



LINCOLN POLICE DEPARTMENT GENERAL ORDERS

NUMBER: 1510
TOPIC: FORCE AND CONTROL TECHNIQUES
ISSUED BY: TERESA EWINS, CHIEF OF POLICE
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REFERENCE: G.O. 1430, N.R.S. 28-1407, et seq. N.R.S. 28-1409(5),
N.R.S. 81-1456

I. POLICY

The Lincoln Police Department is committed to the sanctity and preservation of human life. Lincoln Police Officers may use control measures when authorized by law. Employees are expected to use de-escalation strategies, when possible, in order to minimize the need for the use of control techniques. Officers will use only that force which is reasonable and necessary under the circumstances as they know them to be (Graham v. Connor, 490 U.S. 386 [1989] and applicable law). The application of any control technique will cease when the purpose justifying its use has been accomplished. Force shall not be used in a punitive manner. The use of excessive force is prohibited. All officers will have access to an electronic copy of this General Order and will receive instruction regarding its requirements before being authorized to carry a weapon. Any employee who takes action that results in injury or death while on duty must follow the procedures in this policy.
(1.2.2, 4.1.1, 4.1.2, 4.2.1, 4.2.3, 4.3.2, 4.3.4)

II. PROCEDURE

A. Definitions

1. Lethal Force: Shall mean force that creates a substantial risk of causing death or serious bodily harm. (4.1.2)
2. Less Lethal Control: Shall mean control techniques that do not create a substantial risk of causing death or serious bodily harm.
3. Chokehold: Intentionally applying pressure to the front of the throat and cutting off air flow for a sustained amount of time.(4.1.7)
4. Vascular Neck Restraint: A technique that relies on the temporary disruption of blood flow through the vascular bodies, temporarily disrupting the flow of blood to the brain for the purpose of subject control.
 - a. Bilateral Vascular Neck Restraint- Application of direct pressure to both sides of the neck (Carotid Neck Restraints, LVVNR)

b. Unilateral Vascular Neck Restraint-

Application of direct pressure to only one side of the neck (Shoulder Pin Restraint).(4.1.6)

5. Serious Bodily Harm: Shall mean injury that creates a risk of death, causes serious permanent disfigurement, or results in long term loss or impairment of a major bodily function. (4.1.2)
6. Reasonable Belief: Shall mean a reasonable conclusion based on the information known to the officer at the time. (4.1.2)
7. Hospitalization: Shall be admission to a hospital and does not include treatment and release at an emergency room.
8. Excessive Force: Shall mean force in excess of what a reasonable and prudent officer would use given the same circumstances.
9. Intermediate Weapon: Means a tool not fundamentally designed to cause death or serious bodily injury with conventional use. These weapons include but are not limited to baton, TASER, impact projectiles, and other less lethal weapons as defined by the department.

B. Use of Firearms and Lethal Force

1. Officers may use lethal force only when the officer reasonably believes that the action is in defense of human life, including the officer's own life, or in defense of any person in imminent danger of serious bodily harm. In no case shall an officer discharge a firearm, or apply any other method of lethal force, until all other reasonable means have been exhausted or would be clearly ineffective.
2. If doing so would not increase the danger to the officer or others, an officer shall identify themselves and give a verbal warning before discharging a firearm or using other deadly force. When issuing a verbal warning, the officer should make reasonable efforts to clearly communicate the warning to the individual to whom the warning is directed prior to using deadly force.

3. Officers may draw or display firearms when engaged in a hazardous duty in which firearms may be needed. In effecting felony arrests, officers may display firearms for the purpose of obtaining and maintaining control of persons arrested.
 4. Officers shall not draw or display firearms unnecessarily.
 5. Shots fired into the air or ground in an attempt to cause a fleeing suspect to stop or surrender are prohibited. Shots fired into the air or ground may be employed with extreme caution for the following purposes only, and then only when other alternatives have been exhausted or would be clearly ineffective:
 - a. To stop a threatened felonious attack on an officer or a victim;
 - b. To summon aid when more conventional communication is not effective. (4.1.3)
 6. Officers shall not shoot at or into moving motor vehicles except in cases where the officers have no other reasonable alternative to protect their lives or the lives of other human beings.
 7. A supervisor may approve the use of firearms to kill animals that are seriously injured or pose a threat to public safety when no other disposition is practical.
 8. In all circumstances, officers will discharge firearms only when the safety of others has been taken into consideration and will use the utmost caution to avoid endangering innocent persons.
 9. Officers shall not surrender their firearms except as a last resort.
- C. Use of Less Lethal Control (4.1.4)
1. The department has adopted a resistance control continuum as a conceptual model for the use of control techniques. A chart depicting the continuum is contained in this General Order.
 2. The resistance control continuum is a guide on when to use control, and what type and degree of control technique to use. The continuum is founded on the principle that officers should:
 - a. Attempt to de-escalate the situation first, whenever possible, with the goal of preserving human life.
 - b. Respond to the resistance with a level of control that is sufficient to overcome the resistance but is reasonable and necessary under the circumstances.(4.1.1)
 - c. Select a type and degree of control in consideration of the particular circumstances at hand, such as:
 - (1) Environmental factors;
 - (2) Reaction time;
 - (3) Attributes of both the subject and the officer, such as size, strength, etc.;
 - (4) Known factors such as medical, psychological or physical impairments, or the influence of alcohol or drugs.
 - d. Escalate the level of control if the present level is ineffective or if the subject escalates the resistance.
 - e. De-escalate the control as the subject is brought under control and the threat is no longer imminent.
 - f. Officers should continually reassess the situation to ensure the level of force being used is reasonable.
3. The resistance control continuum is only a guide, and is not intended to cover all situations, and all possible variables. Each use of control application should be weighed against other control options.
4. Officers shall employ less lethal control techniques consistent with the methods and procedures currently instructed by the department.
 - a. Intentional Chokeholds shall be banned except in cases where lethal force would be considered reasonable. (4.1.7)
 - b. Unilateral Vascular neck restraints are permissible as a control technique when faced with active aggression or lethal force resistance, e.g. shoulder pin restraint. (4.1.6)
5. Use of TASER
 - a. TASER is an intermediate weapon.
 - b. Unless extreme or unusual circumstances exist, TASER should not be used upon:
 - (1) Small children;
 - (2) Pregnant subjects;
 - (3) Handcuffed subjects;
 - c. Officers must also be aware of increased risk potential if a TASER is utilized:
 - (1) Subjects suffering from mental illness;
 - (2) Elderly subjects;
 - (3) Persons with low body mass;
 - (4) Subjects in water (drowning risk);
 - (5) Probes in the heart or chest area;
 - (6) Probes in sensitive target areas (head/eyes/groin);
 - (7) Subjects actively operating a motor vehicle;
 - (8) Subjects in an elevated position;
 - (9) Fleeing suspects;
 - d. TASER should not be used near flammable or explosive chemicals.
 - e. Officers should use TASER for one standard cycle (five seconds) then evaluate the situation to determine if

subsequent cycles are necessary. Officers should consider that exposure to TASER for longer than 15 seconds (whether due to multiple applications or continuous cycling) may increase the risk of death or serious injury. Any subsequent applications should be independently justifiable, and risks should be weighed against other control options.

6. Officers may be requested to use control techniques in non-arrest situations, to effect a lawful purpose, such as restraining a person who is mentally ill or injured for treatment. Officers may provide such assistance to caregivers when necessary, in emergency circumstances, but should not use control techniques in the absence of an emergency or when other less intrusive methods would suffice.

D. Medical Aid (4.1.5)

1. Officers have a duty to promptly provide care and obtain appropriate first aid when subjects are injured in use of force and control incidents, when safe to do so. Officers should summon emergency medical units promptly in the event of a medical emergency resulting from use of force or control techniques. Officers should employ the following precautions:
 - a. Place subject in an upright position and in a manner that does not restrict their breathing as soon as safely possible;
 - b. Stay with the injured party;
 - c. Summon emergency medical assistance immediately if the subject displays visible signs of medical distress, including but not limited to loss of consciousness, difficulty breathing, convulsions or tremors.
2. If a subject injured by use of force or control techniques is transported by ambulance, an officer shall accompany the subject in the ambulance.
3. Officers should regularly observe the subject to determine their state of consciousness and physical condition whenever weapons or the following techniques have been employed. The duty to observe shall end upon the arrival of emergency medical personnel.
 - a. Hard empty hand techniques;
 - b. OC spray or other chemical agents;
 - c. Baton strikes;
 - d. Specialty impact munitions;
 - e. TASER discharge;
 - f. Vascular neck restraint. (4.1.6)
4. When it can safely be done, officers shall assist in decontaminating subjects who have

had contact with Oleoresin Capsaicin (OC) spray.

5. Officers should obtain necessary medical treatment for subjects prior to booking. Hospital examination shall be obtained for any subject when a TASER or specialty impact munitions to include bean bag and baton have been used, or when there has been any loss of consciousness. Officers should notify corrections staff of any use of OC spray, TASER, loss of consciousness, or other known medical distress or condition which may have occurred.
6. Officers shall document medical treatment in appropriate reports, to include the circumstances, method of transport and where the treatment was received.

E. Notification and Reporting (4.2.1)

1. In the following types of cases officers are required to immediately notify their immediate supervisor or the duty commander, who shall complete a Use of Control Technique Report. Officers shall also complete a Supplementary Report or ACI documenting the circumstances of the force or control measure, in these cases:
 - a. Discharge of a firearm (on or off duty) other than for training or recreation;
 - b. Any use of force or control which results in injury or complaint of injury to suspect or officer;
 - (1) In addition, any use of force or control necessitating hospital treatment, requires a separate ACI labeled Medical Information listing the injury and where the person was treated; (4.2.1, 1.2.2)
 - c. Any use (not merely display) of a weapon of any kind, including, but not limited to, baton, TASER, and OC spray;
 - e. Use of any hard empty-hand technique.
2. Officers pointing a firearm at any person outside of a training environment must complete a firearm control report.
3. Upon notification, a supervisor is to immediately respond and conduct an investigation into the use of TASER.
4. The duty commander shall notify the officer's commanding officer, the division's assistant chief, the chief of police, the police legal advisor and the Internal Affairs Unit whenever police action has resulted in death, hospitalization or heightened community interest. (11.3.3, 26.3.2)

F. Duty to Intervene and Report (1.2.10)

1. When in a position to do so, employees must intervene within their scope of authority and training when they know that another employee of any agency is clearly using illegal or excessive force or control.
2. Employees must promptly report any excessive force or control, and the efforts to intervene, to a supervisor.
3. Employees are prohibited from retaliating against an employee who intercedes in or reports illegal or excessive use of force.

G. De-escalation Strategies (4.1.1)

1. Officers shall use reasonable efforts to communicate when engaging with individuals who are not compliant to defuse conflict with the goal of achieving voluntary compliance prior to resorting to uses of control.
2. Officers shall be trained on potential barriers to effective communication that may influence an individual's behavior and/or communication with the officer, or prevent immediate compliance with commands such as:
 - a. Medical conditions;
 - b. Mental impairment;
 - c. Developmental disability;
 - d. Physical limitation;
 - e. Language barrier;
 - f. Drug interaction;
 - g. Behavioral crisis.
3. Officers should evaluate the totality of factors present when determining whether to alter communication strategies with the individual, or if a control technique to obtain compliance is reasonable and necessary in order to resolve the situation in a safe manner.

H. Officer Relief

Officer relief refers to the replacement of officers who have been involved in a physical struggle/fight/violent event or are otherwise unable to control a situation with a subject, by other arriving officers to assist in de-escalating the situation.

1. The first arriving officers who are not immediately necessary to bring a combative subject under control shall relieve the officers who were involved in the altercation. This officer relief should only occur after the subject is in custody and under the appropriate restraint (e.g. handcuffed).
2. The goal is to help de-escalate the situation, allow time for decompression, time to access any injuries to officers or the subject and the ability to provide information to supervisors.
3. Once the situation is under control, a supervisor can determine who should continue

with the transport or arrest process of the subject.

4. Officer relief does not remove the obligation for the officer to complete any appropriate reports.

I. Review of Use of Force or Control (4.2.2)

1. The Department has adopted a Use of Control Technique Report as a method of tracking the use of force or control and compiling data.
2. The online report should be completed by a supervisor prior to the end of the supervisor's tour of duty, unless a captain has approved delaying the report.
3. Once the report is finished, an electronic notification is sent to the division's assistant chief, Management Services, Internal Affairs, Education and Personnel and the team captain.
4. The division's assistant chief, Management Services and the team captain shall each sign-off on the report after their review. Comments may be added, as needed. (11.3.3)

J. Review of Firearms Control

1. The Department has adopted a Firearms Control Report as a method of tracking the instances of an officer pointing their firearm at a subject and compiling data.
2. The online report should be completed by the officer pointing their firearm at a subject prior to the end of the officer's tour of duty, unless a supervisor has approved delaying the report.
3. Once the report is finished, an electronic notification is sent to the officer's immediate supervisor and team captain.
4. The supervisor and team captain shall each review and sign off on the report after their review.

K. Investigation of Lethal Force or Control and Serious Injury

1. Incident Investigation (4.2.3)
 - a. All incidents involving the use of force or control techniques by department personnel which result in the death of a person will be investigated by a criminal investigations team to be determined by the chief of police. The purpose of this investigation is to determine if a crime has been committed and, in the case of an in-custody death, to provide evidence for the grand jury investigation.
 - b. If another law enforcement agency is conducting such an incident investigation,

the chief of police will assign a commanding officer to serve as a liaison to that agency during the investigation.

2. Administrative Investigation

- a. The Internal Affairs Unit shall undertake a separate internal investigation, following the guidelines contained in General Order 1430, "Internal Investigations." The purpose of this investigation is to determine compliance with department procedures and gather information for the internal use of the department.
 - b. Any employee whose actions result in a death or serious bodily injury will be removed from line duty assignment pending administrative review. Return to full duty will be at the discretion of the chief of police.
- (4.2.3)

**LINCOLN POLICE DEPARTMENT
PPCT MANAGEMENT SYSTEMS
RESISTANCE CONTROL CONTINUUM**

