ABRIDGED SUMMARY OF CATEGORICAL USE OF FORCE INCIDENT AND FINDINGS BY THE LOS ANGELES BOARD OF POLICE COMMISSIONERS

LAW ENFORCEMENT RELATED INJURY – 063-15

<table>
<thead>
<tr>
<th>Division</th>
<th>Date</th>
<th>Duty-On (X) Off ( )</th>
<th>Uniform-Yes (X) No ( )</th>
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</thead>
<tbody>
<tr>
<td>Mission</td>
<td>07/30/15</td>
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<thead>
<tr>
<th>Officer(s) Involved in Use of Force</th>
<th>Length of Service</th>
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<tbody>
<tr>
<td>Officer A</td>
<td>19 years, 10 months</td>
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<tr>
<td>Officer B</td>
<td>11 months</td>
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<tr>
<td>Officer C</td>
<td>10 year, 4 months</td>
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<tr>
<td>Officer D</td>
<td>5 years, 4 months</td>
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**Reason for Police Contact**

Officers observed a suspect in possession of narcotics. Officers contacted the Subject, who resisted, and a Law Enforcement-Related Injury (LERI) ensued.

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<tr>
<th>Subject(s)</th>
<th>Deceased ( ) Wounded (X) Non-Hit ( )</th>
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<tbody>
<tr>
<td>Subject: Male, 40 years of age.</td>
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**Board of Police Commissioners’ Review**

This is a brief summary designed only to enumerate salient points regarding this Categorical Use of Force incident and does not reflect the entirety of the extensive investigation by the Los Angeles Police Department (Department) or the deliberations by the Board of Police Commissioners (BOPC). In evaluating this matter, the BOPC considered the following: the complete Force Investigation Division investigation (including all of the transcribed statements of witnesses, pertinent subject criminal history, and addenda items); the relevant Training Evaluation and Management System materials of the involved officers; the Use of Force Review Board recommendations; the report and recommendations of the Chief of Police; and the report and recommendations of the Inspector General. The Department Command staff presented the matter to the BOPC and made itself available for any inquiries by the BOPC.

Because state law prohibits divulging the identity of police officers in public reports, for ease of reference, the masculine pronouns (he, his, and him) will be used in this report to refer to male or female employees.

The following incident was adjudicated by the BOPC on July 12, 2016.
**Incident Summary**

Officers were briefed on recent crime trends by their Watch Commander. Extra patrol had been requested at a strip mall due to numerous citizen complaints of transients aggressively begging and disturbing the peace, as well as prostitution activity. In addition, a Trespass Arrest Authorization Letter had been placed on file by the property management company, authorizing members of the Los Angeles Police Department (LAPD) to enter the property and act as their representative in enforcing local trespassing laws.

Officers A and B were assigned to patrol the area of the strip mall. Officer B was the driver of a marked black and white police sport utility vehicle, and Officer A was the passenger. The officers observed three males congregating near a dumpster in the southeast corner of the parking lot to the rear of the strip mall.

Officer B drove the officers’ vehicle into the strip mall’s parking lot as Officer A notified Communications Division (CD) they had arrived at the location (“Code Six”).

Officer B parked his police vehicle facing along the south side of the parking lot, near the dumpster. Officer B exited his police vehicle and observed one of the individuals, the Subject, in possession of a hypodermic needle, and the second, Witness A, in possession of a screwdriver.

Officer B notified his partner, who had also exited the vehicle, of his observation. Officer B, believing that narcotics were being used and having observed Witness A armed with a screwdriver, armed himself with his service weapon.

Officer A stated the Subject appeared agitated and was sweating profusely. Furthermore, he observed that the Subject was grinding his teeth, grunting and exhibiting muscle rigidity. Officer A, through his previous training and experience, opined that the Subject was under the influence of narcotics and believed it to be a combination of methamphetamine and heroin. Due to the Subject’s behavior, Officer A’s knowledge of the high crime in the area, and that the area is frequented by transients and individuals that are on probation and/or parole who are sometimes armed, Officer A armed himself with his service weapon.

Officer B commanded the Subject and Witness A to drop the items, and they both complied. As they were being instructed to turn around and place their hands behind their backs, the third individual, later identified as Witness B, emerged from behind the dumpsters. Witness B was also directed to turn around and place his hands behind his back. He also complied. Upon doing so, Witness B notified Officer A that he required the use of a wheelchair, which Witness B already had on scene.

Officers A and B holstered their weapons and the three individuals were detained for investigation of trespassing and possession of narcotics. Officer B handcuffed the
Subject and Officer A, after handcuffing Witnesses A and B, allowed Witness B to sit down on his wheelchair.

With the intention of furthering their investigation, the officers opted to secure the Subject and Witness A in their police vehicle. Officer A instructed Officer B to place the Subject in their police vehicle and Officer B escorted the Subject to the vehicle’s rear passenger side. When Officer B opened the rear passenger door, the Subject, who was facing the police vehicle, stated, “Don’t put me back there. Just let me go.” The Subject then locked out his legs, preventing Officer B from placing him in the rear of the police vehicle. Officer B instructed the Subject to, “Get in the car,” and attempted to calm him by stating, “We can talk about what’s going to happen from there.”

Officer B was asked if he believed that the Subject understood why he was being arrested, and Officer B stated, “Because he knew, he saw that I observed the needle in his hand when we approached, and then as I placed him in handcuffs, that the needle was containing narcotics. So I believe that he understood that he was going to be arrested for the narcotics.”

Officer A, who was still in front of the police vehicle with Witnesses A and B, heard his partner instruct the Subject multiple times to stop resisting and enter the police vehicle. With Witness B still seated on his wheelchair, Officer A walked Witness A to the passenger side front quarter panel of the police vehicle, where he could maintain a visual on him, and had him stand facing the front of the vehicle. Officer A then responded to his partner’s location, at the passenger side rear quarter panel, to assess the situation. Upon joining his partner, Officer A observed the Subject, “throwing his body weight back, locking his legs, refusing to get in the car,” and requested a backup.

The Subject continued to resist the officers and Officer B warned him that, “if you keep resisting, we’ll use force and you may be injured.” The Subject then utilized his body weight and pushed back against Officer B, causing Officer B to become unbalanced. Officer B utilized a firm grip on the Subject’s left arm in an effort to control him. Officer A, who was to the right of the Subject, placed his left hand on top of the Subject’s right wrist, placed his right hand under the Subject’s right elbow, and applied a rear wrist lock.

The Subject continued to resist and lunged forward toward the police vehicle. Officer A, having lost his full grip on the Subject’s wrist, reapplied the wrist lock and then moved his right arm under the Subject’s right arm. Then, Officer A, with his right hand, placed it on the Subject’s back to “gain some leverage and gain some pain compliance.” Both officers repeatedly commanded the Subject to stop resisting as they attempted to use the rear quarter panel of the police vehicle as a controlling agent. The Subject continued to lunge forward and side to side, causing both officers to become unbalanced.

In an effort to gain control of the Subject, Officer A decided to utilize the ground as a controlling agent and notified his partner. While maintaining control of the Subject’s
arms and wrists, the officers backed him up in a southerly direction. The officers then rotated the Subject clockwise, lifted him up to cause him to become unbalanced and laid him face-down on the ground with his head facing away from the police vehicle.

Officer B, on the Subject’s left side, immediately placed his left knee on the Subject’s left, mid-back area and his right knee on the Subject’s left upper leg area. Officer A, on the Subject’s right side, placed his right knee on the Subject’s upper back area while continuing to instruct the Subject to stop resisting. The Subject was, “thrashing violently about,” and, because it was, “difficult dealing with the suspect and his aggressive actions,” Officer A placed his left knee on the Subject’s left lower back area.

While applying body weight to the Subject, Officer A observed an additional police unit entering the parking lot. Realizing his backup unit had arrived, and concerned that the Subject could overdose on narcotics, Officer A decided that for the Subject’s safety, it would be beneficial to stand him up. Officer A asked the Subject if he was going to stop resisting and comply with their request to get in their police vehicle. The Subject’s aggressiveness subsided and he acknowledged Officer A in the affirmative. As the officers began to assist the Subject to his feet, he again began to aggressively thrash his body. Officers A and B placed him back onto the ground and reapplied body weight (knees to the Subject’s back and upper leg area) as Police Officers C and D approached on foot.

Officer D noted that although Officers A and B were applying body weight to the Subject, he was still thrashing his body and violently kicking his legs at them. Officer D opted to deploy a hobble to the Subject’s legs to, “avoid any injury to the suspect because of him thrashing his legs, but also to prevent any injury to officers who were applying body weight to him.” As Officer D joined Officers A and B, Officer C deployed to a guarding position between them and Witnesses A and B.

Officer D removed his hobble from his sap pocket and bent down near the Subject’s feet in an attempt to control them. The Subject continued to kick his legs, and Officer C observed Officer D struggling to gain control of them. Officer C concluded that his partner required assistance and directed Witness A, who was compliant and nonaggressive, toward the fence along the south portion of the parking lot, where Officer C instructed Witness A to remain. Meanwhile, Officer D was able to gain control of the Subject’s left leg and placed the loop of the hobble over his left ankle. The Subject continued to thrash his body and kick his legs and, as Officers A and B attempted to control the Subject’s upper body, Officer D attempted to gain control of his right leg without success.

As Officer C responded to his partner’s location, he observed the Subject’s right leg go toward Officer D’s chest area and opined that the Subject was trying to kick Officer D. Officer C advised Officer D that he was going to retrieve his (Officer D’s) TASER and removed it from a drop holster, which Officer D wore on his left (weak hand) side.
Once armed with the TASER, due to the close proximity to his partner officers, Officer C removed the cartridge in preparation for a drive stun (direct contact). As the Subject continued to resist and kick his legs, Officer C verbalized with the officers on scene that he was going to utilize the TASER and, from along the Subject’s right torso area, placed the TASER probes on the Subject’s right calf area and activated it.

Officer C advised he did not give the Subject a warning prior to activating the TASER because the Subject was, “combative and fighting with the officers and presented a danger.” Furthermore, “It wasn’t feasible. We needed to stop his actions.”

The Subject momentarily stopped resisting, which provided Officer D the opportunity to gain control of the Subject’s right leg and place the loop of the hobble over his right ankle. Officer D tightened the loop of the hobble, thus binding the Subject’s ankles together. Officer C warned the Subject that if he continued to resist officers and attempt to kick them, he would utilize the TASER again and that it would hurt.

With the Subject’s ankles now bound, Officer D attempted to complete the hobble application by tying a knot in it. The Subject again began “to thrash some more, still moving violently, being aggressive.” Officer D, unable to tie the knot, held onto the hobble in order to maintain control of the Subject’s legs. The Subject, still face down, managed to bend his knees, and Officer C observed the Subject utilize both his legs and, “he kick[ed] them up at that point as my partner is trying to move around and redeploy and still maintain control of the hobble, the suspect’s leg goes toward my partner.” Officer C, in an effort to, “stop him from actually striking my partner” and to, “gain that desired effect of subduing him,” opted to again utilize the TASER. Officer C placed the TASER probes on the Subject’s right calf area and activated the TASER for a second time.

The Subject’s legs went to the ground, and Officer D was able to successfully tie the knot on the hobble. Officers broadcast that the incident had been resolved (Code-4) and included a request for two additional units and a supervisor. With the Subject securely hobbled, Officer A asked him again if he was ready to stop resisting so that he could be placed in their police vehicle. The Subject again responded in the affirmative.

As Officers A and B maintained control of the Subject’s arms, Officer D controlled the Subject’s legs and the three lifted the Subject and began to carry him to the rear passenger side of the police vehicle.

Sergeant A, who had initiated his response when the backup was requested, arrived at scene. As he exited his police vehicle, he noted that the Subject was already in custody and that two other handcuffed individuals (Witnesses A and B) were along the south side of the parking lot unattended. Sergeant A responded to Witnesses A and B’s location in order to provide cover. Simultaneously, other back-up officers arrived at the scene.
As Officers A, B and D assisted the Subject to his feet, in order to seat him in the police vehicle, Sergeant A directed the non-involved officers to relieve him of his position and cover Witnesses A and B.

Meanwhile, Officer C, having secured the TASER in his back uniform pants pocket, deployed to the opposite side (driver’s side) of the police vehicle. The Subject again began to resist as Officers A, B and D guided him further into the police vehicle, via the rear passenger door. Officer C, who had entered the rear driver’s side of the vehicle, assisted the officers by controlling the Subject’s upper body.

Once inside of the police vehicle, the Subject began to yell and spit, causing his saliva to be projected about the interior. Officer C observed blood in the Subject’s mouth and exited the vehicle. Officer C then requested a spit hood to, “avoid any sort of hazmat or any bio-haz situation.”

Officer D relinquished control of the hobble to Officer B, retrieved a spit hood and provided it to Officer C. As Officer B applied a firm grip on the Subject’s arm to prevent him from thrashing, Officer C reentered the vehicle and, with the assistance of Officer A, placed the spit hood over the Subject’s head.

Officer C ensured the Subject was in an upright position and then closed the rear driver’s side door. Officer B closed the rear passenger side door with the end of the hobble extending outside. Officer B secured the end of the hobble device through the front passenger door prior to closing it. Sergeant A then approached the police vehicle and met with the involved officers.

Sergeant A met with Officer A, who informed him that force was utilized to effect the arrest. Sergeant A immediately began to investigate the incident as a non-categorical Use of Force (UOF), by identifying the officers who were involved and by attempting to interview the Subject. As Sergeant A began to converse with the Subject, he noted that the Subject had a blank stare, was breathing heavy and would not respond to questions. Having been briefed that the Subject had been in possession of a hypodermic needle, Sergeant A feared the Subject may be suffering from a possible overdose and requested a Rescue Ambulance (RA) to respond.

With the RA en route, Sergeant A continued to conduct his investigation by photographing the scene and speaking with both Witnesses A and B regarding their observations. Witness A advised Sergeant A that he did not witness the incident and refused to provide a statement. According to Sergeant A, Witness B informed him that the Subject was a narcotics user who had recently been released from a local hospital for a psychological issue. Per Sergeant A, Witness B further stated that when the officers attempted to detain the Subject, “He went off,” and that the Subject had, “thrashed around,” and, “kicked at the officers”.

Los Angeles Fire Department personnel arrived at scene. Fire Captain A, upon being briefed that the Subject was possibly under the influence and had been tased, observed
the Subject and noted that he was, “making noises and talking in a psychotic fashion,” and opined that he was under the influence of an illicit drug. Paramedics approached the Subject to assess his medical condition and attempted to converse with him. The Subject, who was conscious and breathing, did not respond to the paramedic’s questions.

Shortly thereafter, an RA, staffed by Firefighter/Paramedics arrived at scene. In order to treat the Subject, LAFD personnel requested the Subject be removed from the police vehicle and placed on a gurney.

Sergeant A requested the gurney be positioned closer to the police vehicle as Officer C discussed with officers their assignments when removing the Subject. Prior to opening the door, Officer C, via the slightly open rear passenger window, verbally warned the Subject not to attempt to break away or strike out at the officers or fire department personnel, or he would utilize the TASER again. Officer A took control of the hobble as Officer B opened the rear passenger door. Officer B advised the Subject that RA personnel were going to examine him and instructed him to exit. Standing to the Subject’s right, Officer B assisted the Subject and faced him toward the front of the police vehicle. Once the Subject’s feet were both on the ground, he again began to resist. The Subject then turned clockwise in the direction of Officer B and lunged at him, head first. Officer B grasped the Subject’s left forearm and turned him further clockwise so that the Subject was now facing the rear of the police vehicle.

Officer C warned the Subject that if he didn’t stop resisting and sit on the gurney, he would utilize the TASER again. The Subject continued to resist Officer B by swinging his shoulders violently and using his weight in an attempt to pull away from his grasp. As Officer B began to lose his grip on the Subject’s left forearm, Officer C announced that he was going to utilize the TASER again. Sergeant A was unsure if Officer C was asking permission to utilize the TASER or merely notifying the officers of his intention. Believing the Subject was in need of immediate medical attention and to ensure that no officers were hurt due to the Subject’s violent actions, Sergeant A responded, “Yea, go ahead and Tase him.”

Officer C placed the TASER probes on the Subject’s left forearm area and activated the TASER for a third time. The Subject momentarily stopped his resistance, and Officer B, with the assistance of LAFD personnel, assisted the Subject into a seated position on the gurney.

With the Subject seated on the gurney, the paramedics removed the spit hood and replaced it with one of their (LAFD) own. The gurney was then laid supine and the Subject was handcuffed to it prior to LAFD securing him with soft restraints. The Subject was loaded onto the RA and transported to the hospital.

The Subject arrived at the hospital, where hospital personnel removed the hobble and the spit mask. The Subject was treated in the emergency room for being under the influence of narcotics and for an abrasion to the right side of his face.
Later that day, the Subject was released from the hospital with medical approval to book at a Department facility. He was transported to the local police station while waiting for the necessary reports to be completed. The Subject was entered on the Adult Detention Log, and Sergeant B signed the log acknowledging that he had inspected the Subject and interviewed him.

The Subject was transported to the jail for booking. The Subject was brought to the jail dispensary for medical clearance, where he began to complain of chest pain. An RA transported the Subject to another hospital.

The Subject arrived at the Hospital Emergency Room (ER) and was examined by a doctor. The Subject remained in the ER while a series of tests were being conducted. After reviewing the test results, the doctor admitted the Subject for further observation.

The doctor later noted in the Subject’s medical records that the Subject possessed elevated Creatine Phosphokinase (CPK) and had mild rhabdomyolysis. The doctor opined that the rhabdomyolysis was likely due to, “a combination of polysubstance abuse and sympathomimetic with concomitant TASER.”

FID Detectives responded to the hospital to determine whether the circumstances of the Subject’s arrest constituted a Law Enforcement Related Injury (LERI) under FID guidelines.

The next day, FID Detective A, along with FID Lieutenant A and FID Detective B responded to the hospital to meet with emergency medical personnel. The attending physician advised that the Subject was admitted due to a combination of the narcotics use and of being tased. Lieutenant A concluded that the incident would be handled by FID as a LERI, and notified Sergeant B.

FID Detectives A and B conducted a recorded interview of the Subject. After waiving his Miranda rights, the Subject stated that he was alone at the location and did not recall much about the incident. Although he recalled resisting officers, he did not initially recall being tased, nor was he aware of what part of his body was tased. The Subject further advised that he was under the influence of heroin at the time and resisted officers because he was scared. The Subject had no independent recollection of how he arrived at the hospital.

Sergeant B spoke telephonically with Officers A, B, C and D, and advised them not to discuss the incident until interviewed by FID personnel. Sergeant B documented the notifications on his WC log. FID Detective C reviewed the WC log and concluded that the protocols were complied with and properly documented.
**Los Angeles Board of Police Commissioners’ Findings**

The BOPC reviews each Categorical Use of Force incident based upon the totality of the circumstances, namely all of the facts, evidence, statements and all other pertinent material relating to the particular incident. In every case, the BOPC makes specific findings in three areas: Tactics of the involved officer(s); Drawing/Exhibiting of a firearm by any involved officer(s); and the Use of Force by any involved officer(s). All incidents are evaluated to identify areas where involved officers can benefit from a tactical debriefing to improve their response to future tactical situations. This is an effort to ensure that all officers benefit from the critical analysis that is applied to each incident as it is reviewed by various levels within the Department and by the BOPC. Based on the BOPC’s review of the instant case, the BOPC made the following findings.

A. **Tactics**

The BOPC found Officer A’s tactics to warrant Administrative Disapproval, and Officers B, C, D, and Sergeant A’s tactics to warrant a Tactical Debrief.

B. **Drawing/Exhibiting**

The BOPC found Officers A and B’s drawing and exhibiting of a firearm to be in policy.

C. **Non-Lethal Use of Force**

The BOPC found Officers A, B, and D’s use of non-lethal force to be in policy.

D. **Less-Lethal Use of Force**

The BOPC found Officer C’s use of less-lethal force to be in policy.

**Basis for Findings**

A. **Tactics**

- In its analysis of this incident, the BOPC considered the following:
  1. **Contact and Cover**

     Officers A and C left two handcuffed suspects unattended as they attempted to control the Subject.

     Officers are trained to utilize the concept of contact and cover, in which one officer initiates action while the other provides cover. Operational success is based on the proper assumption of contact and cover roles during contacts with the public in an effort to maintain the tactical advantage. Engaging suspect(s) in
a tactical situation can be fluid, fast paced and can contain multiple threats to overcome.

In this case, the officers left the handcuffed suspects unattended to come to the aid of their partners who were struggling with a resistive suspect. The officers were aware that suspects had been compliant and had already been searched. According to Officer A, he also left Witness B at the front of the police vehicle, seated in his wheelchair and placed Witness A adjacent to the passenger side front quarter panel of the police vehicle, where he could keep an eye on him before going to assist his partner. Officer C also indicated that he had positioned Witness A next to a nearby fence and directed him not to move.

Although the officers were aware of the suspects’ positions, they placed themselves at tactical disadvantage by leaving them unattended while they dealt with a combative suspect.

The officers are reminded of the importance of maintaining contact and cover roles during field contacts.

2. Agitated Delirium

With regard to Tactical Debriefing Point No. 1 – *Contact and Cover*, the BOPC recognized that Officer A was the senior officer directing the actions of Officer B. Officer A advised that he had just passed Officer B on to phase three of his field training. During his interview with FID, Officer A shared that he has almost two decades of experience in dealing with narcotics offenders. He said that he is a court qualified expert in possession for sale of methamphetamine and in the central nervous system stimulants. He also said that he has attended numerous department narcotics schools, and he has been certified as a DRE (Drug Recognition Expert). Officer A failed to alert Officer B of his observations and concerns about the Subject’s symptomology and apparent state of Agitated Delirium.

Officer A directed Officer B to handcuff the Subject while Officer A focused his attention on handcuffing the other two detainees. These actions placed both officers at a tactical disadvantage, and left Officer B to have to initially deal with the Subject’s resistance alone.

The BOPC believes that incidents of this nature, in which Officer A’s experience and observations clearly indicated that the Subject was in a state of Agitated Delirium, are a classic example of the reasons the Department’s Use of Force-Tactic Directive on this topic was issued. The BOPC also believes that even if Officer A did not consider Agitated Delirium as an issue, he should have utilized proper contact and cover tactics in taking the Subject into custody.
Officer A did not follow the following tactical considerations for addressing the challenges of AD:

- The officers did not have a tactical plan for dealing with the Subject.
- The officers did not consider the tactical “4-C’s”. They did not effectively Control, Communicate, Coordinate, and Control.
- Although Officer A stated in his interview that his partner had checked out an X-26 TASER from the kit room at the beginning of their shift, and Officer B stated that he was carrying the TASER in a holster on his left leg, there was no consideration of the use of a TASER until back-up officers arrived.
- Upon initial contact, and prior to handcuffing, Officer A clearly recognized the violent threat that the Subject posed, yet still he did not request a backup or wait for an arrest team or additional resources before directing his partner to handcuff the Subject and place him into their police car.
- While Officer B handcuffed the Subject, Officer A directed his attention from the Subject to handcuffing the other two subjects, failing to observe basic cover and contact principles and placing both officers at a tactical disadvantage.
- The officers did not have a rescue ambulance (RA) standing by or en route prior to handcuffing the Subject.

In addition, the BOPC believes that Officer A, without justification, further delayed a request for an RA after he recognized the need for one.

After Officers A and B had taken the Subject to the ground, stabilized the situation, and were waiting for backup, they neglected to call for an RA. Officer A stated that he was concerned that the suspect may be OD-ing and he was concerned for his safety, so he didn't want to keep the Subject on the ground for a long time. Officer A indicated he wanted to get the Subject up off the ground so he could breathe, and he wanted to get an RA coming. Officer A was also asked if he saw or heard anything that made him believe that the Subject was having trouble breathing. He replied, “I did not particularly hear that, but it's been my training and experience that when somebody's, you know, under a central nervous system stimulant, their heart is going at a very, very fast rate, and I, I didn't want to, I foresaw this. So knowing that, you know, I wanted to get him off the ground as soon as practical.”

Although Officer A expressed that he was very concerned that the suspect may be overdosing and that his intentions were to call for an RA, he never made such a request. Eventually, he put out a request for a back-up. A Code-4 was broadcast with a request for two additional units and a supervisor. No request for an RA was made. Sergeant A arrived on scene. After being briefed on the circumstances of the arrest, Sergeant A feared that the Subject may be suffering from a possible overdose, and a few minutes later, he requested an RA. This
request was made approximately 7 minutes from the time Officer A said he intended to request an RA.

Based on the totality of the circumstances, the BOPC believes that Officer A’s failure to follow the guidelines for contact and cover, and failure to follow the guidelines for addressing the challenges of dealing with a person in a state of Agitated Delirium, constituted an unjustified and substantial deviation from approved Department training.

- The evaluation of tactics requires that consideration be given to the fact that officers are forced to make split-second decisions under very stressful and dynamic circumstances. Tactics are conceptual and intended to be flexible and incident specific, which requires that each incident be looked at objectively and the tactics be evaluated based on the totality of the circumstances.

Each tactical incident merits a comprehensive debriefing. In this case, there were additional areas where improvement could be made and a Tactical Debrief is the appropriate forum for the involved personnel to discuss the incident and the individual actions that took place during this incident.

In conclusion, the BOPC found that Officer A’s tactics warranted Administrative Disapproval, and Officers B, C, D and Sergeant A’s tactics warranted a Tactical Debrief.

B. Drawing/Exhibiting

Officer A observed the Subject holding a hypodermic needle in his hand that appeared to be loaded with narcotics and displaying behavior consistent with an individual under the influence of a nervous system stimulant. Officer B observed Witness A armed with a screwdriver. Based on the totality of the circumstances, the officers drew their service pistols.

Based on the totality of the circumstances, the BOPC determined that an officer with similar training and experience as Officers A and B, while faced with a similar circumstance would reasonably believe there was a substantial risk the situation may escalate to the point where deadly force may be justified.

Therefore, the BOPC found Officers A and B’s drawing and exhibiting of a firearm to be in policy.

C. Non-Lethal Use of Force

- **Officer A** – Firm grip, Twist lock, Wristlock, Physical Force, Takedown, Body weight.
- **Officer B** – Firm Grip, Takedown, Body weight.
- **Officer D** – Firm Grip, Hobble Restraint Device.
Officer B escorted the Subject to the rear passenger door with the intention of placing him into the rear seat of their vehicle. As he opened the rear passenger door, the Subject locked out his legs, used his body weight to push against him [Officer B] while stating, “Just let me go. Don’t put me back there.”

Officer A observed that the Subject was starting to resist and refusing to get in the police vehicle and immediately went to assist his partner. Officer B grabbed the Subject’s left arm as Officer A grabbed the Subject’s right arm, and then together took the Subject to the ground.

The Subject started to calm down and agreed to be placed in the police vehicle. Once the officers assisted the Subject into a standing position, the Subject immediately began trying to pull away and lunged, just violently pushing into the officers, resulting in the officers again, taking him to the ground for a second time.

Officer D observed the Subject thrashing his legs and kicking at the officers, and deployed his HRD to secure the Subject’s legs. Officer D was able to place the HRD around the Subject’s left leg but was unable to apply the HRD to right leg because of the Subject’s continued resistance. Officer C observed the Subject thrashing his legs and being extremely combative and delivered a drive stun activation to the Subject to stop his resistance, which enabled Officer D to secure the HRD around the Subject’s right leg.

The BOPC determined that an officer with similar training and experience as Officers A, B and D would reasonably believe the applications of non-lethal force to overcome the Subject’s resistance and effect an arrest were reasonable and would have acted in a similar manner.

In conclusion, the BOPC found Officers A, B and D’s non-lethal use of force to be objectively reasonable and in policy.

D. Less-Lethal Use of Force

- **Officer C** – (TASER, three applications in drive stun mode)

  Officer C observed the Subject thrashing his legs around and being extremely combative and went to assist Officer D. Officer C then retrieved the TASER, removed the TASER cartridge. Officer C proceeded to deliver a drive stun activation to the Subject’s right calf.

  **First Drive Stun Activation**

  Officer C recalled, “I observed my partner inserting the suspect’s, what I believe at that time was, his left foot into the hobble. But at the same time, the suspect kept thrashing his legs around. At one point…the loose leg, which was the right leg, went towards the direction of my partner’s torso in attempts to kick him. At that point, I took the TASER that was on my partner’s person… because of the suspect’s
continuous violent behavior; I placed the probes of the TASER on to the suspect’s right calf and activated the TASER.”

**Second Drive Stun Activation**

After the first TASER activation, Officer C warned the Subject to not kick the officers or he would be tased again and it would hurt. The Subject continued to resist and began kicking both legs up into the air toward Officer D. Officer C delivered a second drive stun activation to the Subject’s right calf in an attempt to stop his resistance.

Officer C recalled, “As that point, the suspect becomes extremely violent. He continues to thrash…now his hobbled legs - - he tries to stand up…both his legs…he kicks them up at that point as my partner is trying to move around to redeploy and still maintain control of hobble, the suspect’s legs goes towards my partner. At that point, again, on [his] right calf, I applied a TASER…in a stun mode.”

**Third Drive Stun Activation**

LAFD personnel asked the officers to remove the Subject from the police vehicle and place him on their gurney so they could treat him. According to Officer C, once the Subject was removed from the vehicle and standing on his feet, the Subject moved his upper torso toward Officer B in a very purposeful and very violent manner, as if he was trying to break away from Officer B’s grip or head-butt one of the officers. Officer C delivered a third drive stun activation to the Subject’s left forearm.

In conclusion, the BOPC determined that an officer with similar training and experience as Officer C, when faced with similar circumstances, would believe that attempts to subdue the Subject with other tactics would likely be ineffective.

Therefore, the BOPC found Officer C’s less-lethal use of force objectively reasonable and in policy.