San Francisco Police Department

5.01

GENERAL ORDER
Rev. 03/09/16

USE OF FORCE

The San Francisco Police Department's highest priority is safeguarding the sanctity of all human life. Officers shall demonstrate this principle in their daily interactions with the community they are sworn to serve. The Department is committed to using thoughtful communication, crisis intervention, and de-escalation principles before resorting to the use of force, whenever practicable. The Law Enforcement Code of Ethics requires all sworn law enforcement officers to carry out their duties with courtesy, respect, professionalism, and to never employ unnecessary unreasonable force. These are key factors in maintaining legitimacy with the community and safeguarding the public's trust.

The purpose of the policy is not to restrict officers from using sufficient force to protect themselves or others but to provide general guidelines that may assist the Department in achieving its highest priority.

I. POLICY

A. SANCTITY OF HUMAN LIFE. The Department is committed to the sanctity and preservation of all human life, human rights, and human dignity.

B. THOUGHTFUL-ESTABLISH COMMUNICATION. Communication with non-compliant subjects is most effective when officers establish rapport, use the proper voice intonation, ask questions and provide advice to defuse/resolve conflict and achieve voluntary compliance before resorting to force options.

C. DE-ESCALATION. In situations where a subject is not actively endangering the safety of the public or an officer, fleeing, or destroying evidence, officers should, when feasible, employ de-escalation techniques to decrease the likelihood of the need to use force during an incident and to increase the likelihood of voluntary compliance.

Officers should consider the possible reasons why a subject may be noncompliant or resisting arrest. A subject may not be capable of understanding the situation because of a medical condition; mental, physical, or hearing impairment; language barrier; drug interaction; or emotional crisis, and have no criminal intent. These situations may not make the subject any less dangerous, but understanding a subject's situation may enable officers to calm the subject and allow officers to use de-escalation techniques while maintaining public safety and officer safety.

Members should use the following de-escalation tactics should be used, when safe and practicable, under the totality of the circumstances where the suspect is not actively endangering the safety of the public or an officer:
1. a. Attempt to stabilize the situation by isolating and containing the subject;
2. b. Create time and distance from the subject by establishing a buffer zone ("reaction gap") and utilizing cover to avoid creating an immediate threat that may require the use of force;
3. c. Call a supervisor to assume command and request additional resources, such as Crisis Intervention Team (CIT) trained officers; Crisis/Hostage Negotiation Team, Conducted Energy Devices, or Extended Range Impact Weapon;
4. d. Designate an officer to establish rapport and engage in thoughtful communication with the subject without time constraint;
5. e. Tactically re-position as often as necessary to maintain the reaction gap, protect the public, and preserve officer safety;
6. f. Continue de-escalation techniques and take as much time as necessary to resolve the incident, without having to use force, if practical/feasible.

Other options, not listed above, may be available to assist in de-escalating the situation.

Supervisors who become aware of a situation where an officer is using de-escalation techniques monitor the radio communications and evaluate the need to respond to the scene.

D. PROPORTIONALITY. It is important that an officer's level of force be should balance proportional to the severity of the offense committed or the threat posed to human life for which the officer is taking action against the law enforcement task to be accomplished when determining the appropriate level of force. It is critical officers consider apply the principles of proportionality when encountering a subject who is armed with a weapon other than a firearm, such as an edged weapon, improvised weapon, baseball bat, brick, bottle, or other object. Officers may only use the degree of force that is reasonable and necessary to accomplish their lawful duties.

E. DUTY TO INTERVENE. Officers shall intervene when they reasonably believe another officer is about to use, or is using, excessive force. Officers shall promptly report any use of excessive force and the efforts made to intervene to a supervisor.

II. CONSIDERATIONS GOVERNING ALL USES OF FORCE.

A. USE OF FORCE MUST BE FOR A LAWFUL PURPOSE. Under the Fourth Amendment of the United States Constitution and the California Penal Code section 835(a), officers may use reasonable force in the performance of their duties, for the following purposes:

1. To effect a lawful arrest, detention, or search.
2. To overcome resistance or to prevent escape.
3. To prevent the commission of a public offense.
4. In defense of others or in self-defense.
5. To gain compliance with a lawful order.
6. To prevent a person from injuring himself/herself. However, an officer is prohibited from using lethal force against a person who presents only a danger to himself/herself and does not pose an imminent threat of death or serious bodily injury to another person or officer, unless the officer also poses an imminent danger of death or serious bodily injury to another life or officer. See DGO 5.02, Use of Firearms and Lethal Force.

B. USE OF FORCE MUST BE REASONABLE. Under the Fourth Amendment of the United States Constitution and California Penal Code section 835(a), an officer's decision to use force, and to use a particular type and degree of force, must be objectively reasonable under the totality of the circumstances. Furthermore, California Penal Code section 835a states, in part, that a peace officer who makes or attempts to make an arrest need not retreat or desist from his/her efforts by reason of resistance or threatened resistance of the person being arrested; nor shall such officer be deemed the aggressor or lose his/her right to self-defense by the use of reasonable force to effect the arrest, or to prevent escape, or to overcome resistance. An officer must be able to clearly articulate the objective reasons, based on the information available to the officer at the time, why a particular force option was used. Relevant factors include but are not limited to:

1. Whether the subject poses an immediate threat to the safety of the public or officers, and the degree of that threat;
2. Proximity, access to and type of weapons available to the subject;
3. Time available to an officer to make a decision;
4. Availability of additional officers or resources to de-escalate the situation;
5. Any force should be proportional to the severity of the offense committed for which the officer is taking action;
6. Environmental factors and/or other exigent circumstances;
7. Whether the subject is attempting to evade arrest by flight or is actively resisting, and the degree of that resistance;
8. Whether the subject’s escape could pose a future safety risk.
Not all of the above factors may be present or relevant in a particular situation, and there may be additional factors not listed.

C. UNLAWFUL PURPOSES. Penal Code Section 149 provides criminal penalties for every public officer who "under color of authority, without lawful necessity, assaults or beats any person." When any degree of force is utilized as summary punishment or for vengeance, it is clearly improper and unlawful. Any malicious assaults and batteries committed by officers constitute gross and unlawful misconduct and will be criminally investigated.

D. DUTY TO RENDER FIRST AID. Officers shall render first aid when a subject is injured or claims injury caused by an officer's use of force unless first aid is declined, the scene is unsafe, or emergency medical personnel are available to render first aid.
E. DUTY TO PROVIDE MEDICAL ASSESSMENT. Officers shall arrange for a medical assessment by emergency medical personnel when a subject is injured or complains of injury caused by a use of force, or complains of pain that persists beyond the use of a physical control hold, and the scene is safe. If the subject requires medical evaluation, the subject shall be transported to a medical facility. If the emergency medical response is excessively delayed under the circumstances, officers should contact a supervisor to coordinate and expedite the medical assessment or evaluation of the subject, e.g., transport subject to nearest medical facility by SFPD. See DGO 5.18, Prisoner Handling and Transportation.

F. SUBJECT WITH ARMED WITH A WEAPON. In situations where a subject is armed with a weapon, officer and supervisors shall comply with the following:

1. OFFICER'S RESPONSIBILITY. Upon being dispatched to or on-viewing a subject with a weapon, an officer shall call a supervisor immediately. When safe and feasible under the totality of the circumstances, officers should consider the principles listed in Section I, A-E.

2. SUPERVISORS' RESPONSIBILITIES. When notified that officers are dispatched to or on-view a subject armed with a weapon, a supervisor shall immediately, when feasible:
   a. Notify DFM, monitor radio communications, respond to the incident (e.g., "3X100, I'm monitoring the incident and responding.");
   b. Remind responding officers, while en-route, absent a "Code 33" or other articulable reasons why it would not be feasible or unsafe to do so, to protect life, isolate and contain the subject, maintain distance, find cover, build rapport, engage in communication without time constraint, and call for appropriate resources;
   c. Upon arrival, assume command, and ensure appropriate resources are on-scene or are responding.

III. FORCE OPTIONS

The force options authorized by the Department are physical controls, personal body weapons, chemical agents, impact weapons, extended range impact weapons, vehicle interventions, conducted energy devices, and firearms.

A. PHYSICAL CONTROLS/PERSONAL BODY WEAPONS. Physical controls, such as control holds, take-downs, strikes with “personal body weapons” (i.e., body parts such as a hand, foot, knee, elbow, head butt, etc.), and other weaponless techniques are designed to incapacitate and subdue subjects.

1. PURPOSE. Officers should consider the relative size and possible physical capabilities of the subject compared to the size, physical capabilities, skills, and experience of the officer. When faced with a situation that may necessitate the use of physical controls, officers should consider requesting additional resources to the scene to resolve the situation with a minimal amount of force. Different physical controls involve different levels of force and risk of injury to a subject or...
to an officer. Some physical controls may actually involve a greater risk of injury or pain to a subject than other force options.

2. USE. When a subject offers some degree of passive or active resistance to a lawful order, in addition to thoughtful communication, officers may use physical controls to gain compliance, consistent with Department training. A subject's level of resistance and the threat posed by the subject are important factors in determining what type of physical controls or personal body weapons should be used.

3. PROHIBITED USE OF CONTROL HOLDS. Officers are prohibited from using the following control holds: choke holds, i.e., choking by means of pressure to the subject's trachea,
   a. Carotid restraint; and
   b. Choke hold.

4. MANDATORY MEDICAL ASSESSMENT. Any subject who has been injured, or complains of an injury to the subject's trachea, is likely to result in injury to either the subject or the officer. In many instances, chemical agents can reduce or eliminate the necessity to use other force options to gain compliance, consistent with Department training.

5. REPORTING. Use of physical controls is a reportable use of force when the subject is injured, complains of injury in the presence of officers, or complains of pain that persists beyond the use of a physical control hold. Striking a subject with a personal body weapon (i.e., body parts such as a hand, foot, knee, elbow, head butt, etc.) is a reportable use of force. (See DGO 5.01.1)

B. CHEMICAL AGENTS. Chemical agents, such as Oleoresin Capsicum (OC) Spray, are designed to cause irritation and temporarily incapacitate a subject.

1. PURPOSE. Chemical agents can be used to subdue an unarmed attacker or to overcome resistance (unarmed or armed with a weapon other than a firearm) that is likely to result in injury to either the subject or the officer. In many instances, chemical agents can reduce or eliminate the necessity to use other force options to gain compliance, consistent with Department training.

2. WARNING. Officers shall provide a warning prior to deploying a chemical agent, if practical:
   a. Announce a warning to the subject and other officers of the intent to deploy the chemical agent if the subject does not comply with officer commands; and
   b. Give the subject a reasonable opportunity to voluntarily comply unless it would pose a risk to the community or the officer, or permit the subject to undermine the deployment of the chemical agent.

3. MANDATORY FIRST AID. At the scene or as soon as possible, officers shall administer first aid by:
   a. Seating the subject or other person(s) exposed to a chemical agent in an upright position, and
   b. Flushing his/her eyes out with clean water and ventilate with fresh air.

4. MANDATORY MEDICAL ASSESSMENT. Any person exposed to a chemical agent shall be medically assessed by emergency medical personnel. (See Section
I.E.) Any exposed person shall be kept under direct visual observation until he/she has been medically assessed. If an exposed person loses consciousness or has difficulty breathing, that information shall be provided to dispatch to expedite emergency medical personnel.

5. TRANSPORTATION. Subjects in custody exposed to a chemical agent must be transported in an upright position by two officers. The passenger officer shall closely monitor the subject for any signs of distress. If the subject loses consciousness or has difficulty breathing, officers shall immediately seek emergency medical attention. Hobble cords or similar types of restraints shall only be used to secure a subject’s legs together. They shall not be used to connect the subject’s legs to his/her waist or hands in a “trussed” manner or to a fixed object.

6. BOOKING FORM. Officers shall note on the booking form that the subject has been exposed to a chemical agent.

7. REPORTING. If an officer deploys a chemical agent on or near someone, it is a reportable use of force. (See DGO 5.01.1)

C. IMPACT WEAPON. Impact weapons, such as a baton, are designed to temporarily incapacitate a subject.

1. PURPOSE. An impact weapon may be used to administer strikes to non-vital areas of the body, which can subdue an aggressive subject in accordance with Department training. Only Department issued or authorized impact weapons shall be used. If under unusual circumstances, officers need to resort to the use of other objects as impact weapons, such as a flashlight or police radio, officers shall articulate the reason for doing so. An impact weapon should normally not be raised above the head to strike a blow. Whenever possible, strikes to vital areas, including the head, neck, face, throat, spine, groin, or kidneys should be avoided.

2. WARNING. When using an impact weapon, an officer shall, if practical/feasible:
   a. Announce a warning to the subject of the intent to use the impact weapon if the subject does not comply with officer’s commands; and
   b. Give the subject a reasonable opportunity to voluntarily comply, except that officers need not do so where it would pose a risk to the community or the officer or permit the subject to undermine the use of the impact weapon.

3. PROHIBITED USES. Officers shall not:
   a. Use the impact weapon to intimidate a subject(s) or person(s), such as slapping the palm of their hand with an impact weapon or;
   b. Strike a handcuffed prisoner with an impact weapon.
   c. Raise an impact weapon above the head to strike a subject.

4. MANDATORY MEDICAL ASSESSMENT. Any officer who strikes a subject with an impact weapon shall ensure the subject is medically assessed. (See Section I.E.)

5. REPORTING. If an officer strikes a subject with an impact weapon, it is a reportable use of force. (See DGO 5.01.1)
D. EXTENDED RANGE IMPACT WEAPON (ERIW). An Extended Range Impact Weapon (ERIW), such as a beanbag shotgun, is a weapon that fires a bean bag or other projectile designed to temporarily incapacitate a subject. An ERIW is generally not considered to be a lethal weapon when used at a range of 15 feet or more.

1. PURPOSE. The ERIW may be used on a subject who is armed with a weapon, other than a firearm, that could cause serious injury or death. This includes, but is not limited to, edged weapons and improvised weapons such as baseball bats, bricks, bottles, or other objects. The ERIW may also be used to subdue an aggressive, unarmored subject who poses an immediate threat of injury to another person or the officer in accordance with Department training.

2. USE. The ERIW shall be properly loaded and locked in the shotgun rack of the passenger compartment of the vehicle. Officers should observe the following guidelines:
   a. An ERIW officer shall always have a lethal cover officer. When more than one officer is deploying an ERIW, good tactical judgment in accordance with Department training will dictate the appropriate number of lethal cover officers. In most circumstances, there should be fewer lethal cover officers than the number of ERIWs deployed.
   b. The ERIW officer's point of aim should be Zone 2 (waist and below). Zone 1 (waist and above) may be targeted if Zone 2 is unavailable.
   c. The ERIW officer shall assess the effect of the ERIW after each shot. If subsequent ERIW rounds are needed, the officer should aim at a different target area.
   d. The ERIW should not normally be used in the following circumstances:
      a. The subject is at the extremes of age (elderly and children) or physically frail.
      b. The subject is in an elevated position where a fall is likely to cause serious injury or death.
      c. The subject is known to be pregnant.
      d. At ranges of less than 15 feet.

4. WARNING. When using the ERIW, an officer shall, if practical:
   a. Announce to other officers the intent to use the ERIW by stating "Red Light! Less Lethal! Less Lethal!"
   b. All other officers at scene to acknowledge imminent deployment of ERIW by echoing, "Red Light! Less Lethal! Less Lethal!"
   c. Announce a warning to the subject that the ERIW will be used if the subject does not comply with officer commands;
d. Give the subject a reasonable opportunity to voluntarily comply unless it would pose a risk to the community or the officer, or permit the subject to undermine the deployment of the ERIW.

5. MANDATORY MEDICAL ASSESSMENT. Any subject who has been struck by an ERIW round shall be medically assessed by emergency medical personnel. (See Section II.E.)

6. BOOKING FORM. Persons who have been struck by an ERIW round shall have that noted on the booking form.

7. REPORTING. Discharge of an ERIW is a reportable use of force. (See DGO 5.01.1)

E. VEHICLE INTERVENTIONS. An officer’s use of a police vehicle as a “deflection” technique, creation of a roadblock by any means, or deployment of spike strips, or any other interventions resulting in the intentional contact with a noncompliant subject’s vehicle for the purpose of making a detention or arrest, are considered a use of force and must be reasonable under the circumstances. The Department’s policies concerning such vehicle intervention tactics are set forth in DGO 5.05, Response and Pursuit Driving.

F. CONDUCTED ENERGY DEVICE (CED). See Special Operations Bureau Order on use of CED.

G. CAROTID RESTRAINT. The carotid restraint is a control technique in which the carotid arteries on the sides of the neck are compressed, restricting blood flow to the brain, causing the subject to lose consciousness.

1. PURPOSE. An officer can use the carotid restraint in situations where lethal force is justified.

2. WARNING BEFORE USE. When deploying the carotid restraint, an officer shall, if feasible:
   a. Announce a warning to the subject to stop resisting; and
   b. Give the subject a reasonable opportunity to voluntarily comply, except that officers need not do so where it would pose a risk to safety or permit the subject to undermine the deployment of the carotid restraint.

3. MANDATORY MEDICAL ASSESSMENT. In all cases where the carotid restraint is used, the subject shall be medically assessed and medically evaluated. Officers shall monitor the subject’s vital signs closely. Additionally, if the subject has difficulty breathing or does not immediately regain consciousness, officers shall immediately seek medical care by trained personnel. (See Section II.E.)

4. BOOKING FORM. Persons who have been the subject of a carotid restraint shall have that noted on the booking form.

5. REPORTING. Use of carotid restraint, even if unsuccessful, is a reportable use of force. (See DGO 5.01.1)
GH. FIREARMS. See DGO 5.02, Use of Firearms and Lethal Force.

The Department's highest priority is safeguarding the sanctity of all human life. The purpose of the policy is not to restrict officers from using sufficient force to protect themselves or others but to provide general guidelines that may assist the Department in achieving its highest priority.

If exceptional circumstances occur, not contemplated by this order, an officer's use of force shall be reasonably necessary to protect others or himself or herself. The officer shall articulate the reasons for employing such use of force.

Commented [sfpd33]: See corresponding comment 34
Corresponding Comments from Draft DGO 5.01, Use of Force (03/09/16 draft date)

1. Language changed on recommendation of CIT, SFBAR, and Coalition on Homelessness.
2. SFPD changed this language through the policies.
3. SFPD changed this language.
4. SFPD changed this language.
5. SFPD made correction.
6. Language changed on recommendation of Pride Alliance.
7. Language changed on recommendation of SFBAR.
8. SFPD re-organized this section.
9. Language changed on recommendation of Pride Alliance.
10. SFPD re-organized this section.
11. Language changed on recommendation of Pride Alliance.
12. SFPD changed this language.
13. Language added on recommendation of Pride Alliance and POA.
14. SFPD added language to comply with 835(a) of the California Penal Code.
15. Language changed on recommendation of OCC.
16. Language added on recommendation of POA.
17. Language deleted on recommendation of Pride Alliance.
18. Language deleted on recommendation of SFBAR.
19. SFPD added language to clarify.
20. Section and language added on recommendation of the OCC.
21. SFPD changed language.
22. Language added on recommendation of OCC and SFDA/BRP.

23. Language added on recommendation from OCC.

24. Language added on recommendation from OFJ and POA.

25. Language changed on recommendation of OFJ and POA.

26. SFPD added language to clarify.

27. Language added on recommendation of ACLU.

28. Language added on recommendation of POA.

29. Language added on recommendation of CIT working group.

30. POA, Pride Alliance, APOA, LPOA all support adding Conducted Energy Devices (CEDs) as a force option.

31. ACLU, SFBAR, some members of the CIT working group, the Coalition on Homelessness, OCC and the Public Defender disagree with any CED use by officers.

32. SFDA/BRP take no position on CEDs as a force option.

33. SFPD added this language.

34. SFPD changed this language based on POA.