ADMINISTRATIVE DIRECTIVE - 112.039 SUDDEN CUSTODY DEATH SYNDROME

EFFECTIVE DATE: March 28, 2007 REVISION DATE:

REVIEW DATE:

AFFECTS: All Personnel

I. PURPOSE

The objective of this directive is that officers be able to recognize individuals exhibiting preliminary signs of Sudden Custody Death Syndrome, and when confronted by such individuals, bring them under control in a manner that does not unnecessarily aggravate their condition and to obtain immediate medical care for them.

II. POLICY

As part of Use of Force considerations it is imperative that officers of this Department be aware of the factors that most often contribute to the Sudden Custody Death Syndrome. There is a need for officers to attempt to distinguish between a subject who is choosing to act in a violent criminal manner and one who is doing so because of an underlying condition that is affecting him/her mentally and physically. Suspects in custody may be at a higher risk of death when kept in a prone position; therefore, it is the policy of the Plano Police Department to avoid keeping suspects in a prone position.

III. DEFINITIONS

- A. <u>Sudden Custody Death Syndrome</u> The unexpected and often sudden death of a prisoner resulting from positional asphyxiation, or excited delirium.
 - Positional Asphyxiation The death of a prisoner as a result of interference with his/her ability
 to breathe. Most generally, this type death occurs when the subject is placed in a prone position
 thus restricting their breathing and confining their ability to move. In Positional Asphyxia
 incidents, there are one or more contributing factors that cause the respiratory asphyxiation,
 including intoxication from drugs or alcohol, physical restraint in a prone position or confined
 space, physical disability, obesity, and a high expenditure of violent energy.
 - 2. <u>Excited Delirium</u> A state of extreme mental and physiological excitement characterized by exceptional agitation and hyperactivity, overheating, hostility, strength and aggression. This state of excitement is generally accompanied by some type of illegal substance abuse (cocaine being the most common), alcohol usage, or some form of mental illness.

IV. PROCEDURES

The two leading causes of Sudden Custody Death Syndrome are Positional Asphyxiation, and Excited Delirium (which includes Cocaine Psychosis). Subjects susceptible to either Positional Asphyxiation or Excited Delirium are typically encountered under very consistent circumstances. These subjects are generally experiencing a cluster of life-threatening physiological stresses, all of which put them at significant risk of death. The circumstances under which these subjects are most often encountered may include bizarre and aggressive behavior, hyperactivity, making irrational statements, shouting, unresponsive to verbal direction, copious sweating, high body temperature and disrobing, unexpected strength often not impaired by pain including pepper spray and impact techniques, violence towards others, violence towards objects, heavy breathing, paranoia, and foaming at the mouth.

- A. When dealing with an individual exhibiting any of the signs and symptoms that are common to the Sudden Custody Death Syndrome, the following procedures should be followed:
 - 1. Whenever possible, develop a coordinated approach with assisting officers and stand-by emergency medical personnel.
 - 2. If open-handed force is necessary, utilize a multiple officer takedown (such as the 4-officer swarm tactic).
 - 3. As soon as the subject is handcuffed, and it is safe to do so based on the totality of the circumstances, get him/her off their stomach and into a seated or standing position. If necessary

ADMINISTRATIVE DIRECTIVE - 112.039 SUDDEN CUSTODY DEATH SYNDROME

EFFECTIVE DATE: March 28, 2007 REVISION DATE:

REVIEW DATE:

AFFECTS: All Personnel

to leave him/her in a prone position, position him/her on their left side.

- 4. Avoid extreme prone restraint techniques; never tie the handcuffs to a leg or ankle restraint.
- 5. If arrestee continues to struggle, do not sit on his/her back or neck.
- 6. Do not place the arrestee on his/her stomach during transport to jail or hospital (if necessary, a second officer should sit in the rear seat beside the arrestee for observation and control.)
- 7. Monitor the subject carefully.
- 8. Notify jail personnel of any observable symptom of the Sudden Custody Death Syndrome. Recommend that jail personnel place the subject into an observation area for close monitoring.
- 9. If necessary, immediately seek medical attention and immediately provide lifesaving measures.