

## **Officer-Involved Shooting Guidelines**

Ratified by the IACP Police Psychological Services Section  
Denver, Colorado, 2009

### **1. Purpose**

- 1.1 These guidelines were developed to provide information and recommendations to public safety agencies and mental health providers for the purpose of constructively supporting officers involved in shootings and other use-of-force incidents that may trigger the investigative process. Many of these recommendations can also be applied to other potentially distressing critical incidents. The field experience of members of the IACP Police Psychological Services Section, along with scientific research, suggests that following these guidelines can reduce the probability of long-lasting psychological problems resulting from such incidents. These guidelines are not meant to be a rigid protocol and may be adapted according to agency size and funding, as well as applicable state and local laws.

### **2. Pre-Incident Preparation**

- 2.1. Officers and administrations should be made aware of the emotional, psychological, and behavioral residuals often associated with officer-involved shootings. Agencies are encouraged to train all agency personnel in posttraumatic reactions and appropriate ways to respond to employees who have been involved in a potentially traumatic incident. Trainings should include what to expect personally, departmentally, and legally after a shooting or other significant use-of-force incident.
- 2.2. Prior to any shooting incident, it is strongly recommended that the agency establish a working relationship with one or more trained, qualified, licensed mental health professionals experienced in the law enforcement culture as well as in providing post-shooting intervention. The department should notify this mental health resource as soon as possible following an officer-involved shooting, so that a post-shooting intervention can be facilitated.
- 2.3. All officers should be asked to complete a form indicating the names and contact numbers of family members and significant others whom they would like to be notified in the event that they are injured on duty and are unable to contact them personally. Officers should also identify two or three fellow officers, in order of preference, whom they have chosen to contact their family and significant others. This information should be routinely reviewed by all officers on an annual basis. Officers should be assured that the information they place on the document is safe from review by unauthorized personnel, and is readily available at the time of an incident.

### **3. At the Scene and Immediately Following**

- 3.1. Immediately after an incident, provide physical first aid and communicate emotional support and reassurance to involved officers and other personnel. This support should be focused on calming physical and emotional stress and supporting the officers' sense of safety.
- 3.2. Involved officers should be encouraged to step immediately away from the scene and any media attention and be sensitively transitioned to a safe and supportive environment. Instead of driving themselves, they should be provided with transportation. If returning immediately to the department is not practical, they should be allowed to choose another appropriately private and safe remote location. Above all, officers should not be isolated. Instead, they should be accompanied by supportive peers and supervisors who can assist them in following agency policies regarding talking about the incident before the initial investigative interviews. If officers themselves have an immediate need to talk about the incident, they should be encouraged to do so solely with individuals with whom they have legally privileged confidentiality. Consider both the officers' preferences and the integrity of the investigation when deciding if and when the officers are to return to the scene.
- 3.3. Following a shooting incident, officers may feel vulnerable if unarmed, especially when they are in uniform. If an officer's firearm has been taken as evidence, a replacement weapon should be immediately provided as a sign of support, confidence, and trust unless there is an objective basis for questioning the officer's fitness for duty. In addition to replacing the officer's weapon, it is recommended that a peer (ideally trained in peer support; see *IACP PPSS Peer Support Guidelines*, or has previously gone through an officer-involved shooting while employed with the agency) be assigned to the officer immediately following the incident to provide support and security. Officers should be kept informed of when their weapon is likely to be returned.
- 3.4. Officers should be provided with the opportunity to contact their family members as soon as possible. It is best for the officers themselves to contact their families. It is therefore prudent that no contact be made with family members before the officers have had this opportunity. If this opportunity is significantly delayed, or officers are injured and unable to call themselves, then individuals who preferably know the families and have been previously chosen by the officers should call as soon as possible. Offers to call other support people such as friends, family members, chaplains, and so on, should be made to ensure that the family members have their support system mobilized. Family members who wish to be with injured officers should be offered transportation in lieu of driving themselves.

- 3.4.1. Officers not involved in the incident, but on duty, should attempt to contact their families and advise them that a shooting incident has occurred, but that they were not involved.
- 3.5. The investigative process and concerns over legal and administrative consequences are often the most stressful parts of an officer-involved shooting for involved personnel. During the first few hours, a designated peer, union representative and/or supervisor should explain to officers what is likely to happen administratively and the reasons behind the required administrative actions. A written summary of administrative and investigative procedures should be provided to all officers during their initial training and again within the first few hours after a shooting incident. During this potentially emotional and confusing time, officers may also wish to consult legal advisers of their choice for further education. Within the initial two days, educate involved officers on the protocol of the investigation as well as any potential actions by the media, grand jury, or review board. It is preferable that these steps be taken prior to any formal investigative interviews. It is equally important that, over time, officers be made aware of the progress of the investigation.
- 3.6. It would be helpful to provide officers and their significant others with written information that reviews physical and psychological reactions to shooting incidents. Topics covered should include what to expect, how to support each other, coping strategies, and whom to contact for further assistance. These may be the same handouts provided to newly hired officers (see 2.1).

#### **4. Investigative Period**

- 4.1. Shootings and other use-of-force incidents can result in heightened physical and emotional reactions for the participants. It is recommended that officers involved in such incidents be given a minimum three days leave, either administrative or through regular days off, in order to marshal their natural coping skills to manage the emotional impact of the incident prior to return to duty or the preparation of a use-of-force or incident report. Those who were present at the scene but did not discharge their weapons may also be emotionally impacted by the incident and may benefit from a period of administrative leave. It is important that officers and the public understand that administrative leave is a routine procedure and not a disciplinary suspension.
- 4.2. While officers may be asked to provide pertinent information soon after a shooting to aid the initial investigative process, it is suggested that they have some recovery time before providing a full formal statement. Depending on the nature of the incident and the emotional status of the officers, this can range from a few hours to several days. Officers will often benefit from at least one night's sleep prior to being interviewed. Officers who have been afforded these opportunities are likely to provide more coherent and accurate statements. Providing a secure

setting, insulated from the press and curious coworkers, is important during the interview process.

- 4.3. During the course of a post-shooting investigation, potential legal and emotional difficulties may arise for officers involved in subsequent critical incidents. When appropriate, it is recommended that officers and agencies work together in considering temporary duty assignments, if available, that will lessen the likelihood that officers will be involved in subsequent use-of-force incidents during on-going investigations.
- 4.4. If officers have published home telephone numbers, it may be advisable to have friends or voicemail screen telephone calls to prevent any harassing or threatening calls from reaching officers or family members.
- 4.5. Talking with peers who have had similar experiences can be quite helpful for officers involved in significant use-of-force incidents. Often these personnel respond immediately on scene to provide support and psychological first aid. Peer support personnel may also be an asset by participating in group interventions in conjunction with a mental health professional and in providing follow-up support. Family members of officers involved in shootings may also benefit from peer support particularly from the family members of those who have previously been involved in shootings or other life-threatening events. The formation and administrative backing of peer support and outreach teams for officers and family members may prove to be a wise investment prior to an officer-involved shooting. Peer support should only be ancillary to intervention by a mental health professional and should never take its place. (Please see *IACP PPSS Peer Support Guidelines* for information concerning the development and use of peer support teams.)
- 4.6. Personal concern and support for officers involved in significant use-of-force incidents, communicated from high-ranking administrators, can provide an extra measure of reassurance and comfort. The administrator does not have to comment on the situation, or make further statements regarding legal or departmental resolution, but can show concern and empathy for the officers during this stressful experience. These contacts, whether in person or via telephone, should be made as soon as possible after the incident.
- 4.7. As soon as is practical, a designated and informed person should brief the officers' supervisors and team, followed by the agency as a whole, about the shooting. Efforts should be taken to make sure distributed information is accurate. This practice will reduce the number of questions asked and criticisms of those involved, and will also help to quell any rumors that may have arisen. Further, agencies should make every effort to expedite the completion of administrative and criminal investigations, keep the officers informed, and notify them of the outcomes as soon as possible.

- 4.8. Significant use-of-force investigations are complex events involving an array of law enforcement and other government agencies. Continued communication between all parties throughout the course of an investigation protects involved officers by mitigating misunderstandings and conflict among the many different interests.
- 4.9. Members of the community, including the media, may benefit from education regarding procedures and protocols related to police use of force. It is recommended that police agencies assist the community in these efforts by providing information about factors involved in police use of force such as officer safety issues and pertinent laws.
- 4.10. Lengthy investigations can cause distress to officers. Agencies should make every effort to expedite the completion of administrative and criminal investigations. While investigations are pending, supervisors should maintain regular contact with officers and keep them apprised of any pertinent developments.

## **5. Post-Shooting Interventions**

- 5.1. Post-shooting interventions should be conducted only by licensed mental health professionals trained and experienced in working with law enforcement personnel. Care should be taken in selecting a mental health professional to ensure that he or she is well versed in the law enforcement culture and has knowledge and experience in the treatment of traumatized individuals.
- 5.2. Some officers would choose not to participate in the post-shooting interventions provided by qualified mental health professionals, yet when required to attend, they often find it helpful. In addition, some may be unaware of the potential impact of the incident and choose not to attend. For these reasons, it is recommended that officers be required to attend one individual post-shooting intervention so they can, at a minimum, be provided with basic education and coping skills to better manage their reactions. While officers may be required to attend at least one mandatory session, this does not mean that it should be mandatory for them to discuss the event or how they feel with the mental health professional. Any participation beyond attendance should be voluntary on the part of the officers.
- 5.3. After a life-threatening incident, officers frequently are most concerned about how they reacted physiologically and emotionally, and whether these reactions were “normal.” Post-shooting interventions should be primarily educative as this reassurance reduces worry, anxiety, and negative self-assessment. Much of the time the normalization and education provided during the post-shooting intervention affords sufficient support to facilitate individual coping mechanisms. If not adequately addressed, however, these reactions may lead to more severe and chronic problems requiring treatment services.

- 5.4. The initial post-shooting intervention should occur within one week after the shooting incident. The initial goal should be to reduce stress, assess and “normalize” any problematic post-incident reactions and provide education regarding stress reduction and self-care. Particular attention should be paid to maintaining sleep functioning, accessing social support, and minimizing or abstaining from alcohol use.
- 5.5. It is recommended that officers not be required to return to work immediately following a post-shooting intervention session.
- 5.6. A single contact with a mental health professional may prove to be inadequate for officers who have been severely affected by an event. Also, a subset of officers may experience delayed onset of problems. The mental health professional should informally assess, for the sole purpose of voluntary referral, which officers may need additional or alternative types of support to further their recovery process. Follow-up sessions should be made available to every involved officer and, if appropriate, referrals may be offered for further treatment and/or to peer support or chaplaincy programs.
- 5.7. Because delayed reactions may occur, all officers receiving an initial post-shooting intervention should receive follow-up contact by the mental health professional either via phone or e-mail sometime within the first four months post-incident. In addition, contact should be made prior to the first anniversary of the incident.
- 5.8. It should be made clear that the individual post-shooting intervention is a confidential and legally privileged communication between the mental health professional and the officers involved. No information about the content of these sessions should be released without the officer’s written authorization.
- 5.9. Life-threatening use-of-force incidents also have the potential to emotionally impact an officer’s significant others, who often can provide valuable support to officers following these incidents. Therefore, it can be beneficial for all concerned to include significant others in the psychological debriefing process. It is recommended that consideration be given to inviting significant others to accompany officers to individual post-shooting interventions. If significant others are invited, officers may have specific preferences about individual versus joint sessions, and mental health providers should give serious consideration to such preferences. The decision to conduct individual debriefings followed by joint debriefings, or joint debriefings alone, should be decided by the officer and mental health provider.
- 5.10. It should be made clear to all involved personnel, supervisors, and the community at large that officers’ fitness-for-duty should not be brought into question by virtue of their involvement in shooting incidents. Post-shooting psychological interventions are separate and distinct from any fitness-for-duty assessments or

administrative or investigative procedures that may follow. This does not preclude a supervisor from requesting a formal fitness-for-duty evaluation based upon objective concerns about an officer's ability to perform his or her duties. However, the mere fact of being involved in a shooting does not necessitate such an evaluation prior to return to duty. (Please see *IACP PPSS Psychological Fitness-for-Duty Evaluation Guidelines* for information concerning the criteria and procedures for these evaluations.)

- 5.11. If a fitness-for-duty evaluation is requested, it should not be conducted by the mental health professional who provided the post-shooting intervention. However, as part of the post-shooting intervention, the mental health professional can assist officers in making decisions concerning returning to duty. Officers maintain the right to privilege and confidentiality regarding such communications unless otherwise waived (e.g., in the context of a workers' compensation claim).
- 5.12. Group psychological interventions may be beneficial following incidents involving multiple personnel. All officers directly involved in the shooting incident should receive an initial individual intervention prior to the group session. Participants should be limited to persons who were involved in the event and attendance should be strictly voluntary. Additional individual counseling referrals should be available for those needing or wanting further assistance.
- 5.13. Group sessions should be jointly facilitated by one or more mental health professionals experienced in working with law enforcement and trained peer support personnel. The confidentiality of group sessions should be respected and some states provide a degree of legal privilege to sanctioned peer support groups. Regardless of local laws, when information is processed in group settings, the risk of a breach of confidentiality is greater than in individual sessions conducted by licensed mental health professionals with whom officers have legal privilege. Although it is recommended that attendance at group sessions be voluntary, if attendance is mandated, any participation should be at the discretion of each officer (see 5.2).
- 5.14. Agencies should consider the impact of use-of-force incidents on all other involved emergency service personnel (including dispatchers) and provide appropriate interventions consistent with these guidelines.