



DETROIT POLICE DEPARTMENT

MANUAL

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Chapter 205 – Emergency Procedures			
Reviewing Office Professional Standards and Internal Controls			<input type="checkbox"/> New Directive <input checked="" type="checkbox"/> Revised <i>Revisions are in italics</i>
References			

OFFICER-INVOLVED SHOOTING INVESTIGATIONS

205.11 - 1 PURPOSE

The purpose of this policy is to establish responsibilities and duties concerning the investigation of officer-involved shootings (OIS). This includes specifically, but is not limited to, the use of firearms and Department-issued weapons. The investigative procedures used, coupled with the subsequent adjudication process, are the most important elements in maintaining the confidence of the public and Department members if the actions of an officer are in question.

205.11 - 2 POLICY

It is the policy of the Detroit Police Department that officer-involved shootings and other serious incidents be investigated to determine whether the actions of involved members conform to applicable laws and Department rules, policies, procedures, and training.

205.11 - 3 Definitions

Biological Evidence - An individual's blood, semen, hair, saliva, skin tissue, fingernail scrapings, bone, bodily fluids or other identified biological material.

Chain of Custody - A series of chronological and documented links from the time the evidence was obtained until presented in court. The links are members who handled the evidence and when, where, and for what purpose they did so.

DNA Transfer - Primary DNA transfer is defined as the passage of DNA to objects and people.

Incident Commander - The incident commander (IC) is the individual responsible for the management of all incident operations at the incident site. The first arriving member at a critical incident scene should be prepared to assume the duties and responsibilities of the incident commander until relieved by proper authority.

Incident Officer - One or more officers present during the OIS but did not actively participate in the incident (i.e. partner or witness who did not fire their weapon).

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Involved Officer - One or more officers actively involved in using or attempting to use deadly physical force against another human. This may include using a firearm, significant blunt trauma, striking with a vehicle, or other intentional actions that would normally incapacitate or kill a human.

Peer Support - Members who are selected and trained to provide support, assistance and/or referrals to fellow Department members in times of personal and/or professional stress and/or crisis.

Public Safety Statement - Information requested by the first arriving supervisor. This information is critical for the effective management of the crime scene and will allow for the preservation of life. It includes statements such as:

- The extent of any known injuries and whether the appropriate medical assistance was rendered/summoned
- The approximate number and directions of shots fired by suspect and/or officers
- If there is a criminal suspect at large, and if so, a description of same, and the direction and mode of escape (including how much time has elapsed)
- If anyone is under arrest
- Are there any weapons that need to be secured

Qualified Mental Health Professional - An individual who is licensed as a mental health professional and has an in-depth understanding of trauma-related disorders and the law enforcement culture.

205.11 - 4 Responsibilities and Duties of Involved Officer

1. When a firearm is used involving deadly force, upon first opportunity after the scene is secured, the officer shall immediately holster their weapon, without unloading, or reloading it. If a long gun is used involving deadly force, the involved officer shall sling their weapon and retain possession of their weapon until otherwise advised by a member of Homicide Task Force (HTF). Notwithstanding this statement, officers are authorized to conduct tactical reloads as soon as practical and when necessary. This may be at the first "lull" in the incident which may or may not then turn into the end of the incident.
2. Coordinate the safe response of all additional resources arriving at the scene. This includes describing existing threats, and "hot zone," or other critical information affecting the safe response. This duty may be delegated as other officers arrive.
3. Handcuff and search the suspect(s) to ensure that the threat has been stopped. Whether this is done immediately or upon the arrival of other officers will be driven by the extent and nature of the injuries to the suspect, sound tactics, and the officer's best judgment. When sufficient staffing is on scene and the suspect has

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been searched, the handcuffs should be removed to facilitate adequate medical care as needed.

4. Notify Communications of the incident, location, and request additional staffing and a supervisor. This should generally occur on the channel assigned to the officer for the response to the incident. It should not occur on a private channel or cell phone, unless exigent circumstances dictate.
5. Determine the physical condition of any injured person and render first aid if safe to do so. Request appropriate emergency medical aid as necessary.
6. Initiate steps to secure the scene:

a. Suspect Weapons:

- When the threat has been stopped and the scene is secure, firearms belonging to the suspect will be secured in place **(do not move the weapon)**
- When the suspect is not secure and/or other suspects may be in the area, the suspect weapon may be recovered and secured in an available scout car or through other appropriate means
- When securing the weapon, undertake every effort possible to secure it without unloading or tampering with possible evidence on the weapon (i.e. use gloves to secure weapon to a sterile gun envelope) **(securing this weapon properly is extremely important to preserve biological evidence (i.e. DNA))**

b. Officer Weapons:

- When possible, handguns will be holstered and remain secured in that fashion until processed
- Long guns will be placed on safe; slung and secured by the involved officer (officer retains possession) until otherwise advised by a member of HTF
- Sniper rifles will be left in the shooting position when it is safe to do so. The weapon will be placed on safe or otherwise rendered safe without unloading when possible

c. Officer Equipment:

- Generally, equipment dropped or left on the ground will remain in the position it is found and marked as evidence
- As stated in Department Manual Directive 403.2-6, Engineering/Work Practice Controls, members should keep a change of uniform or clothing available. This is important to preserve biological evidence that may have been transferred from the suspect to the officer (i.e. DNA transfer).

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- d. Additional crime scene preservation techniques should follow approved policy and training. This includes taking control of a wide area that includes buildings, parking lots, parked cars, etc. An inner and outer perimeter may be established.
7. Detain any outstanding suspects.
8. Upon the arrival of the first responding supervisor, the involved officer(s) will be requested to provide a public safety statement and disengage from the management of the scene as directed.

Involved Officer Reporting:

1. *When a member fires their weapon and the projectile strikes an individual, the member shall prepare a Preliminary Complaint Report. This report will be submitted to a supervisor of Force Investigations who will retain the report in the administrative file.*
2. *When a member fires a weapon and the projectile does not strike an individual, the member shall prepare an RMS report.*
3. *In the rare instance that an exception to these reporting procedures is needed, it must be approved by the Chief of Police (or Chief's designee) or the Commanding Officer of the Professional Standards Bureau.*

205.11 - 5 First Responding Supervisor Responsibilities

The first responding supervisor to an OIS scene shall follow the guidelines stated in Department Manual Directive 201.11, Use of Force Reporting and Investigation. Below are guidelines first responding supervisors shall follow specifically related to officer-involved shootings:

1. Assume command and control of the scene. If an Incident Command System (ICS) is already in place, formally assume command on the radio. If ICS is not already in place, declare the use of ICS and assume command on the radio (refer to Department Manual Directive 205.1, Critical Incident Response).
2. Provide any additional direction to available personnel in order to protect the scene and control any active threat. Ensure that the steps required above from the involved officer and first arriving officers are in process and/or accomplished. Ensure the scene has reached a level of control such that there is no longer a threat of harm to citizens, officers, or suspects. *The preference is for the IC to direct and ensure that an inner and outer perimeter are established and properly cordoned off. Based upon scene location, the IC should also identify a particular corner of the scene (i.e. northeast, southwest, etc.) to act as the entry point into the scene for all responding Department personnel. Once an entry point has been identified, the IC shall advise Notification and Control so that additional responding personnel know exactly where the staging area/crime scene entry point is located.*
3. Immediately broadcast clarifying information on the radio to all Department members regarding the status of officers. If the officer is seriously injured or killed

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in the incident, the supervisor must use tact and discretion in determining what to say and how to say it. This is done in order to calm the stress of Department members (both officers and Communications personnel) and help ensure members are adequately focused on their mission as law enforcement officers and dispatchers.

4. Confirm the medical status of all involved parties and specifically assess the well-being of the involved officers. Provide immediate first aid at the scene and ensure proper emergency medical services (EMS) and Detroit Fire Department (DFD) personnel are en route to assist the injured. Ensure a clear inbound and outbound passage for responding emergency personnel to aid the injured. When possible, notify the area hospital(s) of any incoming patients.
5. Ensure that the involved officer(s) provide a public safety statement and disengage from the scene.
6. As soon as possible, assign a companion officer to each involved officer on scene. The companion officer will stay with their assigned officer for the duration of the investigation or until relieved. The companion officer will guide the involved officer away from the active investigative scene and allow the officer to "disengage" from police activity.
7. The companion or involved officer may also request the immediate response of an uninvolved member of Peer Support. The Peer Support member and the companion officer may not discuss the actual events involved in the incident with the involved officer. Upon the arrival of a Peer Support member, the companion officer shall be relieved.
8. Other than the public safety statement, the involved officer(s) shall not speak with anyone except for their companion officer, non-involved union representative, Peer Support, or a qualified mental health professional. Members shall be mindful that any information shared is not privileged.
9. Direct all Department members at the scene to avoid physical contact with the involved officer(s) (i.e. hugs). This is paramount in the preservation of evidence.
10. If the temperament of the scene allows, direct a non-involved member to take body-worn camera (BWC) video of the involved officer before they leave the scene (This should be done as discreetly as possible to avoid unnecessary exposure of the involved officer(s)). The video should be a 360 degree video of the officer and their equipment. Special attention should be provided to any torn uniforms, damaged equipment, or injuries received during the incident.
11. Secure any clothing or other personal items belonging to the involved officer(s) or subject(s) that may have been removed by medical personnel as evidence. Properly securing this evidence is extremely important to preserve biological evidence and possible DNA transfer from the subject to the involved officer (e.g., gloves to a sterile evidence bag).
12. Secure BWCs of involved officers at the scene. The IC shall ensure all secured BWCs are turned over to Homicide at the scene. Identify all incident officers and scout cars present with possible in-car video that may have captured the incident.

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The identified officers and scout cars will be provided to the investigating entity upon their arrival at the scene. Direct all incident officers to report to Homicide directly from the scene.

13. As soon as possible, direct the removal of the involved officer(s) from the scene. Involved officers shall be sequestered and secured separately in a police vehicle at the scene until transportation to a predetermined location is available. The involved officer(s) should be conveyed by or at least with their companion officer or Peer Support member. The involved officer's scout car and keys shall remain in place at the scene. Crime scene tape should be used to protect the vehicles of involved officers as evidence.
14. Assign non-involved members equipped with BWCs to standby to assist the investigating entity with the recording of interviews and canvasses.
15. Assign a non-involved member to serve as a "recorder" with responsibility for making a chronological record of activities at the scene, to include persons present at the scene, persons present during the incident, and actions taken by law enforcement or other official personnel.
16. Ensure Notification and Control has been notified.
17. Brief arriving investigating entities, including but not limited to personnel from the HTF and Force Investigation.
18. Brief arriving investigating entities (Homicide Task Force, Force Investigation).

205.11 - 6 Investigating Entity Responsibilities

Whenever possible, the investigating entity (i.e. Homicide Task Force, Force Investigation) shall do the following:

- a. Receive a briefing from the IC;
- b. Confirm that the public safety statement has been collected;
- c. Confirm that all items of potential evidentiary value are identified and properly collected;
- d. Obtain audio- and/or video-recorded preliminary statements from subjects and witnesses;
- e. *Establish an Incident Command Post (ICP) when it appears that an extended on-site investigation will be necessary (Refer to Manual Directive 205.1, Critical Incident Response). To ensure scene integrity, all responding executive staff shall report to the ICP to receive briefings and a guided walkthrough of the scene, if appropriate;*
- f. *Based upon the on-duty, responding command officers or executive members, identify who will act as the investigative lead (Commander or Captain - Homicide Task Force, Commander - Professional Standards, or Captain - Internal Controls). The investigative lead will be responsible for answering all on-scene questions and briefings of senior Department personnel. In the absence of the above-listed personnel, the Lieutenant - Homicide Task Force*

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shall act as investigative lead.

- g. *A media staging area shall be identified away from the crime scene and away from the command post;*
- h. Canvass the immediate area for potential witnesses who have not come forth and obtain information or statements as available. *A member equipped with a BWC shall be assigned to the investigating entity to ensure the canvass is captured on video;*
- i. Obtain search warrants for any vehicles, containers, residents, or other items as may be necessary;
- j. Audio and video record all interviews with emergency medical personnel, fire department personnel, and first responding officers regarding conditions at the incident scene when they arrived, to include any action that may have been taken to move or otherwise alter persons or objects of potential evidentiary value;
- k. Collect information regarding the subject, where appropriate, to include the following:
 - Information provided by the reporting party
 - Involved member's observations of the subject's behavior in the course of the interaction
 - Whether others indicated that the subject had been consuming alcohol, using drugs, or both
 - Whether the subject had been involved with law enforcement on prior occasions
 - The subject's proximity to weapons and whether or not the subject was threatening to use them (*ensure photographs are taken of any weapon in the possession of or in close proximity to the subject*)
 - Whether the subject was visibly injured in any way prior to law enforcement arrival and what, if any, injuries were sustained during the interaction with officers
- l. Gather information regarding the response to the call, to include the following, where applicable:
 - The number of involved officers present
 - The relative age, size, strength, and physical ability of the involved officer(s) and subject(s)
 - Experience and training of the involved officer(s)
 - Force options available to the involved officer(s)
 - Basis for subject contact, to include seriousness of offense, if any
 - Potential for injury to the public, involved officer(s), or subject(s)
 - Risk of escape of the subject(s)
 - Degree and length of time of subject resistance

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- Means used to control or restrain subject
 - Legal basis for use of force or custody
 - The behaviors and reactions of the subject(s) once detained or in custody
 - Whether emergency medical services were called and, if so, at what point
 - If the subject was seriously injured or admitted to a medical facility:
 - ▶ What was the nature and severity of the injuries?
 - ▶ Were the injuries consistent with the incident as described by the involved member(s)?
- m. Prepare a summary report regarding the nature of the officer-involved shooting and include the involved officers' use of force reports, where applicable, for submission to the Chief of Police.

205.11 - 7 Emergency Aid Consideration

1. If injured, the officer should request treatment and/or begin self-aid at the scene.
2. If treatment requires the removal of the officer's gun belt or other equipment, (whether on scene or at the hospital) that equipment will be turned over directly to another sworn member, properly preserved as evidence (i.e., gloves to a sterile bag) and transported directly to Homicide.
3. If an officer is being transported to the hospital:
 - a. If transported by EMS, the companion officer or Peer Support member, when possible, should ride with the officer in the ambulance;
 - b. If transported by police vehicle, the companion officer should drive the officer; and
 - c. The first responding supervisor will receive guidance from the involved officer, when possible, in order to summon family to the hospital in a timely manner.
4. If the involved officer(s) claims to not be injured, the first-responding supervisor shall assess for injuries.
5. If there is any doubt about the condition of the officer, the officer will be transported to the nearest authorized occupational medical clinic for evaluation (refer to Department Manual Directive 401.8, Police Medical and Duty Status). The assigned companion officer shall accompany the officer in the ambulance or other conveyance

205.11 - 8 Reporting to Headquarters

Involved and incident officers reporting *to Headquarters directly from the scene will have specific instructions directed to them by members of Homicide Task Force and Force Investigations.*

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1. Whenever an officer is involved in an OIS they shall report to Homicide where a member of the Homicide Task Force (HTF) will confiscate their weapon and conduct a round count. A body-worn camera shall be activated to record the round count.
2. During this process, special care will be taken to preserve biological evidence if necessary.
3. A temporary (loaner) weapon will be issued by a member of the HTF.
4. Members shall report to Firearms Inventory the next business day (unless otherwise directed by a supervisor) to exchange the loaner weapon for a replacement weapon.
5. If an officer discharges rounds from a secondary weapon, they will not be issued a replacement weapon. Members are required to carry their approved primary weapon on duty at all times (Refer to Department Manual Directive 304.1, Firearms).
6. Members shall produce their 90-Day Inspection Card to a member of the HTF during the round count.
7. Officers injured during an OIS and admitted to a hospital may not be provided a temporary replacement weapon. Under these circumstances officers will report to Firearms Inventory the *next business day* upon their discharge to be issued a replacement weapon.

Investigative Procedures:

1. Involved and incident officers may be requested to provide a buccal swab from a member of HTF. This process would take place in an effort to identify any transfer DNA that may have been transferred at the scene from an officer to a subject. It should be noted that a letter to the Michigan State Police Forensic Laboratory will accompany any collected buccal swab samples advising that the sample shall not be submitted to the Combined DNA Index System (CODIS).
2. Officers will be advised by a member of the HTF that the investigation will be turned over to the Wayne County Prosecutor's Office for review.
3. *Officers will be advised that confiscated weapons will be returned upon the determination that the evidence is not needed for any criminal or civil proceedings.*
4. *Officers will be directed to prepare a report and Use of Force Report. These reports may be provided to HTF to pursue criminal charges against the subject.*

205.11 - 9 Administrative Procedures

1. In all on-duty officer-involved shootings, the officer will report to Police Medical the next business day following the incident, unless otherwise directed by a supervisor. A member of Police Medical will schedule the officer to see a Department psychiatrist for a post-shooting evaluation, *but no earlier than five (5) days after the incident, unless the involved member is in need of immediate mental health care.*

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2. If the officer has to be conveyed and admitted to the hospital for injuries, the officer's commanding officer shall ensure that Police Medical is notified as soon as possible, directly during normal business hours or via email (refer to Department Manual

Directive 401.8, Police Medical and Duty Status).

3. Members involved in on-duty, officer-involved shootings shall be carried disabled and shall follow the below guidelines:
 - a. There will be no direct loss of pay or other benefits;
 - b. The involved officer(s) will be carried disabled *for a minimum of ten (10) days and until cleared to return to work by the Department designated physician. If at that time it is determined that the member is to remain off for administrative reasons (the ongoing investigation, etc.), the officer's duty status shall be at the discretion of the Chief of Police or Chiefs designee.*
 - c. The officer shall be available as needed and with notice for Police Medical appointments and official interviews and statements regarding the case, and will be subject to recall to normal duty at any time after the preliminary investigation.
 - d. *Upon return to duty, the involved officer(s) will then be afforded thirty (30) days of Professional Development Assignment (PDA) in one of the following units of his/her choice:*
 - a. *Crime Control Strategies*
 - b. *Major Crimes Division (excluding Homicide)*
 - c. *Organized Crime Division*
 - d. *Office of Workplace and Community Resiliency*
 - e. *Precinct POU*
 - f. *Training*
4. Relief from normal duty serves two (2) purposes:
 - a. To address the personal and emotional needs of an officer involved in the use of deadly force in which injury or death occurs; and
 - b. To assure the community that all the facts surrounding the incident are fully and professionally explored and verified.

205.11 -10 Treatment of the Involved Officer

1. Officers involved in an OIS will have an assigned Peer Support Member as a point of contact. The Peer support member will be available for the duration of the investigation to help ensure the officer's needs are met and that the officer is provided emotional support. The Peer Support member will not discuss the actual event with the officer, but will be a resource on all other general matters related to the psychological and emotional well-being of the officer. Peer Support members are reminded that conversations between the officer and them are not privileged.
2. During extended investigations and when possible, the officer will be assigned to a non-enforcement or administrative function during the ongoing investigation.

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3. Unless otherwise directed by the Chief of Police or the Chiefs designee, the officer will be returned to full duty status:
 - a. After a preliminary report has been completed by the assigned investigative entity;

- b. After the psychological welfare of the officer has been ensured; and
 - c. *After review and approval by the commanding officer of Police Medical.*
4. If the preliminary investigation discloses a question about the officer's actions in the incident, then the appropriate guidelines regarding the rights of the officer will be followed.

205.11- 11 Critical Incident Community Briefing

In cases where members of the Department fire shots that take effect on a citizen, a public briefing by the Chief of Police, or his designee, will occur within 30 days. This briefing will include displaying relevant BWC, Dashcam, and other video evidence, along with additional details of the incident in an effort to be transparent with the community. The Critical Incident Community Briefing will be posted on a publicly accessible platform such as YouTube.

205.11 - 12 Reporting to the Board of Police Commissioners

1. *Upon the discovery of an OIS, the Board of Police Commissioners shall be notified within four hours by the Chief of Police, or his designee, via email or telephone.*
2. *The Board of Police Commissioners will have access to review the video of an OIS at least 24 hours prior to the video release of the incident to the public.*
3. *The Homicide Section shall provide a quarterly report to the Board of Police Commissioners on all OIS investigations that occurred during the previous quarter.*

Related Policies:

- 201.11 - Use of Force Reporting and Investigation
- 203.1 - Crime Scene Investigation
- 203.2 - Collection and Preservation of Evidence
- 205.1 - Critical Incident Response
- 304.1 - Firearms
- 401.8 - Police Medical and Duty Status
- 403.2- Infectious Disease Control