. Purpose: These guidelines have been developed by the Maryland Chiefs of Police Association and the Maryland Sheriffs' Association to provide assistance to law enforcement agencies in developing training and deployment policies for the use of Electronic Control Devices (ECD), and to encourage the standardization of police practices.¹ These guidelines are not intended to supersede policies established by any agency, but agencies may find these guidelines useful in the development or enhancement of ECD policies.

II. Objective: These guidelines offer suggestions about the training, use, and reporting of the ECD, a non-lethal device, in conjunction with agencies' Use of Force policies. These guidelines recognize the balance required of officers who are charged with serving and protecting the public while at the same time ensuring officer safety. The goal is that officers use the ECD appropriately as a means of reasonable force to accomplish lawful tasks.

III. Definitions:

Electronic Control Device (ECD):

A non-lethal device that emits an electrical energy charge that causes electro-muscular disruption that affects the sensory and motor functions of the central nervous system.

Probe Mode:

Firing two (2) probes from a disposable cartridge which releases electrical discharge pulses to the body.

Drive Stun Mode:

Applying the ECD directly onto the body.

Non-Lethal Force:

Force that is not intended, nor reasonably likely to, result in death or serious physical injury.

Display:

To un-holster the ECD without pointing the device.

¹ ECD's are also referred to as Electronic Control Weapons (ECW) or by one of a number of manufacturer names, such as Taser.®

Deployment:

Pointing the device at a target; may or may not include the display of the laser sight.

Discharge:

The firing of the device with the intent to deliver an electrical energy charge via the probes or a drive stun.

Active Resistance:

Where an individual is displaying physically evasive movements, or verbal communications or other behaviors intended to defeat the officer's attempt to arrest or gain control. Physically evasive movements, verbal communications or other behaviors may include, but are not limited to: physically bracing, twisting, pulling, holding onto objects, fighting words or assuming a stance reasonably perceived by an officer to be a "fighting stance."

Active Aggression:

A threat or overt act, hostile, or attacking movement by an individual, coupled with the present ability to carry out the threat or assault and where a reasonable officer would believe the threat or assault may cause injury to the officer or other individuals. This aggression may include but is not limited to: punching, kicking, biting or pushing.

Passive Resistance:

Where an individual is not actively resisting or being physically or verbally aggressive, however the individual is not complying with the orders of the officer. Examples include but are not limited to: individuals involved in non-aggressive civil disobediences or disturbances and those persons whose behavior is not likely to inflict injury on the officer or other persons.

Imminent Threat of Physical Injury:

The physical or verbal act by an individual which is reasonably perceived by an officer to indicate intent and a present ability to inflict an imminent injury on the officer, another person, or the individual.

Excited Delirium:

State of extreme mental and physiological excitement, characterized by behaviors and symptoms such as extreme agitation, elevated body temperature (hyperthermia), watering eyes (epiphoria), hostility, exceptional strength, and endurance without fatigue.²

IV. Training: Only officers who have received the appropriate training as required by the Maryland Police Training Commission (MPTC) and are authorized by their agencies may carry or deploy an ECD. Only certified instructors will provide the required training and all recertification will occur as required by MPTC.³

² See Police Executive Research Forum, 2010 Guidelines for Electronic Control Weapons.

³ Certification requirements are found at COMAR 12.04.05.01.

a. Officers should receive training that includes identifying certain situations that could increase the likelihood of injury to an individual if the ECD is discharged. Some of these situations may include discharging the ECD:

1. At a fleeing individual who may fall and be injured;
2. At an individual on an elevated structure who may fall and be seriously injured;
3. At an individual operating a vehicle or machinery that may lose control of the vehicle or machinery;
4. At an individual who is physically restrained or handcuffed;
5. At an individual in water who could possibly drown; and
6. At an individual located in an environment where combustible vapors and liquids, or other flammable substances are present.

b. Officers should receive training that includes identifying certain physical conditions which potentially could increase the likelihood of injury to the individual if the ECD is discharged. These conditions may include discharging the ECD on the following individuals:

1. Elderly individuals or children;
2. Frail individuals;
3. Pregnant women;
4. Mentally disturbed individuals; and
5. Individuals under the influence of drugs.

c. With regard to the use of force, officers should receive training that includes current medical information on the physical and psychological conditions (such as excited delirium syndrome) that may significantly influence the officer's decision on whether it is reasonable to use force that includes the use of the ECD.

d. Officers may consider deploying an ECD when confronted with aggressive animal attacks. Agency policy should dictate whether ECD use against animals is permitted.

V. Wear and Carry/Care and Maintenance:

a. The ECD, when not being worn by the officer, should be stored in the designated holster and transported in a safe and secure manner. When not in the possession of the officer, the ECD should be stored in a secure location. When stored in the officer's residence, the cartridge should be removed from the ECD and secured out of the reach of children and other individuals.

b. Only authorized individuals may make any adjustments to the ECD or its holster. Officers will wear the holster and carry the ECD in accordance with Agency policy. Absent exceptions stated in Agency policy, the holster will be worn on the opposite side of the officer's issued handgun.

c. Officers should perform a spark test and inspect the ECD on a daily basis to ensure proper functioning and to ensure that the device is free of dirt and other debris that may affect its reliability.

VI. Discharge:

a. The most frequently utilized mode of an ECD is the Probe Mode since the Probe Mode is designed for incapacitation of an individual from a distance and may negate officer-individual physical contact.

b. The Drive Stun Mode is the option employed when the officer is in physical contact with the individual and is used as a pain compliance mechanism similar to pressure point and arm bar conformance techniques.

c. Any use of the ECD shall be in conformance with the Agency's Use of Force policies.⁴

d. When an officer is faced with situations involving less than active aggression, but encounter active resistance, the officer may discharge the ECD when he has a reasonable belief, based upon articulable facts, that it may be unsafe or present a tactical disadvantage to the officer to attempt to physically engage the individual. Factors to consider may include the severity of the offense, the threat of harm to the officer or others, whether the individual is resistant, fleeing or failing to obey lawful orders, and whether alternative means of restraint are available.

e. Officers may use an ECD when confronted with active aggression and when confronted with individuals who may cause physical harm to themselves.

f. Officers shall not discharge an ECD in response to passive resistance as defined by these guidelines.

g. Prior to the deployment of the ECD, officers should, when feasible, announce to the individual and other officers, that the ECD is about to be deployed. This announcement will alert the non-deploying officers that the ECD is being discharged and to potentially minimize any confusion that the sound associated with the discharge is not a firearms discharge.

h. After a discharge, officers should reassess the situation and evaluate whether additional discharges are necessary. Any force used must be objectively reasonable under the circumstances in order to gain control over or arrest an individual. Where practical, no more than one ECD should actively deliver an electrical charge against an individual at one time.

⁴ Use of Force policies should consider the implementation of de-escalation techniques. De-escalation techniques should be considered when, in the officer's view, the approach is feasible under the circumstances of the arrest situation. Sometimes the mere display of the ECD or its laser sight may be an effective de-escalation technique. In addition, use of the ECD will often prevent the need to use a more serious level of force such as deadly force.

i. When possible, officers should target the lower center mass (below chest) for front shots and below the neck area for back shots and not target the individual's groin, neck, face, hands, feet, upper chest, or anywhere on the head with the ECD.

j. The Drive Stun Mode may be considered when use of the Probe Mode deployment is not practical. Multiple applications are discouraged and use should cease once the suspect complies. The following factors should be considered before using the ECD in the Drive Stun Mode:

1. The Drive Stun Mode is used primarily as a pain compliance tool; and
2. The Drive Stun Mode alone does not inhibit the central nervous system of the individual and therefore may be less effective when compared to the Probe Mode discharge.

k. The use of an ECD in any manner for the purpose of punishing an individual is strictly prohibited.

VII. Medical Care:

a. Individuals who have been subjected to a discharge from an ECD should be restrained in a manner and position that does not interfere with their breathing.

b. Individuals who have been subjected to a discharge from an ECD will be evaluated by an on-scene officer who will perform a basic assessment of the individual's physical condition to determine whether advanced medical care is necessary. If there is any reasonable concern that the individual may be suffering from a serious or potentially life-threatening medical condition, advanced medical support will be alerted and requested to immediately respond.

c. The decision to remove the electrical probes from the individual should be determined by Agency policy after consultation with the appropriate Medical Services Provider. Consideration should be given to the fact that the probes are sharp and may be contaminated by body fluids. The removal of the electrical probes should be treated accordingly to reduce the risk of injury and disease.

d. Whenever an individual has been subjected to a discharge from an ECD, the arresting officer will notify the transporting officer who will notify the jail or detention center personnel that the individual has received a discharge from an ECD. An individual receiving a discharge from an ECD will be monitored in accordance with Agency policy.

VIII. Reporting Procedures:

a. Incidents where officers merely display or deploy the ECD may not require a formal report. However, whenever there is any discharge of the ECD for any purpose, a report shall be submitted.

b. In every case where an officer discharges the ECD and where the individual receives an electrical charge, the officer or the officer's supervisor, will ensure that the following information is collected and submitted:

1. A report describing the circumstances of the discharge and the name of the individual(s), and officers(s) involved as well as any witnesses. At a minimum, the report should incorporate the date, time, and location of the incident, descriptive information about the individual, including whether the individual possessed any weapons, the type of crime or incident in which the individual was involved, the type of clothing worn by the individual, ECD and cartridge(s) serial numbers, the number of ECD cycles and durations of each cycle if this can be determined;
2. Brief description of medical care provided;
3. Photographs of the scene and gathering of physical evidence when appropriate;
4. Photographs of any injuries to the officer(s) and individual(s);
5. Documentation related to data downloads of the ECD; and
6. Radio transcripts when appropriate.

c. Whenever practical, a supervisor should respond to the scene when an individual has been subjected to an electrical charge from an ECD. The supervisor should ensure that all aspects of the ECD protocol and policy have been followed. Additionally, supervisors should ensure that the ECD cartridge, wire leads, darts, and the anti-felon identification (AFID) tags are placed in Property-Evidence Records as evidence. This evidence shall be maintained for a period of at least thirty-six (36) months.

d. If serious injury or death results from the ECD discharge, the ECD must be examined by trained personnel to determine whether the device was functioning properly. The ECD will be placed in Property-Evidence Records as evidence and maintained for a minimum of thirty-six (36) months.

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