

 CD-057300	NEW MEXICO CORRECTIONS DEPARTMENT <small>"We commit to the safety and well-being of the people of New Mexico by doing the right thing, always." Courage Responsibility Ethics Dedication - CREDibly serving the public safety of New Mexico</small>	
	ISSUE DATE: 08/19/13	REVIEW/REVISED: 03/09/15
	TITLE: Electronic Control Devices (ECD-Taser)	

AUTHORITY:

- A. New Mexico Corrections Department, Sections 31-21-7 and 33-1-10, NMSA 1978 as amended

REFERENCE:

- A. Taser International training policies, which are updated annually

PURPOSE:

To provide a policy for authorized New Mexico Corrections Department (NMCD) Employees trained in Electronic Control Devices (EDC-Taser) to carry and use said devices as an intermediate use of force option. The purpose of this policy is to establish standards for the issuance, carrying of, use of, and training with an Electronic Control Device (ECD-Taser) by authorized personnel of the NMCD. It will establish the ECD training programs; and define a program designed to improve the skills, knowledge and abilities of all ECD authorized personnel in order to successfully meet the Department's mission. It will also establish Policy for conducting ECD training courses for authorized personnel of the NMCD and define successful completion of that training.

APPLICABILITY:

To all employees of the NMCD who are authorized to carry and trained in the use of an Electronic Control Device (ECD-Taser)

FORMS:

None

ATTACHMENTS:

None

DEFINITIONS:

- A. EDC-Taser An electronic control device is designed to create Neuro-Muscular Incapacitation (NMI). The key technology to disable even the most aggressive subjects, NMI temporarily overrides the command and control systems of the body to impair muscular control.

POLICY:**1. Electronic Control Devices (ECD-Taser)**

- A. An ECD may be used against persons who are actively resisting or exhibiting active aggression or to prevent individuals from harming themselves or others, in accordance with **NMCD Use of Force Policy CD-130600**.
- B. When practical, the use of an ECD will be preceded by a verbal warning that force will be used if compliance is not obtained.
- C. **Elevated ECD Application Risk Factors** – The following factors, where apparent to involved officers, require elevated justifications of ECD application. Under the following conditions, the risks of foreseeable direct or secondary injuries to the person are foreseeably elevated. These evaluated risk factors can only be given consideration when the factors are reasonably perceived by the PPO (s). In less lethal force situations, when possible, PPO should avoid using the ECD in the following situations:
 - 1. On persons operating a moving vehicle or machinery.
 - 2. In any environment where the subject's fall could reasonably result in death, such as in an elevated structure or in water.
 - 3. On a female with knowledge that she is pregnant.
 - 4. On persons with apparent debilitating illnesses or the elderly.
 - 5. On children or persons under eighty (80) pounds.
 - 6. On persons in wheelchairs.
 - 7. On persons with pace makers or other bio-medical devices sensitive to electrical current.

8. On subjects who are passively resisting.
9. On a handcuffed or secured prisoner, absent that person being overtly assaultive, overtly resistive or exhibiting fleeing behaviour (I.E. Stiffing up like a board, kicking, head butting, etc.) that cannot be reasonably dealt with less intrusively.
10. On subjects that are in or near a body of water; close enough they could fall into the water, such as a swimming pool, or lake.

D. ECDs shall not be used in the following circumstances:

1. In a punitive manner.
2. On cooperative subjects.
3. In any environment where the PPO knows that a potentially flammable, volatile, or explosive material is present (including but not limited to OC spray with volatile propellant, methamphetamine lab, gasoline, natural gas or propane).
4. From, or at moving vehicles, unless trained to do so as part of a specialty team tactic.

E. Carrying and storage:

1. The device will be carried in an approved holster on the side of the body opposite to the service handgun, or for those unarmed PPO, it will be carried on their off side (if they are right handed, carried on the left, left handed, carried on the right).
2. The device shall be carried fully armed with the safety on in preparation for immediate use, when authorized.
3. PPO authorized to use the device shall be issued a minimum of one spare cartridge as a backup in case of cartridge failure, the need for re-deployment, or in case the first cartridge's wires break during the engagement.
4. The spare cartridge shall be stored and carried in a manner consistent with training.

F. Maintenance:

1. Each PPO will perform a spark test at least once a week to ensure the ECD is charged and properly functioning. These spark tests will be performed in a safe manner and away from people. PPO shall document the spark test on a daily recap form or some other form of documentation, such as their Outlook calendar.
2. If a PPO Officer's Digital Power Magazine (DPM) on the X26 reaches 20% or lower, it shall be replaced or recharged as appropriate. The used DPM will be turned over to the training coordinator to be used for training purposes.
3. Only Agency (NMCD PPO) approved battery sources shall be used in the ECD.
4. The ECD shall not be left unattended, unless properly stored and secured.

G. Deployment:

1. Prior to deployment, the deploying PPO shall announce "Taser, Taser, Taser" to avoid a sympathetic shooting response from armed Officers (Police Officers or PPO) on the scene.
2. In those incidents, when a PPO observes obvious signs or symptoms of *Excited Delirium* in a subject, he/she should arrange for the appropriate backup and medical personnel to be on scene prior to any deployment of the ECD, if practical. In these instances, a single ECD application should be made before the subject has been exhausted, not in the hope of gaining compliance, but rather to create a window of disablement during which PPO Officers can establish physical control over the subject.
3. The ECD shall be aimed at the lower torso (center of mass). The targeted area will be the balancing muscles of the pelvic triangle. This will reduce the risk of a probe striking the throat, eyes, face and female breast.

4. PPO shall not intentionally aim or deploy the ECD to sensitive areas of the body to include the eyes and face.
5. Upon Deployment of the ECD, the PPO shall energize the subject one time and re-evaluate the subject's response, prior to re-energizing. In any case, the ECD shall be energized the least number of times and no longer than necessary to accomplish the control objective.
6. The ECD may also be used in certain circumstances in "drive stun" mode. It is important to note that when the device is used in this manner, it is:
 - A. Primarily a pain compliance tool.
 - B. Subject to the same deployment guidelines and restrictions as those of the ECD in cartridge deployments.

H. Post-Deployment Procedures:

1. Notify a Supervisor if one is not on scene.
2. If needed or one is requested by the subject, request an Emergency Medical Service (EMS) unit to assess the level of injury sustained by the subject. If the subject refuses treatment by EMS, assure a copy of the EMS run report "refusal of service" is provided to the PPO for the case file.
3. Subjects who were exposed to an ECD shall be treated as follows:
 - A. If the probes penetrate the skin, only certified ECD users, paramedics or emergency room staff may remove the probes at the earliest opportunity.

- B. If the probes penetrate the skin on the face (including eyes), head, neck, female breasts, or groin area, only medical staff at a medical facility may remove the probes.
 - C. If the subject displays signs of *excited delirium* prior to or after being energized with an ECD, the subject must immediately receive medical attention once control is gained.
 - D. PPO shall provide first aid following removal of the probes by applying an antiseptic and a bandage to the probe sites, as appropriate.
4. Upon removal of the probes from the subject, the PPO shall inspect the probes (2) to ensure the barb is attached to the probe. If the barb has separated from the probe, the subject must be transported to a medical facility to have the barb removed from the subject's body.
 5. Photographs of the affected area should be taken before and after the probes are removed and once the probes are removed, close up photographs of the probe tips (2) should be taken if practical.
 6. The PPO shall collect the cartridge, probes and at least three Anti-Felon Identification (AFID) tags as evidence. All of these items will be placed into a plastic bag or a latex glove and marked as evidence in the case.

I. Training & Certification Standards:

1. All ECD training will be conducted by Instructors Certified by Taser International.
2. PPO authorized to carry an ECD will be trained by the Certified ECD Instructor utilizing only the curriculum established by and provided by Taser International. The course length will be determined by Taser International.
3. All digital evidence collection or “downloading” of the ECD shall be completed only by a Taser International Certified NMCD PPO Evidence Collection Technician and in compliance with other pertinent NMCD Evidence collection and storage procedures in place.
4. Should an ECD need repair or maintenance, this repair or maintenance shall be performed only by either Taser International or a NMCD PPO Taser Certified Technician (Armorer).
5. It will be the policy of the NMCD PPO Division to adhere to the recommendations of Taser International in its training, storage, maintenance and deployment of the ECD. During the initial and re-certification training, a PPO shall not be required to be energized with the ECD, but should a PPO volunteer for the exposure of the ECD in a training environment, they may be energized using the “clip on” methods of the probes as instructed by Taser International.



Gregg Marcantel, Secretary of Corrections
New Mexico Corrections Department

03/09/15

Date