



SAN JOSE POLICE DEPARTMENT

TRAINING BULLETIN

TO: ALL DEPARTMENT PERSONNEL

FROM: Dave Knopf
Acting Chief of Police

**SUBJECT: REVISED AUTOMATED USE OF
FORCE TEMPLATE**

DATE: December 29, 2020

BULLETIN #2020-023

The automated Use of Force Template has been revised (Attachment) to increase accuracy in tracking incidents involving a use of force resulting in great bodily injury or death. Specifically, sections were added providing better defined options for serious/significant injuries and minor/moderate injuries. These options were added to both the suspect injury and officer injury sections.

Any officer who uses reportable force, or has force used against him/her, shall complete the automated Use of Force Template and answer the questions reflecting any incurred injuries.

The supervisor or command officer assigned to the use of force incident is responsible for ensuring the automated Use of Force Template is completed by each officer who used reportable force or had force used against him/her. The assigned supervisor or command officer shall review the completed automated Use of Force Template and approve it in the MRE approval queue.

Exception: When an Officer-Involved Incident occurs, the investigation shall be conducted consistent with the most recently published Santa Clara County Police Chiefs' Association Officer-Involved Incident Guidelines. The Department member will be interviewed by the Homicide Unit and the supplemental report for the Department member's statement as well as the automated Use of Force Template will be completed by the Homicide Detective who conducted the interview.

Effective immediately, all officers shall use the revised automated Use of Force Template when documenting reportable force, or force used against a Department member. Questions regarding the use of the automated Use of Force Template should be directed to the AFR/RMS Unit.

A handwritten signature in black ink, appearing to be "DK", with a stylized flourish extending from the end.

Dave Knopf
Acting Chief of Police

DK:SD:MB

Attachment: Updated Use of Force Template – Injury Section

Attachment:

Suspect's erratic behavior as you perceived it at the time of the incident
(check all that apply):

- | | |
|---|--|
| ☐ None | ☐ Signs of alcohol impairment |
| ☐ Signs of mental disability | ☐ Signs of drug impairment |
| ☐ Signs of physical disability | ☐ Signs of developmental disability |

Was suspect injured (even if minor)?

YES

If YES, (check all that apply)

Serious/Significant Injuries

- | | |
|---|--|
| ☐ Death | ☐ Unconsciousness |
| ☐ Life Threatening Injury | ☐ Concussion |
| ☐ Gunshot Wound | ☐ Other Brain Injury |
| ☐ Stab Wound | ☐ Profuse Bleeding |
| ☐ Organ Damage | ☐ Abrasions (Severe) |
| ☐ Internal Bleeding | ☐ Lacerations (Severe) |
| ☐ Obvious Disfigurement | ☐ Contusion (Severe) |
| ☐ Loss or Impairment of Body Part | ☐ Swelling (Severe) |
| ☐ Chipped or Loss of Tooth | ☐ Sutures or Staples |
| ☐ Bone Fracture | ☐ Canine bite (Medical Attention) |
| ☐ Other Serious/Significant Injury | |

Minor/Moderate Injuries:

- | | |
|--|---|
| ☐ Abrasions (Minor or Moderate) | ☐ Sprain or Strain |
| ☐ Lacerations (Minor or Moderate) | ☐ Complaint of Pain Only |
| ☐ Contusions (Minor or Moderate) | ☐ Other Minor Injury |
| ☐ Swelling (Minor or Moderate) | |

Medical aid the suspect received - choose highest applicable:

Location(s) on you where suspect(s) used force (check all that apply):

- | | |
|--|---|
| ☐ Not applicable | ☐ Head |
| ☐ Neck/throat | ☐ Front upper torso/chest |
| ☐ Rear upper torso/back | ☐ Front lower torso/abdomen |
| ☐ Rear lower torso/back | ☐ Front below waist/groin area |
| ☐ Rear below waist/buttocks | ☐ Arms/hands |
| ☐ Front legs/feet | ☐ Rear legs |

Were you injured (even if minor)? YES v

If YES, (check all that apply)

Serious/Significant Injuries

- | | |
|---|--|
| ☐ Death | ☐ Unconsciousness |
| ☐ Life Threatening Injury | ☐ Concussion |
| ☐ Gunshot Wound | ☐ Other Brain Injury |
| ☐ Stab Wound | ☐ Profuse Bleeding |
| ☐ Organ Damage | ☐ Abrasions (Severe) |
| ☐ Internal Bleeding | ☐ Lacerations (Severe) |
| ☐ Obvious Disfigurement | ☐ Contusion (Severe) |
| ☐ Loss of Impairment of Body Part | ☐ Swelling (Severe) |
| ☐ Chipped or Loss of Tooth | ☐ Sutures or Staples |
| ☐ Bone Fracture | ☐ Canine Bite (Medical Attention) |
| ☐ Other Serious/Significant Injury | |

Minor/Moderate Injuries:

- | | |
|--|---|
| ☐ Abrasions (Minor or Moderate) | ☐ Sprain or Strain |
| ☐ Lacerations (Minor or Moderate) | ☐ Complaint of Pain Only |
| ☐ Contusions (Minor or Moderate) | ☐ Other Minor Injury |
| ☐ Swelling (Minor or Moderate) | |

Medical aid you received - choose highest applicable:

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