TN.DOE.CJ2 7) Identify compliance issues facing public security professionals in various agencies from private security to local, state, and federal law enforcement agencies including:

- a. the importance of the private security and public safety Code of Ethics,
- b. the need to comply with department policy and federal guidelines,
- c. the importance of a daily individual patrol and location action plan,
- and d. liability of individuals in private and public security.

"That's our policy."

This is a common explanation used in the customer service industry to explain to customers why they are not getting what they want. This is horrible in terms of customer service. There are much better ways to tell people no. Unfortunately this phrase often means "I don't know why I can't do this for you, but I'm still not going to."

If policy is broken in the customer service world the consequences are not a serious as broken policy in the criminal justice world.

Policy for law enforcement agencies usually are created around laws, possible safety hazards, civil liability, technology updates, and previous mistakes.

Most law enforcement officers would agree that there are 3 goals commonly on their minds.

1. Stay alive

1

- 2. Stay out of prison
- 3. Stay out of the poor house

Policy

2

4

If police is used as it is intended it will help those in law enforcement avoid the negative side of those 3 goals.

- A code of ethics will help most officers avoid the moral mistakes, however laws are constantly being changed and updated.
- Policies mirroring those laws are also being changed.

3

#### Policy

- The U.S. Supreme court is the highest court in our country. As the supreme court makes decisions all of the agencies that could be effected by those decisions begin to make changes. Federal, state, and local laws are updated.
- The Tennessee legislature meets every year to either update or change laws. These changes to law typically take effect July 1<sup>st</sup> every year.
- Policy is constantly changing

Compliance

- With the constant changes to law it is a challenge for agencies to remain in compliance with those laws.
- Sometimes policies are not updated as quickly as supreme court rulings happen and laws change
- Officers have to understand that the current laws always override policy.
- This places a lot of responsibility on the officer to know current laws and to know policy.

## Compliance

- If you were to go from one agency to another agency the policies would be different.
- This difference would probably account for culture in that specific area. Good policy will adapt to culture, because agencies will need to adapt policies to meet the needs of the community you serve.
- Different cultures come with different problems.
   Experience with those particular problems drive policy to update in an effort to create consistency in solving those problems.

## **Policy Changes**

- Other challenges for agencies and their ever changing policies are changes in technology.
- Technology can be used as a valuable tool, but how does that technology fit within the confines of the law?
- Drones have been used by the military operations for many years. In 2006 the FAA issued the first commercial drone permits. The permits lifted some limitations on consumer drones flown for recreational purposes.

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#### **Technology**

- New laws will be developed throughout the years involving drones.
- Not only for use by citizens but for use by law enforcement.
- How will the use of drones by law enforcement effect civil rights?
- At what point in time doe the use of a drone violate your right to privacy.
- This question should not be that difficult, being agencies have have been flying helicopters for a long time with officers inside viewing what is underneath them.

## Technology

- Drones could applied in many different ways for law enforcement some of those ways may include:
  - Criminal Surveillance
  - Criminal apprehension
  - Traffic management accident investigation
  - Mapping locations
  - Crime scene documentation
  - Safe surveillance of disaster sites
  - Search and rescue
  - Dealing with hazardous materials or explosives

9 10

## Technology

- Another common update to policy is the use of social media. Police officers have access to sensitive information.
- As new generations become law enforcement the use of social media in the mix of sensitive information can be hazardous and devastating.
- Even if someone's profile is set to private the information that is put on any form of social media becomes the property of that entity and can be viewed by its owners. Any of this information can also be subpoenaed as evidence in court.

## Technology

- Body worn cameras are becoming popular with police departments.
- The obvious advantages to while using these cameras is so apparent that departments are adapting policy for the use of body worn cameras.
- Some departments require the camera to be on as officers respond to any call for service. Exceptions are made for specialized units where the use of the camera could jeopardize officer safety.

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## Technology

- Improvements in weapons and pain compliance tools require adjustments to policy.
- Conducted electrical weapons, commonly referred to as tasers, are being used more and more by agencies.
- Policies have to decide where these new items fit into the officers use of force continuum.

Handcuffing

13 14

## Apprehension and Arrest

- •You need to have what in order to make an arrest?
- Need to have probable cause
- PC to arrest: a set of facts and circumstances which would leave a reasonable and prudent person to believe that a crime has been committed.

#### Apprehension and Arrest

- What type of force can be used to apprehend a person/suspect?
  - •The minimum amount of the force necessary to apprehend or arrest a subject.
- All subjects that have been taken into custody MUST be handcuffed.
  - This is for officer safety.

15 16

## Apprehension and Arrest

- Frisk and pat down after handcuffing.
  - What is the difference between a pat down/Frisk and a search?
  - Pat Down is a pat down of the outer clothing and feeling for weapons for officer safety purposes
  - A search usually happens incident to arrest and involves a more thorough approach, such as emptying pockets and removing extra layers of clothing.

## Initiating the Apprehension

- Wait for a back up unit, if possible.
- When making the approach, remain alert and evaluate the suspect's demeanor and physical conditioning.
- Maintain a safe distance during the initial contact.
- Advise the subject of the offense after they are handcuffed.
- Take actions quickly and remove the subject to a safe place to avoid bystander interference.

#### PREPARING FOR HANDCUFFING

- Hands up at chest level.
- •Load handcuffs make them ready
- Make sure they are unlocked/not doubled
- Check your stance (Bladed Position)
- Hands in interview position

## Risk Factors in Handcuffing

- Know the suspects mental attitude/ behavioral disorders.
- Time and location
- If the subject is intoxicated
- Officer's attitude.

19 20

#### STANDING HANDCUFFING

- STANCE:
- Bladed position
- VERBAL COMMANDS:
   Get your hands out of your pockets.
  - Turn around.

  - Spread your feet apart.
     Bend over at the waist
     Put your hands behind your back
  - Palms towards the sky
    Look to the left/right
- Grab the subjects right thumb on the right hand.
   Place the bottom handcuff on the subjects right wrist.
- Shake the left/right hand (grab the fingers not thumb) and place the top handcuff on the left wrist.
- DOUBLE LOCK THE HANDCUFFS

KNEELING POSITION

- · Hands out of pockets
- Turn around
- Drop to your knees
- Put your hands behind your back
- · Palms towards the sky
- Bend over at the waistCross your feet
- · Look away from me
- Grab the subjects right/left thumb on the right/left hand while placing your foot on the subjects right/left foot.
  - Place the bottom handcuff on the subjects right wrist.
- Shake the left/right hand (grab the fingers not thumb) and place the top handcuff on the left wrist.
- DOUBLE LOCK THE HANDCUFFS

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#### PRONE HANDCUFFING

- Drop to your knees
- · Lay face down
- Spread your hands out to your side.
- · Cross your feet.
- · Look away from me
- Grab the subjects right/left thumb on the right/left hand while kneeling down.
  - Place the bottom handcuff on the subjects right wrist.
- Tell the suspect to bring hand towards their other hand.
- Shake the left/right hand (grab the fingers not thumb) and place the top handcuff on the left wrist.
- DOUBLE LOCK THE HANDCUFFS

APPROACHING AT PRONE POSITION

- · Check your stance.
- · Load your handcuffs
- Lower your center of gravity (squat as you go in)
- Slowly move in dragging your gun side leg
- Grab the right/left thumb.
- Place the bottom handcuff on the subject.

#### APPROACHING AT PRONE POSITION

- Drop down without putting any weight onto the subject.
- Place the handcuffed hand and arm as close to the left/right leg as possible.
- Tell the subject to bring his/her other hand to the middle of their back.
- Shake the hand and place the other handcuff onto the subject.
- DOUBLE LOCK THE HANDCUFFS WHILE THE PERSON IS STILL DOWN.

#### Direct Approach

- Advantage
- Observe all movements
- Disadvantage
- Lose surprise element and vulnerable to resistance

25 26

## Rear Approach

- Advantages
- Surprise
- Reduces probability of direct attack
- Disadvantages
- May provoke physical response.

## Searching Apprehended Subjects

- Keep Balance
- Keep Subject off balance
- Watch head and shoulders of subject for movement
- Keep commands brief
- Grab and squeeze the clothing
- Find out what is inside the pockets
- Always search from the rear.
- Search males and Females alike.

27 28

## Standing Search Position

- Start with the subject's head, hair and cap
- Move down to the neck area
- search or frisk the waistband by starting with the front right side first.
- Search the right back of the subject
- Search the waist band
- Search the right out of the subject's leg
- $\bullet$  Search the bottom right of the leg, including the socks and inside the shoe.

## Standing Search

- Move up the inside of the subject's right leg
- Search the groin and buttocks area
- Search the left side of the upper body, both front and rear
- Move down the inside of the leg
- Search the left outside of the leg
- Search the left sock and shoe area.
- Move back towards the waistband.

**Basic Traffic Stops** 

To Perform a Traffic Stop An Officer:

- Observes a violation
- Responds to a call involving criminal activity and finds the suspect vehicle
- Has a reasonable suspicion
- Picks a safe spot to initiate a traffic stop
- Turns on the lightbar
- Dispatches information over the radio

  - LocationLicense plate
  - Anything else dispatch may need to know
    Number of occupants
    Color and type of car

  - · Unusual and/or suspicious activity

32 31

## To Perform a Traffic Stop An Officer:

- · Positions the vehicle
  - To the left of the violator
  - Turned towards the left
- Observes the occupants while looking for unusual movement

## To Perform a Traffic Stop An Officer:

- Shines a spotlight into the center of the vehicle or the driver's side mirror, if performing the traffic stop at night
- Remembers the importance of keeping the element of surprise
- Uses various approaches when necessary

33 34

## **During The Stop**

The officer, during the approach:

- Moves toward the violator quickly
- Looks for oncoming traffic before exiting the vehicle
- Confirms the possession of all essential equipment (flashlight, notepad, pen, etc.)
- Checks the trunk
- Stands at an advantageous position

## During The Stop

- Greets and shows identification
- · States the violation that was committed
- · Asks for the driver's identification
- · States an action before it is taken
- · Takes the stated action
- Explains what the violator must do
- Leaves

## The officer must:

- Maintain sight of the violator's hands
- · Look for weapons or contraband in plain view

35

## **During The Stop**

The officer obtains:

- Driver's license or identification card
- Correct information, avoiding the name game
- · Proof of insurance
- Returns to vehicle
- · Runs the information
- Writes the ticket, confirms the warrant, etc.

## During The Stop

• Gives a verbal warning or writes a ticket

Discovers a warrant and arrests the violator

- Has dispatch confirm the warrant
- Requests backup
- Keeps an eye on the occupants
- Follows the steps of warrant arrest

37 38

## **During The Stop**

- The steps of warrant arrest
  - Approaches the driver and has him or her step out to the back of the vehicle when backup arrives
  - Makes the arrest
  - Releases the vehicle to a third party
  - Leaves the vehicle parked in a secure area
  - Impounds the vehicle if it is a traffic hazard
  - · Performs an inventory
  - Takes the violator to jail

#### Possible Scenarios

- The officer smells
  - Marijuana
    - Has the violator step out of the vehicle and calls for backup immediately.
  - Searches for marijuana wherever it may be hidden
- The officer smells
  - Alcoholic beverage
    - Takes the keys out of the ignition if necessary
    - Calls for backup
    - Administers Standardized Field Sobriety Tests (SFSTs)

39 40

#### Possible Scenarios

- The officer sees a gun on the passenger seat
  - Draws his or her weapon
  - Has the occupant exit the vehicle
  - Puts the violator in handcuffs
  - Performs a Terry Stop or Frisk
- The officer observes fervent movement, and then searches the area as a safety precaution
- The driver jumps out of the vehicle due to extreme emotion (anger, confusion, etc.); the officer has them get back into the vehicle

## Felony Traffic Stops

- When are they done?
- · There is a felony warrant
- The vehicle is stolen
- There is a threat to officer safety

Positions of Vehicles and Officers

- Officer vehicles are parked side-by-side.
- Officers take cover behind the vehicle door.

## **Felony Traffic Stops**

The primary officer commands the driver to:

- · Put his hands out of the window
- Throw the keys out of the window
- Open the door from the outside with his left hand
- · Lift up his or her shirt and turn around
- Face away from the officer and walk backwards to the sound of the
- Take a few steps to the right, when the suspect is close enough
- · Stop and get on his or her knees or stomach

## Felony Traffic Stops

The backup officer

- Arrests the suspect
- Takes the suspect to his car
- Searches the suspect

The primary officer

- · Gives the commands to get out again
- · Stays out of crossfire zone
- · Opens the trunk

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## Felony Traffic Stops

- Only the primary officer gives commands.
- Communication among the officers is key.
- When there is more than one person in the vehicle, wait until the driver is in the squad car before getting the other occupants out of
- When there is a gun in the suspect's waistband, let him or her know that you see it and you will shoot if he or she reaches for it.

#### Self Defense

- Who is responsible for your personal safety?
  - · You are.
- When it comes to your Personal Safety there are Four issues to consider.
- AWARENESS
- REDUCTION
- RECOGNITION
- AVOIDANCE

45 46

## Awareness: Lessen Your Chances of Being a Victim!

- Be aware of your surroundings and situations that might be
- Know how to avoid these situations.
- Know what choices to make if you find yourself in a potential
- · Remember if you allow alcohol and other drugs to impair your judgment, you make yourself vulnerable to anything.

## Reduction/Avoidance Strategies:

- Make sure you have a say in where you go and who will be with you.
- Have other transportation and/or money available if you choose to leave
- Stay in groups
- Let other people know your plans.
- Have your cell phone and make sure the battery is charged.

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#### Reduction/Avoidance Strategies:

- Strategies Tips for the Home:
- · Keep entrances well lit.
- Check ID of service people before letting them inside. When in doubt call the company to verify.
- Install peepholes and deadbolts on doors.
- Never give the impression you are alone.
- Keep bushes and shrubs trimmed.
- Be aware of potential hiding places.

#### Reduction/Avoidance Strategies:

- If you come home and see open doors or windows, signs of forced entry, don't go inside alone. Go to a phone or safe place and call police for help. If you are a police officer call for backup first.
- · Strategies in Your Car:
- Keep your car in good working order. Make sure you have gas and fill up during the day.
- · Always have your keys out and be ready to get in your car.
- Look around & under your car while walking to it. If something looks suspicious walk past.
- · Lock your doors immediately after entering and keep your doors locked at

49 50

#### Reduction/Avoidance Strategies:

- Park in well lighted public areas when possible. Always lock your
- Don't get out of your car if something looks odd, drive away.
- Look in your car when getting inside, that means in the back seat and cargo area.
- Don't help strangers who break down, call for help.
- If you get a flat drive carefully to the nearest well lit and well traveled area before you stop.
- If you are in an accident stay in your car until police arrive if you don't feel safe about getting out.
- If you are being followed don't go home. Drive to the nearest police or fire station and honk your horn. Or drive to a gas station or store.

## Reduction/Avoidance Strategies:

- Always be aware of your surroundings.
- Be aware of the people and animals around you.
- · Walk close to the curb. Avoid doorways, bushes and alleys.
- Don't walk alone at night, avoid areas with few people or areas not well lit.
- Be careful of people who stop to ask directions. Keep your distance when answering so you can run or just tell them you don't know and
- keep walking. • If you feel like you are being followed walk to a well populated area.
- If you are in trouble attract attention any way you can. Yell for help.

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## Reduction/Avoidance Strategies:

- Always, Trust your instincts. If you feel uneasy in a situation do something about it, don't worry about appearing foolish or overly
- Believe in yourself. Have the strength to be independent. Don't allow your self to be intimidated.

## Recognition:

- Keep your head. Stay calm think rationally about your options.
- If you are being forced to get into a vehicle, your life is in danger, so resist at all costs.
- Attract attention, cause a disturbance or try to disable your attacker.
- Do NOT get into the car. Yell, gouge their eyes, kick and/or knee them in the groin, stomp on their foot, use your elbows.
- FIGHT like you never have before. This is the fight of YOUR life.

- We like to believe we can handle ourselves when faced with an attacker. It's not a situation anyone wants to think about, but we like to think we could protect ourselves when a thug thrusts a knife in your face or pushes a gun into your chest.
- The shocking fact is most people don't. In this highly pressurized situation, most people crumble.
- Because contrary to popular belief, when things go south we don't rise to the challenge. We fall back to our best level of preparation... and for most that means NONE.
- If you want to understand the root of all the problems with violence in this country, don't look at guns. Don't look at knives. It's nothing to do with any weapon.
- Instead, you'll see the problem cowering like a scared little animal behind the sofa.
- We've become a mentally weak society. Modern life no longer requires us to have the mental strength for survival.

55 56

- What's worse than walking around scared of everything around you?
- The false belief that you are completely safe.
- Whatever you do, don't believe the bad guy.
- "Do what I say and you won't get hurt..."
- Don't believe a word coming out of a bad guy's mouth.
- No one is smoother than a career criminal. He knows how to manipulate you. He does it without thinking. He practices all the time.
- You can't take his words at face value. You need to take action.

 If you want to learn about self defense or take classes, you should. Do your research. The number one thing used in self defense is the thing between your ears.
 Always be aware of your surroundings.

"There's only one basic principle of self-defense: you must apply the most effective weapon, as soon as possible, to the most vulnerable target." Bruce Lee

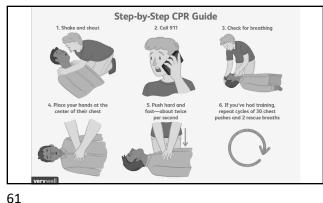
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#### **CPR**

- The objective of CPR is to provide oxygen rich blood to the <u>brain</u> and <u>lungs</u> until normal heart and breathing action can be restored,
- Ventricular Fibrillation is the main cause of adult cardiac arrest.
- The majority of cardiac arrests in children are caused by shock and breathing problems.
- Brain damage will begin in 4 to 6 minutes if a person's heart is not beating.

#### CPR

- Agonal Respirations are the brains last ditch attempt to force the body to breathe and should not be considered breathing.
- CPR can be withheld when the following conditions exist: Unsafe scene, Rigor Mortis, Lividity, Decomposition, Hospice, Obvious fatal trauma
- You should always check for <u>unresponsiveness and shake and shout</u> before calling EMS



Determine if the patient needs CPR before you start it. Follow these steps:

- Shake and shout. Grasp the patient by the shoulders and shake briskly. Shout "Wake up!" and the patient's name if you know it. Shake and shout for a few seconds, but don't spend too much time. Move on to the next steps after five seconds of trying to wake the
- Call 911. Anytime a patient won't wake up, call 911 immediately. Get help on the way as fast as you can.
- Check for breathing. Tilt the patient's head back and look for breathing. If the patient doesn't take a breath in less than 10 seconds, start CPR.

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#### Start CPR

- The likelihood of seriously injuring a patient by giving unneeded CPR is slim, but if the patient needs CPR and you don't do it, the patient
- Push on the chest. Imagine a line between the nipples and put your hands on the center of the chest right below that line. Push hard and fast-about twice per second.
- Rescue breaths. If you have had CPR training and feel comfortable performing the steps, push on the chest 30 times then give 2 rescue breaths. Repeat cycles of 30 chest compressions and 2 breaths until help arrives or the patient wakes up.

#### CPR

- If you have not had CPR training or don't feel comfortable giving rescue breaths, just keep pushing on the chest until help arrives.
- · When finding a person who is unresponsive, if possible, you should move them to a **HARD SURFACE** before attempting CPR
- The method by which an airway should be opened is known as the HEAD TILT CHIN LIFT method.
- For the sake of CPR training, people are divided into three categories based on age. Adults-over 8 years, Child 1-8 years, and Infant-under 1
- With adult CPR, you should expose the chest and begin COMPRESSIONS at a rate of 100-120 BPM, pressing down 2 ½ inches

64 63

#### **CPR**

- the major difference in Adult and Child CPR is the compression depth and the consideration of using only one hand. What is the compression depth for a child? 1 1/2 inches.
- Infant compressions should be delivered using your FINGERS vs your
- Always remember to push HARD and FAST.
- The correct sequence for CPR is to deliver 30 compressions followed by 2 breaths for 5 cycles.

## Choking

- Choking happens when something—food or another item—is caught in the back of the throat. If the object (or food) blocks the top of the trachea a person may be unable to breathe. This is an emergency. It is also possible that food or other things can get stuck in the esophagus; while painful, this does not cause a person to stop breathing.
- An indication that a person is not breathing is an emergency. You should start abdominal thrusts, also known as the Heimlich maneuver. If the person at any point becomes unresponsive (unconscious), you should begin CPR.
- When delivering abdominal thrusts to a choking victim, you should give them with enough force to <u>LIFT</u> their feet off the ground.

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## **Choking Infant**

- Give 5 Blows to the BackLay the baby face-down on your arm. Hold the baby's head with your hand to keep his or her neck straight. The baby's legs should be straddling your arm near the elbow. Lean the baby down at an angle. The infant's head should be lower than his or her waist.
- With the heel of your other hand, strike the baby between the shoulder blades 5 times.

## **Choking Infant**

- Give 5 Chest Thrusts Roll the baby from one arm to the other so that he or she is now laying face up. Keep the head cradled in your hand and the legs straddling your arm. Hold the baby at an angle with his or her head low and give 5 chest thrusts. Use two fingers on the breastbone right between the nipples. Push down about an inch 5 times.
- Look in the Baby's MouthIf you see something in the baby's mouth, pull it out. Otherwise, keep your fingers out of the baby's mouth and repeat back blows and chest thrusts. Keep doing it until the baby coughs up the object. If the baby becomes unconscious, begin infant CPR.

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#### **AED**

- AED stands for AUTOMATED EXTERNAL DEFIBRILLATOR.
- AED's work by delivering a <u>SHOCK</u> and interrupting electrical confusion in the heart.
- Anyone under the age of 1 should NOT have an AED used on them.
- Always perform CPR for at least 2 minutes before using the AED.
- There are 2 AED pads. one should be attached to the <u>UPPER RIGHT</u> <u>CHEST</u> and the other on the <u>LEFT LOWER CHEST</u>
- If a shock is advised, you should double check and verbalize the word,
   CLEAR making sure no one is touching the victim

## **Bleeding Control**

- Ensure your own safety The ABCs of Bleeding
- A Alert call 9-1-1
- B Bleeding find the bleeding injury
- C Compress apply pressure to stop the bleeding by:
- Covering the wound with a clean cloth and applying pressure by
- pushing directly on it with both hands, OR
- Using a tourniquet, OR
- Packing (filling) the wound with gauze or a clean cloth and then applying pressure with both hands

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## **Bleeding Control**

- Before you offer any help, you must remain safe
- If you become injured, you will not be able to help the victim
- Initiate care if the scene is safe for you to do so
- If, at any time, your safety is threatened, attempt to remove
- yourself from danger and find a safe location
- Protect yourself from blood-borne infections by wearing gloves, if available

## **Bleeding Control**

- Find where the victim is bleeding from
- Open or remove the clothing so you can see the wound
- Look for and identify "life-threatening" bleeding
- Blood that is spurting out of the wound
- Blood that won't stop coming out of the wound
- Blood that is pooling on the ground
- Clothing that is soaked with blood
- Bandages that are soaked with blood
- Loss of all or part of an arm or leg
- Bleeding in a victim who is now confused or unconscious

#### PATIENT ASSESSMENT

- 1. Scene safety
- 2. Glove up
- 3. Check for response (verbal or hands on)
- 4. If conscious, ask victim and treat accordingly
- 5. If unconscious: TOP TO BOTTOM, sweep for blood
  - a) Head
  - b) Neck
  - c) Shoulders
  - d) Chest and abdomen in 4 quadrants (upper right/left...lower right/left)
  - e) Groin
  - f) Legs to feet
  - g) Back and buttocks

- Most frequent cause of preventable death from injury
- Bleeding from these wound scan be controlled by direct pressure or a tourniquet

Arm and Leg Wounds



73 74

#### Wounds

Neck, shoulder, and groin

 Bleeding can be controlled by direct pressure and wound packing Chest and Abdominal Injuries - Front, back, or side Usually cause internal bleeding

- This bleeding CANNOT be stopped outside the hospital
- These victims need rapid transport to a trauma center
- Identify these patients to EMS providers when they arrive

#### Wounds

 Chest wounds can puncture the lung/heart, and cause air, blood or both to fill the chest cavity and create pressure on the heart and lungs, eventually preventing them from functioning. At a police officers level of care, rescuers should find and seal all wounds to the chest and abdomen with an occlusive dressing (airtight), and make sure you look for and seal exit wounds.

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#### Wounds

 Wounds to the abdomen may cause intestines or other organs to protrude from the body. While these wounds may look bad, your primary concern is bleeding and treating for shock. In a tactical environment, you will not have the proper dressing to deal with a wound like this. Isolate the area, conduct BBS, do not attempt to replace the organs, and prepare for transport.

## **Direct Pressure**

- Use your hand or fingers
- - Use two hands, if at all possible
- Effective most of the time for external bleeding
- - Direct pressure can stop even major arterial bleeding
- Bleeding control requires very firm, continuous pressure until relieved
- by medical responders
- To be effective, apply pressure with the victim on a firm surface to provide support
- Don't release pressure to check the wound

#### **Direct Pressure**

- Use any clean cloth (for example, a shirt) to cover the wound
- If the wound is large and deep, try to "stuff" the cloth down into the
- Apply continuous pressure with both hands directly on top of the bleeding wound
- Push down as hard as you can
- Hold pressure until relieved
- by medical responders

#### The Tourniquet

- A tourniquet is a device that stops the flow of blood
- If applied correctly, the tourniquet will stop blood flow into the extremity and out of the
- · Limiting blood loss may prevent the patient from going into shock or dying



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#### The Tourniquet

- Apply immediately if life-threatening bleeding is seen from an arm or a leg •
- The tourniquet can be placed right on top of clothing, if necessary
- Place high and tight above the bleeding wound (higher on the arm or leg)
- BUT...
   DO NOT apply directly over the knee or elbow joints - The bones of the joint will prevent the tourniquet from compressing the artery, so you won't stop the bleeding
- DO NOT apply directly over a pocket that contains bulky items Anything in a pocket that is underneath a tourniquet will
- interfere with the function of the tourniquet •
- Tighten the tourniquet until bleeding stops
- DO NOT take the tourniquet off EVER

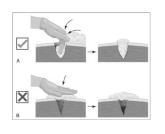
#### **Wound Packing**

- Pack the wound
- - Hemostatic dressing, OR Gauze roll, OR - Clean cloth
- Stuff right into the wound and directly onto the bleeding site
- Quickly apply and hold pressure directly on the packed wound until relieved by medical responders
- If initial packing and direct pressure fail to stop the bleeding, pack a
- gauze on top of the first and reapply pressure using increased force
- DO NOT PACK WOUNDS TO THE CHEST OR HEAD

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## Bleeding control in children

- In all but the extremely young child, the same tourniquet used for adults can be used in children.
- For the infant or very small child (tourniquet too big), direct pressure on the wound as described previously will work in virtually all cases.
- For large, deep wounds, wound packing can be performed in children just as in adults using the same technique as described previously.

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#### **BREATHING**

- After addressing bleeding, open airway using jaw thrust or head-tilt chin lift
- If not breathing, consider CPR
- If breathing and unconscious, maintain open airway, treat for shock, and focus on evacuation by EMS
- $\bullet$  The airway must be maintained and capable of receiving and removing air. Unconscious victims who are breathing should have their airways maintained open by a rescuer. Consider the recovery position (LEFT SIDE unless injury prevents it).

#### **SHOCK**

After any traumatic injury always treat the victim for shock when possible

- Stop bleeding Ensure breathing
- · Raise the feet
- Warm
- · Reassure and keep yourself and the victim calm



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#### **SHOCK**

- Compensated= Good: the body is experiencing a state of low blood volume but is still able to maintain blood pressure and organ perfusion by increasing the heart rate and constricting the blood vessels
- Decompensated= Bad: the body is no longer able to maintain a high enough blood pressure for the body to function correctly
- Shock kills. Remember that anyone who has been injured can go into shock. All you want to do is try to keep them in compensated shock, and at our skill level, you should:
- Ensure bleeding is controlled
- · Maintain body heat
- Reassure and encourage a survival mindset

#### MEDICAL RELATED ISSUES

- Cardiac Arrest
  - EMS
  - Follow CPR protocol/ AED
- Stroke
  - EMS
  - Maintain airway
     Elevate the head slightly
- Diabetic Emergency
  - EMS
  - · May resemble intoxication
- Give sugar IF they are conscious and capable of swallowing (fruit juice, candy) bar, etc.)
- If unconscious, maintain airway and await EMS

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## MEDICAL RELATED ISSUES

- Seizure
  - EMS
  - · Protect head-maintain airway
  - · DO NOT restrict their movement
  - DO NOT place anything in mouth
  - · Expect incontinence
  - Speak in a calm, slow voice to anyone coming out of a seizure
- Overdose

  - · Airway management
  - · CPR if not breathing

## MEDICAL RELATED ISSUES

- Allergic Shock
  - EMS
  - Airway
  - Epi-pen if available
- Childhirth
  - EMS
  - GLOVE UP
  - Maintain professionalism • Support head if it is emerging from birth canal
  - Once delivered, place child on mothers' chest for warmth and
  - stimulate back to ensure breathing (crying is good indicator)

• If not breathing after one minute, begin infant CPR

#### PRINCIPLES OF ROOM CLEARING

- Anything involving a close quarter conflict must be done with
  efficiency and attention to detail. The swiftness, smoothness, and
  communication of the emergency response team must be a top
  priority. There are three principles involved:
- 1. Surprise 2. Speed 3. Control Tactics (Use of force model)

# BASIC FUNDAMENTALS OF ROOM ENTRY AND CLEARING

- Move efficiently and silently through hallways and rooms. (Eliminate excess equipment)
- Be in accurate team position and listen to all commands by team
  leader.
- Move quickly and gain control of the room. Continue scanning your control area.
- Account for all personnel in the room (Friend and/or foe)
- Confirm, disarm, secure and search.

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#### FUNDAMENTALS CONT.

- Any wounded or non-combatants must be evacuated.
- Maintain high observation and once room is cleared, mark as clear and maintain situational awareness.
- When dealing with confined areas, a standard four man team is recommended. It is not recommended to do less than four because of the breach risk. Some rooms may only require one or two. (i.e. restrooms, closets)
- Team members must move to designated areas in the room while scanning or engaging targets not the other way around

#### **RULES TO LIVE BY**

- Never hug the wall. Always maintain at least ten to twelve inches gap between you and the wall. This will eliminate any chance of getting struck by a bullet following the path of the wall.
- Never stop in the "fatal funnel".
- Smooth is fast, fast is smooth.
- If the person in front of you goes the wrong way, DON'T PANIC. Just go the opposite way.
- If you fall, stay down. By getting back up you will create an obstacle. Wait until your team member taps you or calls "all clear"

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#### **Rules Continued**

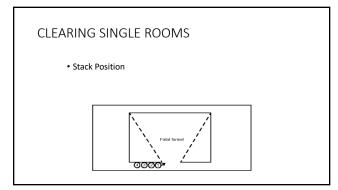
- Never sweep the muzzle of your weapon across the partners head or body.
- Identify threats
- Each member MUST know their role.
- Communicate, communicate, communicate

#### Standard Stack Position

- Officer 1- provides security at point of entry.
- Officer 2- secures front of the team.
- Officer 3- maintains a high-ready position. (Typically the team leader)
- Officer 4- maintains a low-ready position.
  - \*\*\*\*Must have 360 degree coverage

#### PRIOR TO ENTRY

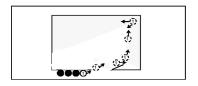
 Officer 4- When officer 4 is ready he/she will tap officer 3 and this sequence will continue up the line. Once officer one is reached, he/she will give a nod and a silent count.



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## SINGLE ROOMS/MIDDLE DOOR CONTINUED

• Middle door entrance: Officer 1 goes right and to the corner. Scan and engage if necessary while moving towards corner.

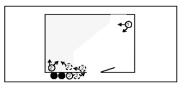


#### SINGLE ROOMS/MIDDLE DOOR CONTINUED

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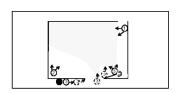
 Officer 2 goes left and to the corner. Officer moves, scans and engages (if necessary)



## SINGLE ROOM/MIDDLE DOOR CONTINUED

99

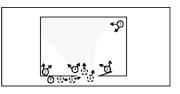
• Officer 3 breaks right and points weapon toward 11 o'clock position

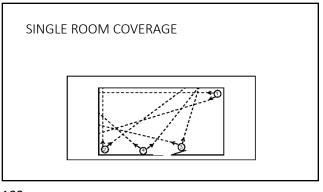


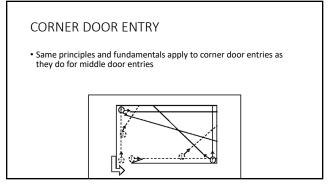
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## MIDDLE DOOR CONT.

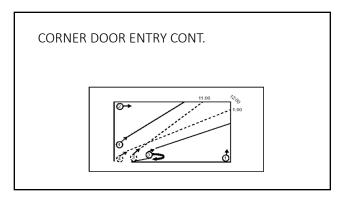
• Officer 4 breaks left and points weapon at 1 o'clock position

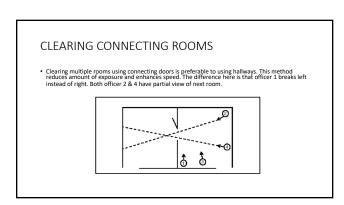




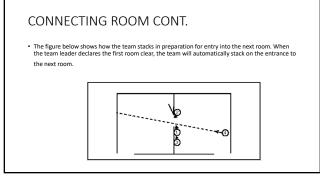


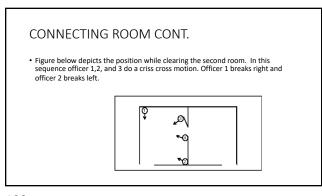
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## CONNECTING ROOM CONT.

This figure shows the team preparing to enter the hallway or next room. Notice officer's 3 position. Before moving he scans prior room one last time then moves in front of 2.

