Evaluating Taser reforms

A review of Queensland Police Service policy and practice

April 2011

CRIME AND MISCONDUCT COMMISSION
QUEENSLAND

CMC vision:

That the CMC make a unique contribution to protecting Queenslanders from major crime, and promote a trustworthy public sector.

CMC mission:

To combat crime and improve public sector integrity.

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Dear Sirs

In accordance with section 69 of the *Crime and Misconduct Act 2001*, the Crime and Misconduct Commission hereby furnishes to each of you its report *Evaluating Taser reforms: a review of Queensland Police Service policy and practice*.

The Commission has adopted the report.

Yours faithfully

Martin Moynihan AO QC
Chairperson

FOREWORD

In mid 2009, the death of a man following a Taser deployment in the small town of Brandon, near Townsville, prompted a comprehensive review of Taser policy, training, and monitoring and review practices by the Queensland Police Service (QPS) and the Crime and Misconduct Commission (CMC).

This report by the CMC assesses the implementation and effects of the recommendations that arose out of that joint QPS–CMC review. The report also examines how Tasers are now being used by QPS officers, and considers the appropriateness of the policy, training and monitoring frameworks that currently support this.

The QPS is to be commended for its commitment to the implementation of the 2009 review recommendations. To date, 24 recommendations have been fully implemented, while progress continues on the others. This is a significant accomplishment that has required a considerable investment of time and resources by the QPS. Our evaluation also suggests that the introduction of the revised policy has had some positive effect on how Tasers are used in the QPS.

Nevertheless, there are some areas of ongoing concern, including the use of Tasers against people from medically vulnerable groups, and the application of multiple and prolonged Taser discharges. Our recommendations seek to further refine QPS Taser policy, training, and monitoring processes in light of our findings and recent developments in international best practice.

This report affirms our view that Tasers are a useful tool for police. Indeed, there are circumstances where the use of a Taser is the most appropriate use of force option. However, in taking this position, we are also of the view that less serious use of force approaches should always be the preferred policing response. In our recent reports in a variety of policing contexts, we have challenged the QPS to continue to highlight the importance of skills in conflict resolution, negotiation and de-escalation. Placing renewed emphasis on these skills is an important goal for the QPS to work towards. With it, the use of force — and Tasers — may often be avoided.

Our interest in the use of Tasers by the QPS does not end with the tabling of this report. The baseline data contained in this report serve to focus our future research around key issues, including Taser use against people from vulnerable groups, and multiple and prolonged Taser discharges. We commit to examining these issues more closely in the near future. In addition to this work, the CMC's ongoing monitoring, complaints and investigations functions will ensure that we continue to scrutinise Taser use in the QPS.

Martin Moynihan AO QC
Chairperson

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ACKNOWLEDGMENTS

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Lauren Hancock was the project manager for the evaluation and the primary author of this report, and was supported by Dennis Budz, Kelly Ede and Melissa Johns.

The report was prepared for publication by the CMC's Communications Unit.

LIST OF ACRONYMS AND ABBREVIATIONS

A/C	Assistant Commissioner
ACPO	Association of Chief Police Officers
ANZPAA	Australia New Zealand Policing Advisory Agency
ATOC	Assistant to the Operations Coordinator (in the Queensland Police Service)
BMI	body mass index
BWV	body worn video
CCC	Corruption and Crime Commission (Western Australia)
CCTV	closed-circuit television
CED	conducted energy/electrical device
CEW	conducted energy/electrical weapon
CMC	Crime and Misconduct Commission
COPS	Consider all Options and Practise Safety
CPC–RCMP	Commission for Public Complaints Against the Royal Canadian Mounted Police
CSS	Client Service System
DDO	District Duty Officer (in the Queensland Police Service)
DETO	District Education and Training Officer (in the Queensland Police Service)
DO	District Officer (in the Queensland Police Service)
DIST	Dynamic Interactive Scenario Training
ECD	electronic control device
EEO	Emergency Examination Order
EMD	electro-muscular disruption
ESC	Ethical Standards Command (of the Queensland Police Service)
IEB	Inspectorate and Evaluation Branch (of the Queensland Police Service)
IIB	Internal Investigations Branch (of the Queensland Police Service)
NMI	neuro-muscular incapacitation
NZ	New Zealand
OC	oleoresin capsicum (spray)
OIC	Officer in Charge
OPM	Operational Procedures Manual (of the Queensland Police Service)
ORAU	Operational Research and Advisory Unit (of the Queensland Police Service)
OST	Operational Skills and Tactics
PARA	Post Arrest Risk Assessment (Scale)
PERF	Police Executive Research Forum
POST	Police Operational Skills and Tactics
PPM	Professional Practice Manager (in the Queensland Police Service)
PTSD	post-traumatic stress disorder
QAS	Queensland Ambulance Service
QPRIME	Queensland Police Records and Information Management Exchange
QPS	Queensland Police Service
RCMP	Royal Canadian Mounted Police

RDO	Regional Duty Officer (in the Queensland Police Service)
RETC	Regional Education and Training Coordinator (in the Queensland Police Service)
SERP	Significant Event Review Panel (in the Queensland Police Service)
TRIG	Taser Review Implementation Group (of the Queensland Police Service)
TUR	Taser Usage Report
VF	ventricular fibrillation
WAPOL	Western Australia Police

GLOSSARY

Accidental deployment	Where the Taser is unintentionally deployed in probe mode or drive stun mode
Assistant to the Operations Coordinator (ATOC)	A police officer, usually at the rank of Senior Sergeant, who provides administrative assistance, advice and research assistance to the Operations Coordinator (Chief Superintendent)
Commissioned Officer	An officer at the rank of Inspector or above
Deployment	Any instance where the Taser is activated in probe mode and/or drive stun mode; a deployment may involve a single Taser discharge or multiple discharges
District Duty Officer (DDO)	An officer, who may or may not be a Commissioned Officer, who is rostered or available on call at all times to provide operational supervision and guidance to members in the district
District Education and Training Officer (DETO)	An officer who is responsible for assisting with the coordination and facilitation of education, training and professional development programs for members within the district; they also provide assistance in career planning activities
District Officer (DO)	An Inspector or Superintendent who is responsible for the effective and efficient management of all district resources to ensure that QPS goals are achieved
Drive stun mode	Where the Taser is applied or pushed directly onto a person's skin or clothing; Taser deployments in drive stun mode do not immobilise the person, but inflict acute pain in the area where the Taser is applied
Ethical Standards Command (ESC)	Is responsible for managing the QPS's internal discipline process and promoting ethical behaviour and professional practice by members
Multiple discharges	Where more than one Taser cycle is targeted at a person during an incident, either by the same officer or by different officers; the cycles may or may not actually affect the target of the discharges
Officer in Charge (OIC)	The officer responsible for the day-to-day operations of a police station or division
Operational Skills and Tactics (OST) Program	Is responsible for providing the QPS's training programs in police operational skills and tactics
Presentation	Pointing the Taser in the direction of a person without deploying it in probe mode or drive stun mode

Probe mode	Where two probes connected to the Taser by insulated wires are fired at a person; a successful probe mode deployment causes the subject to experience uncontrollable muscle contractions, immobilising them for as long as the weapon is activated
Professional Practice Manager (PPM)	An officer, usually at the rank of Inspector, who is responsible for coordinating and managing the complaints and discipline process within their region or command and promoting professional practice by members
Prolonged discharge	Where the Taser cycle is applied for longer than five continuous seconds
Regional Duty Officer (RDO)	A Commissioned Officer rostered or available on call at all times to provide advice, direction and leadership to members in the region
Regional Education and Training Coordinator (RETC)	An Inspector who is responsible for coordinating and managing the provision of education, training and professional development to members within the region, and for identifying regional training needs
Significant event message	A standardised report used to provide concise and timely information about significant events (including all Taser uses) soon after they occur; messages are forwarded to the Commissioner of Police and other members of the QPS's Senior Executive
Taser Review Implementation Group (TRIG)	A temporary work group established within the QPS's Operations Support Command to progress the implementation of recommendations from the QPS–CMC review
Taser Review Steering Committee	The steering committee responsible for overseeing the implementation of recommendations from the QPS–CMC review; is chaired by the Deputy Commissioner (Specialist Operations) and includes representatives from the QPS, the Queensland Police Union of Employees and the CMC
Taser Usage Report (TUR)	A standardised report that officers are required to submit after any Taser use
Use	Any instance where the Taser is presented or deployed (including accidental deployments)
Ventricular fibrillation (VF)	A kind of severely abnormal heart rhythm that may be fatal
Vulnerable groups	Groups of people who are thought to possibly have a greater risk of experiencing adverse health effects following a Taser deployment; include people with underlying physical or mental health conditions and people under the influence of alcohol or drugs; also referred to as 'medically vulnerable' groups, 'physically vulnerable' groups or 'at-risk' groups

OVERVIEW OF THE REPORT

The Crime and Misconduct Commission was requested by the Queensland Attorney-General to conduct an independent evaluation of the implementation and effects of the Queensland Police Service's revised Taser policy, training and monitoring processes arising from a 2009 QPS–CMC review.

Chapter 1 of this report provides a background to our evaluation and describes how we conducted it.

The subsequent chapters report the findings. Chapter 2 examines the implementation of policy and training recommendations from the QPS–CMC review and describes how Taser policy and training have changed as a result.

We then look at the actual use of Tasers by QPS officers. Chapter 3 examines the effects of the revised policy and training on officers' operational use. Chapter 4 examines the nature of Taser use in the 10 months after the revised policy was introduced, as well as emerging trends.

In Chapter 5 we consider the monitoring and review processes that occur after any use of a Taser, as well as other continuous improvement activities undertaken in the QPS to ensure appropriate use. The implementation of relevant recommendations from the QPS–CMC review is also reviewed here.

We have integrated discussion about our findings, our suggestions for improvement and our recommendations where relevant throughout Chapters 2 to 5.

For the convenience of readers, key findings are outlined at the beginning of each chapter. The detailed data chapters also include key findings at the end of each section, and summaries of discussion for each issue examined.

SUMMARY AND RECOMMENDATIONS

Background to the evaluation

Tasers were first introduced by the Queensland Police Service (QPS) in 2002, when they were allocated to the service's Special Emergency Response Team. Following a trial in 2007–08, the QPS expanded their use into the general policing environment.

In June 2009, a 39-year-old man in Brandon, north Queensland, died after being tasered by police. In response, the Minister for Police, Corrective Services and Emergency Services, the Hon. Neil Roberts MP, initiated a joint QPS–Crime and Misconduct Commission (CMC) review to ensure that QPS policy, procedures, training and monitoring processes reflected best practice. The review made 27 recommendations intended to improve policy, training and monitoring practices. It was agreed that the recommendations would be treated as interim recommendations for 12 months, subject to continuous monitoring by the QPS and the CMC.

Significant policy changes represented in these recommendations included:

- restricting the use of Tasers to situations where there is a risk of serious injury to a person
- prohibiting officers, unless in exceptional circumstances, from deploying Tasers for multiple or prolonged cycles, and against people who are handcuffed or are of particularly small body mass
- emphasising the possible link identified in the literature between Taser deployments and death, particularly where multiple and/or prolonged discharges are involved or where the person has underlying health problems, is under the influence of alcohol or drugs, or has already been exposed to oleoresin capsicum (OC) spray.

These policy changes were also reflected in new training initiatives.

In April 2010, the then Queensland Attorney-General and Minister for Industrial Relations, the Hon. Cameron Dick MP, asked the CMC to undertake this independent evaluation. To address our terms of reference, we sought to determine:

- whether each of the 27 recommendations from the QPS–CMC review has been implemented
- what effects the revised policy and training have had on Taser use
- how QPS officers used Tasers in the 10 months after the introduction of the revised policy, particularly in relation to risk factors identified in the literature
- whether there are any emerging trends in use, including 'mission creep' (the tendency for police to, over time, use Tasers in situations for which they were not intended)
- what monitoring and continuous improvement processes are in place in the QPS with respect to Tasers
- what recent advances have been made in international best practice, and whether there are any gaps in QPS policy and practices.

As the first formal review of QPS Taser use since the introduction of the revised policy and training, the CMC regarded this evaluation as a starting point that would provide baseline data for further monitoring and review.

Since the QPS would necessarily be the primary source of data in the first instance, we relied mostly on information from a range of QPS sources, including a formal submission, policies, procedures and training materials, consultations with officers, and QPS Taser usage data. We will consult more widely in future reviews of Taser use in the QPS.

Possible limitations of the data used in this evaluation include the potential for inaccuracies and incompleteness in the Taser usage data.

Key findings

We found that the QPS has demonstrated a firm commitment to implementing the 27 recommendations from the 2009 QPS–CMC review, investing considerable time and resources to do so. To date, 24 recommendations have been implemented, including all recommendations related to Taser policy and training. Progress continues on the three recommendations related to Taser monitoring and continuous improvement processes that are outstanding.

The introduction of the revised policy seems to have had some positive effect on how QPS officers are using Tasers. This is encouraging since even modest improvements, if sustained, can lead to substantial change over the longer term. For example:

- The frequency of Taser uses — particularly presentations and probe deployments — decreased considerably, and drive stuns now represent only a very small proportion of Taser uses.
- Most uses appeared appropriate in the circumstances, with no evidence of widespread misuse.
- There was some reduction in the proportion of people who were the target of multiple or prolonged Taser discharges.
- There was a noticeable decrease in Taser deployments against handcuffed people, with only two such deployments in the 10 post-policy months.
- The Taser usage data we examined provided no indication of mission creep in terms of officers using Tasers in less serious situations.

Nevertheless, some aspects of Taser use in the QPS continue to concern the CMC:

- Despite some improvements in this area since the revised policy was introduced, 40 per cent (28 people) of those who had a Taser deployed at them in the 10 months after the introduction of the revised policy were the targets of multiple and/or prolonged discharges. (Half of such cases involved two discharges.)
- Despite the revised policy highlighting the possible risks of Taser deployments against people in potentially 'vulnerable' or 'at-risk' groups, deployments since its introduction were generally *more* likely to involve a person suspected of having an underlying mental or physical health condition, or believed to be under the influence of alcohol or drugs. These findings are difficult to reconcile with the aim of the revised policy, though they might reflect the higher threshold for use and a possible increase in the seriousness of situations in which Tasers were used.
- Over 20 per cent of Taser uses were targeted at Indigenous people. Not only does this indicate that Indigenous Queenslanders are over-represented as subjects of Taser uses, but it also raises concerns considering Indigenous people are more likely to suffer from illnesses such as heart disease and lung disease that may place them at greater risk of harm following a Taser deployment.
- There are suggestions that some officers may increasingly be using the threat of the Taser to control situations without actually presenting or deploying the weapon (for example, drawing and holding the weapon at their side, or verbally threatening people with a Taser deployment). If these behaviours are indeed occurring, there would be concern about mission creep.
- Despite an initial reduction, the rate of possible Taser-related injuries or medical complications to subjects increased considerably over the 10 months following the introduction of the revised policy. This trend needs to be monitored, although such injuries are still relatively uncommon, affecting 11 per cent of people targeted by a Taser deployment (eight people in total). Half of these people sustained injuries after falling on a hard surface while incapacitated by the Taser.

In our examination of best practice policy, training and monitoring, we found that, in many areas, developments in other Australian and overseas jurisdictions have not advanced beyond existing QPS policy and practices. For example:

- QPS policy is consistent with most other policies in many of the restrictions it places on the use of Tasers, particularly against certain groups of people (for example, juveniles) and in circumstances where there is a risk of secondary injury from Taser-induced falls or where flammable materials are present.
- QPS training is longer and more comprehensive than that in many other jurisdictions, and incorporates scenario-based exercises to improve officers' decision making.
- Consistent with approaches in other jurisdictions, the QPS applies several layers of scrutiny to all Taser uses and has examined various other avenues to facilitate monitoring and continuous improvement.

However, in other areas, existing QPS policy, training and monitoring processes do not reflect suggested best practice in other jurisdictions. In particular:

- In comparison to other jurisdictions, the QPS policy specifies a medium-level threshold for Taser use, whereas some jurisdictions (for example, the Northern Territory, Victoria and the Royal Canadian Mounted Police) have elevated the threshold to the *imminent* risk of serious injury or harm.
- The QPS policy does not place restrictions on drive stun deployments as many other jurisdictions do.
- Trainee feedback is not sought as part of the evaluation and continued development of the QPS's training courses.
- One of the current training scenarios is rather 'black and white' in that a Taser deployment in the circumstances is clearly prohibited by the QPS policy. This arguably does not provide trainees with the best opportunity to develop their decision-making skills.
- There have been moves in other jurisdictions to ensure that all people who experience a Taser deployment receive a medical assessment from a qualified medical practitioner. No such protocol yet exists in the QPS.
- Monitoring and continuous improvement processes that are widely recommended and adopted in other jurisdictions — including regular audits of Taser download data, electrical output testing and monitoring reports on Taser usage — are not presently undertaken in Queensland.

We also identified some problems with the Significant Event Review Panels (SERPs) that review all Taser uses. These included possible deficiencies in decision-making processes; inconsistency and insufficient detail in reports; and the lack of a mechanism to collate their findings, share learnings throughout the QPS, and effect changes to policy, training and other practices. These problems need to be rectified to ensure that these review panels are able to drive QPS-wide organisational improvement. Some of these problems should be addressed through the QPS's proposed SERP Quality Control Committee, but further improvements are possible.

Our recommendations

Our recommendations are intended to address the areas of concern we have identified and bring the QPS further into line with suggested best practice.

Given our concerns about multiple and prolonged discharges, deployments against people from vulnerable groups and Taser use against Indigenous people, we believe it is particularly important for the QPS to:

- examine the feasibility of seeking mandatory medical assessments whenever a Taser is deployed against a person

- use the Post Arrest Risk Assessment (PARA) Scale as a way of determining whether a subject is at risk of adverse health effects and should be referred for additional medical treatment
- ensure that QPS Taser policy and training emphasise to officers that Indigenous people are more likely to have underlying health conditions that may place them in an 'at-risk' group when it comes to the effects of Taser deployments.

In addition to these efforts, we believe that the QPS should develop a community engagement strategy targeting people who have underlying health conditions that may place them at greater risk of physical harm from a Taser deployment. In doing so, the QPS should collaborate with non-government organisations and advocacy groups representing these people, such as the Queensland Alliance for Mental Health and the Aboriginal and Torres Strait Islander Legal Service (ATSILS). The ultimate aim of the strategy should be to decrease the likelihood that Tasers will be deployed against at-risk people.

We have also made several recommendations aimed at improving the SERPs. In particular, we believe that the quality of their decision making may be improved if:

- all review panels receive input from a person with expertise in police tactics and use of force
- all members are qualified in the use of Tasers
- the review panels consider information from other police at the scene or possible witnesses (in addition to the report from the officer concerned), as well as review any available objective evidence such as CCTV footage.

We believe that the QPS should examine the feasibility of these actions.

Our other recommendations are aimed at ensuring QPS policy and procedures are in line with suggested best practice, and addressing other areas for improvement identified. Recommended improvements include:

- prohibiting the use of drive stun mode unless there are exceptional circumstances
- ensuring that trainee feedback is included as part of a program of ongoing evaluation of Taser training
- incorporating into Taser training more 'grey area' scenarios that will better assist officers to develop their decision-making skills
- placing specific emphasis in training on the risk of fall-related injuries to people standing on hard surfaces when a Taser is deployed against them
- ensuring that all instances where an officer draws their Taser to resolve a situation is subjected to the usual reporting and review processes
- conducting regular audits of Taser download data
- regularly testing the electrical output of Taser weapons
- providing annual monitoring reports on Taser usage to the CMC.

The CMC recognises that implementing some of our recommendations — particularly regular electrical output testing and the compilation of regular monitoring reports — will have resource implications for the QPS. We nevertheless believe that these improvements are important.

The way forward

Overall, the CMC sees some signs of improvement in how QPS officers are using Tasers, and no evidence of widespread misuse. Furthermore, Taser use in the QPS appears to be supported by policy, training and monitoring processes that are largely in line with suggested best practice. The QPS's implementation of the recommendations of the QPS–CMC review and the reviews already undertaken by the QPS and the CMC demonstrate a continuing commitment to ensuring the appropriate use of Tasers.

Nevertheless, our interest in Taser use in the QPS does not end with this review. We have some ongoing concerns, which we will address in a further review to be commenced by the end of 2011. This will examine key concerns identified by this current evaluation, including Taser use against people from vulnerable groups, multiple and prolonged Taser discharges, and Taser monitoring and review processes. It will also consider any relevant issues arising from the coronial inquest into the death at Brandon, due to conclude later in 2011.

Along with the CMC's ongoing complaints and investigations functions, this review will help to ensure that Taser use in the QPS continues to be scrutinised, and that the associated policy, training and accountability frameworks fully reflect best practice.

Recommendations

We have made 21 recommendations based on our findings.

Recommendation 1

See page 13

That:

a. the QPS Taser policy (Section 14.23 of the OPM) be revised to include clear definitions of relevant terms, specifically including 'use', 'deployment' and 'presentation'

b. these terms be used consistently throughout QPS policies, guidelines, training materials and review reports.

Recommendation 2

See page 21

That the QPS consider incorporating scenarios in the revised 2012 Taser training courses that cover more of the 'grey areas' in relation to Taser use — that is, scenarios that challenge officers and help them to further develop their skills in decision making and conducting continual threat assessments.

Recommendation 3

See page 53

That the QPS:

a. develop a short trainee evaluation form that officers can complete at the end of each Taser training course; the form should include enough questions to allow the QPS to assess trainees' views about the appropriateness and effectiveness of Taser training and to identify aspects of the training that might be improved, particularly in light of trainees' operational experiences

b. ensure that trainee feedback is included in part of a program of ongoing evaluation of Taser training designed to ensure that QPS Taser training courses are current, relevant and consistent with best practice.

Recommendation 4

See page 56

That the QPS Taser policy (Section 14.23 of the OPM) be amended to explicitly prohibit the deployment of Tasers in drive stun mode unless exceptional circumstances exist.

Recommendation 5

See page 73

That:

a. the QPS Taser policy (Section 14.23.3 of the OPM, under 'Deployment of a Taser') be amended to include the following statement after '(v) a combination of these factors existed': 'Officers should be aware that Indigenous people are more likely to suffer from underlying health problems such as heart disease, lung disease and other illnesses that may increase their risk of experiencing adverse health effects when a Taser is deployed against them.'

b. the QPS Taser training be amended to address the above policy change.

Recommendation 6

See page 78

That the QPS Taser training specifically highlight for officers the risk of fall-related injuries to subjects who are standing on hard surfaces (such as concrete, gravel, roadways) when a Taser is deployed against them.

Recommendation 7

See page 82

That the QPS amend the Taser policy (Section 14.23 of the OPM) to require officers to report instances where they draw their Taser from the holster in the presence of a person to demonstrate a capacity to deploy the Taser as a use of force option, even if the Taser is not pointed in the direction of a person.

Recommendation 8

See page 83

That the QPS examine the feasibility of seeking a medical assessment by a qualified medical practitioner for any person who has a Taser deployed against them.

Recommendation 9

See page 83

That the QPS amend the OPM to require any person exposed to a Taser deployment to be assessed by an officer according to the Post Arrest Risk Assessment (PARA) Scale immediately after being restrained.

Recommendation 10

See page 84

That the QPS develop an updated community engagement strategy for Tasers in light of the significant changes that have been made to policy, training and monitoring processes since the initial Taser rollout. The strategy should:

- target people who have underlying health conditions that may put them at greater risk of physical harm from a Taser deployment
- be developed in consultation with peak bodies — including non-government organisations and advocacy groups such as the Queensland Alliance for Mental Health and the Aboriginal and Torres Strait Islander Legal Service (ATSILS) — to determine the most appropriate and effective ways of engaging with different parts of the community.

Recommendation 11

See page 91

That Section 14.23.10 of the OPM be modified to allow any appropriate supervisor, preferably a Commissioned Officer, to fulfil the responsibilities currently allocated to OICs only.

Recommendation 12

See page 92

That the QPS Taser policy (Section 14.23.20 of the OPM) be modified to state: 'All incidents involving the use of a Service Taser will be reviewed by the relevant Chief Superintendent, who is to consider any *use* of a Taser within 72 hours of the event.'

Recommendation 13

See page 94

That the QPS examine the feasibility of requiring all SERPs to include a standing representative who is a qualified Operational Skills and Tactics instructor.

Recommendation 14

See page 95

That the QPS examine the feasibility of requiring all SERP members to be operationally trained in the use of Tasers.

Recommendation 15

See page 95

That the QPS examine the feasibility of integrating alternative perspectives into SERP deliberations.

Recommendation 16

See page 96

That the SERP minutes template being developed by the QPS capture sufficient information about SERP processes and deliberations to allow the SERP Quality Control Committee to effectively monitor the SERPs' activities and decisions. At a minimum, the minutes should note for each matter considered by the SERP:

- the specific comments made by the Regional Education and Training Coordinator, Professional Practice Manager and Operational Skills and Tactics instructor (if applicable)
- any other substantive comments from individual panel members noting concerns or good work
- a conclusion and/or recommendation that highlights the substantive issues considered by the SERP and provides a specific assessment of the individual incident.

Recommendation 17

See page 98

That the QPS Taser policy (Section 14.23 of the OPM) be modified to require station OICs to ensure that data are downloaded from all station Tasers and a sample of the data is cross-checked against the Taser register and reported Taser deployments at least every six months, with a view to identifying any unreported deployments.

Recommendation 18

See page 99

That the SERP Quality Control Committee to be established by the QPS disseminate findings and trends from SERPs across the service where relevant so that individual regions and commands are aware of important usage trends, innovations and activities emerging in other areas.

Recommendation 19

See page 101

That, subject to independent testing to ensure the accuracy of the device, the QPS purchase CEW Electrical Testing Units. Once acquired, the QPS should ensure that electrical output testing is conducted:

- on every Taser before it is put into training or operational use
- annually on a sample (at least 10%) of all Tasers in the QPS's inventory (ensuring geographical representation)
- where a person has died or suffered serious injury after being exposed to the effects of a Taser.

The purpose of these tests should be to ensure that the weapons are operating within the technical parameters specified by the manufacturer.

Recommendation 20

See page 102

That the QPS's Operational Research and Advisory Unit be tasked to maintain a watching brief for future developments in CEW technology, with a particular emphasis on ensuring that the QPS uses the most operationally effective, safe and accountable technology. In particular, the QPS should continue to seek a weapon that has the ability to record trigger pulls, limits the length of cycles and restricts the number of times that the weapon can be cycled during an individual incident.

Recommendation 21

See page 104

That the QPS:

a. provide annual monitoring reports on Taser usage by QPS officers to the CMC; the monitoring reports should at least include analysis of:
   - aspects related to mission creep:
     - the number of operational Taser uses, both in total and according to the nature of the use (that is, presentation, probe deployment, drive stun deployment, probe and drive stun deployment)
     - the percentage of Taser uses that involve a subject who reportedly posed a risk of serious injury
     - the kinds of situations and subject behaviours that Tasers are used in response to
     - the percentage of Taser uses that are judged appropriate by the SERP
   - aspects related to the use of Tasers in ways that may increase the risk of subjects experiencing adverse health effects:
     - the percentage of subjects against whom a Taser is deployed who are the target of multiple and/or prolonged discharges
     - the percentage of Taser uses that involve a subject who was previously sprayed with OC spray
     - the percentage of subjects with a suspected underlying mental and/or physical health condition
     - the percentage of subjects suspected to be under the influence of alcohol and/or drugs
     - the percentage of subjects who are Indigenous
   - the percentage of subjects against whom a Taser is deployed who sustain a possible Taser-related injury or complication
   - the number of accidental Taser deployments.

   Each of the above areas should be examined with a view to identifying any trends over time.

b. report the number of Taser uses (in total and according to the nature of the use) each year in the QPS Annual Statistical Review.

1

INTRODUCTION

This chapter provides an overview of the immediate context for this evaluation. In particular, it:

- gives some background to the use of Tasers in the Queensland Police Service (QPS)
- outlines the reasons we conducted this evaluation.

This chapter also:

- sets out the key research questions we attempted to answer in our evaluation
- describes the methods we used to gather information.

Although some information about the mechanics of Taser weapons, their use by police officers and their possible benefits and risks is provided where relevant throughout the report, this evaluation does not cover these matters in detail. Readers who would like further information about these aspects are directed in the first instance to a review of relevant research literature available on the Crime and Misconduct Commission's (CMC) website (CMC 2008a) and an evaluation of the QPS Taser trial published by the QPS (2009a).

What do we mean by a 'Taser'?

Taser is a registered trademark of TASER International (Arizona, USA). The name 'Taser' therefore refers specifically to a particular brand of conducted energy (or electrical) weapons (CEWs), which are handheld weapons capable of immobilising a person. However, the term Taser is also widely used within the community to refer to CEWs in general. CEWs are also known as conducted energy/electrical devices (CEDs), electronic control devices (ECDs), neuro-muscular incapacitation (NMI) devices and electro-muscular disruption (EMD) devices. The CEW currently used by the QPS is the Taser X26.

Background to this evaluation

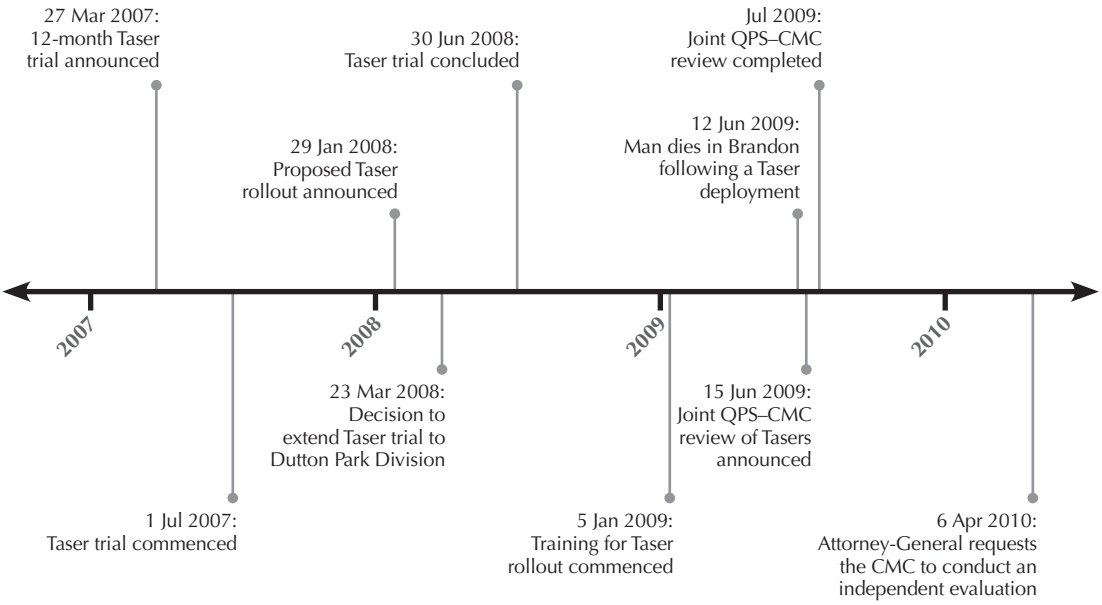
Rollout of Tasers to first response officers in the QPS

Commencing on 1 July 2007, the QPS conducted a 12-month trial of the use of Tasers by first response officers (see Figure 1.1). The introduction of Tasers into a general policing environment was intended to provide another use of force option to officers in dealing with volatile situations.

The 12-month trial initially involved the issue of Tasers to all District Duty Officers (DDOs) and Regional Duty Officers (RDOs) working in the QPS's Metropolitan North, Metropolitan South and South Eastern regions (Spence 2007). In the last three months of the trial, Tasers were also issued to general duties officers in the Dutton Park Division. This was intended to provide additional information about the use of Tasers by frontline officers to assist in developing policy, training and reporting processes for the planned statewide rollout.[1]

1 Further information about the operation and results of the Taser trial can be found in the evaluation report published by the QPS in July 2009 (QPS 2009a).

Figure 1.1: A timeline of key Taser-related events in the QPS



Following the completion of the trial on 30 June 2008, plans were put in place for the rollout of Tasers to all first response officers throughout the state. It was intended that:

- 1240 Tasers would be purchased in the 2008–09 financial year, with a further 450 Tasers to be purchased in the 2009–10 financial year
- 2600 officers would be trained in the use of Tasers by July 2009, and 5800 would be qualified by the end of 2009 (Spence 2008c).

Training for the rollout began on 5 January 2009 and by April 2009, 1900 officers were qualified in the use of Tasers. The rollout continued until June 2009, when a death following a Taser deployment was reported after an incident near Townsville.

The death at Brandon

On 12 June 2009, a 39-year-old man in the north Queensland town of Brandon died after the deployment of a Taser by a police officer who was trying to apprehend him (QPS 2009b). Media reports at the time stated that the man had been admitted to Townsville Hospital for a mental health assessment and, a short time after leaving the hospital, was involved in a 'violent altercation' with police who had attended a private residence after reports of a naked man 'acting aggressively and destroying property' (news.com.au 2009; QPS 2009b). It was later reported that data from the Taser used in the incident showed that the weapon had been discharged 28 times (QPS 2009c).[2, 3] This matter is currently the subject of a coronial inquest expected to be finalised later in 2011.

2 Each Taser has an inbuilt data system that records the time, date and duration of the weapon's last 1500 activations.

3 One full cycle (discharge) of the Taser lasts for five seconds before the weapon automatically deactivates. An officer may apply a shorter cycle by manually deactivating the Taser by putting the safety mechanism on. A cycle may also be lengthened by the officer holding their finger down on the trigger of the Taser.

The 2009 QPS–CMC review of Taser policy, training, and monitoring and review practices

On 15 June 2009, in direct response to the death at Brandon, the Minister for Police, Corrective Services and Emergency Services, the Hon. Neil Roberts MP, announced that the QPS and the CMC would conduct a joint review of Taser policy and training. The rollout of Tasers and the associated training were suspended pending the outcome of the review (Roberts 2009).

The joint QPS–CMC review focused on three areas:

1. The current policy on the operational use of Tasers, particularly in relation to the maximum use of a Taser by police officers
2. Training for Taser users
3. Monitoring and review processes after Taser deployments.

The overall aim of the review was to ensure that QPS policy, procedures, training and monitoring processes reflected best practice (QPS and CMC 2009).

The review found that most of the risks associated with the use of Tasers it identified were dealt with by existing QPS policy and training, but identified a number of additional areas for improvement. In particular, it found that the QPS Taser policy should be amended to:

- prohibit officers from using a Taser unless there is a risk of serious injury to a person
- prevent officers from applying more than one five-second cycle to a person unless exceptional circumstances exist
- highlight the possible link identified in the literature between Taser deployments and some deaths.

The review also recommended making several changes to QPS training to ensure that it aligned with the revised policy. It also proposed increasing the length of the training to two full days and ensuring that it incorporated more practical, scenario-based activities. Various improvements were also recommended for review processes after the deployment of a Taser, as were several avenues for enhanced monitoring and accountability, such as a trial of 'Taser Cams'.

In all, the QPS–CMC review report made 27 recommendations relating to Taser policy (Recommendations 1 to 13 and 27), training (Recommendations 14 to 18), and monitoring and review practices (Recommendations 19 to 26) in the QPS. It was agreed by the Commissioner of Police and the then CMC Chairperson, Robert Needham, that these recommendations would be treated as interim recommendations for a period of 12 months from the release of the report, subject to continuous monitoring by the QPS and the CMC. It is the implementation of these recommendations and their effects that was the focus of this evaluation.

Why we conducted this evaluation

On 6 April 2010, the CMC was asked by the then Queensland Attorney-General and Minister for Industrial Relations, the Hon. Cameron Dick MP, to independently evaluate the implementation and effects of the QPS's revised Taser policy, training and monitoring processes arising from the 2009 QPS–CMC report. The referral asked that, in undertaking the reference, we:

1. Audit and review the implementation of the recommendations of the review report
2. Audit and review the effects of the revised Taser policy
3. Audit and review the effect of the revised Taser training
4. Evaluate incidents since the commencement of the revised Taser policy in which Tasers were involved (presentation and/or deployment), with a particular focus on the risk factors identified in the literature, including multiple Taser deployments and continuous or multiple discharges of a Taser

5. Examine the monitoring and continuous improvement processes implemented regionally and statewide following Taser deployments, and specifically following incidents involving the risk factors identified in the literature, including multiple Taser deployments and continuous or multiple discharges of a Taser
6. Analyse any emerging trends in officer use of Taser devices, including analysis of the concept of 'mission creep' or 'Taser creep'[4]
7. Report on advancements in international best practice concerning policies, procedures, training and monitoring of the use of Conducted Energy Weapons, and the design of Conducted Energy Weapons
8. Consider resource implications with respect to the above. [It should be noted that this refers to the resource implications with respect to any recommendations that may arise out of the current evaluation, not the resource implications with respect to the original recommendations of the QPS–CMC review.]

The Attorney-General requested that we use a representative sample of up to 12 months of data in conducting our evaluation, and make any recommendations we considered necessary.

Key questions considered

Given the terms of reference outlined above, our evaluation did not consider whether the Taser is an effective use of force option for de-escalating violent incidents and managing violent people. Nor was it a cost-benefit analysis or other evaluation of the QPS's Taser rollout.

Instead, we aimed to answer seven key questions in the following areas:

Implementation of recommendations

1. To what extent have each of the 27 recommendations from the QPS–CMC review report been implemented? (Term of Reference 1)

Effects of the policy and training changes on the use of Tasers by QPS officers

2. What effects has the QPS's revised Taser policy had on the use of Tasers by QPS officers? (Term of Reference 2)
3. What effects has the QPS's revised Taser training had on the use of Tasers by QPS officers? (Term of Reference 3)

Taser use by QPS officers since the introduction of the revised policy

4. What has been the nature of Taser use by QPS officers since the introduction of the revised policy? (Term of Reference 4)
5. Is there evidence of 'mission creep' or any other emerging trends in the use of Tasers by QPS officers? (Term of Reference 6)

Monitoring and continuous improvement processes

6. What monitoring and continuous improvement processes are in place to examine the use of Tasers by QPS officers? (Term of Reference 5)

Developments in best practice and gaps in current QPS policy and procedures

7. What recent advances have been made in international best practice with respect to CEW design, policies, procedures, training and monitoring processes, and do these indicate any gaps in QPS policy and practices that need to be rectified? (Term of Reference 7)

4 Mission creep (also known as 'Taser creep' and 'usage creep') refers to the tendency for police officers to, over time, use Tasers in situations for which they were not intended.

Information sources

To answer the above questions, we relied on information obtained by:

- requesting and reviewing a formal submission from the QPS
- examining QPS policies, procedures, training materials and other documents (see the following box)
- conducting consultations with QPS officers
- observing QPS Taser training and other processes relevant to the evaluation
- analysing Taser usage data collected by the QPS
- reviewing complaints to the CMC about the use of Tasers
- examining recent developments in international best practice by considering Taser policies and practices in other jurisdictions, and by reviewing relevant literature, including empirical research and similar reviews conducted in other jurisdictions.

Table A1.1 in Appendix 1 indicates how we used these information sources to answer each of our seven research questions.

QPS submission

The CMC invited the QPS to make a written submission outlining how the implementation of the 27 recommendations from the joint QPS–CMC report had progressed, and any other information it thought relevant to our evaluation. The subsequent QPS submission indicated whether each review recommendation had been implemented and how this had been achieved. The submission also outlined several problems the QPS had identified in implementing the recommendations, and proposed a series of new recommendations to further improve QPS Taser policy, training and monitoring processes.

QPS policies, procedures, training materials and reports examined

- Section 14.23, 'Conducted Energy Weapon (Taser)' of the QPS Operational Procedures Manual (OPM)
- Commissioner's Circular 10/2008: Taser trial — update
- Commissioner's Circular 33/2008: Conducted energy devices (Tasers)
- Commissioner's Circular 34/2008: Significant Event Review Panels (SERPs)
- Commissioner's Circular 15/2009: Taser policy
- Taser Good Practice Guide
- Conducted Energy Device (CED) Introductory Handbook
- Course materials from the 2009 and 2010 Taser user courses
- Taser X26 Data Download Guidelines
- Taser Risk and Compliance Guidelines
- Taser Usage Reports — Good Example Guidelines
- Taser Deployment —SERP Review Guide (also known as a control self-assessment check sheet)
- a report on open-book testing produced by the QPS in 2009
- a report on the implementation of recommendations from the 2009 QPS–CMC review produced by the QPS in 2010 as a result of the work of a peer review panel[5]
- a report on SERPs produced by the QPS in 2010
- a report on an audit of Taser uses since the introduction of the revised policy, conducted by the QPS's Taser Review Implementation Group (TRIG) in 2010.

5 The peer review panel comprised three District Officers (Superintendents) from the QPS, and two Superintendents from Victoria Police and Western Australia Police (WAPOL) who were the managers of their respective Taser programs. Recommendations from the peer review panel were incorporated into the QPS's formal submission to our evaluation.

Consultations with QPS officers

QPS officers we consulted included:

- officers from the Taser Review Implementation Group (TRIG)
- officers from the Operational Skills and Tactics (OST) Program
- regional Chief Superintendents
- Professional Practice Managers (PPMs)
- Regional Education and Training Coordinators (RETCs)
- officers from the Ethical Standards Command (ESC).

Observations of QPS processes

In a few instances, members of the CMC project team were given the opportunity to directly observe processes relevant to the implementation of the review recommendations or the use of Tasers in the QPS. Members of the project team attended and observed:

- a two-day Taser user course delivered to recruits at the Oxley Academy in July 2010
- a Significant Event Review Panel (SERP) conducted in September 2010 in one of the QPS regions
- test exercises involved in the QPS's evaluation of two alternative Conducted Energy Weapons (CEWs).

Taser usage data from the QPS

For the purpose of this evaluation, we examined:

1. Taser Usage Reports (TURs)
2. Taser data downloads
3. SERP reports.

We also relied on information about officers' Taser training to assist with some of our analyses of Taser usage.

It is important to note that time and resource constraints meant that our evaluation did not examine information about Taser usage from other possible sources, such as CCTV footage or interviews with subjects. We will endeavour to consider information from other sources in future reviews of Taser use in the QPS.

Taser Usage Reports (TURs)

QPS officers are required to submit a TUR via the QPS intranet after any incident in which a Taser is used (see the following box). The TUR requires the reporting officer to provide information about, among other things:

- the context of the incident
- the characteristics of the subject/s
- how the Taser was used
- whether any injuries were sustained by the subject/s or police
- whether any person required medical treatment.

We analysed all TURs submitted by QPS officers in relation to uses that occurred between 22 January 2009 and 21 July 2010. This comprises the eight months before the revised policy was introduced and the 10 months after (see Chapter 3 for more information about how we analysed this data).

Use of a Taser

'Use' of a Taser includes:

- Deploying a Taser in 'probe mode' against a person (or animal). When an officer deploys a Taser in probe mode, two probes connected to the Taser by insulated wires are fired at a person. The successful deployment of the probes into the person's skin or clothes completes an electrical circuit, allowing a low-amperage electrical current to pass from the Taser to the person. This causes the person to experience uncontrollable muscle contractions, immobilising them for as long as the weapon is activated.
- Deploying a Taser in 'drive stun mode' against a person (or animal). When an officer deploys a Taser in drive stun mode, the Taser works like a stun gun. The probes are not usually fired, but the Taser is instead applied or pushed directly onto a person's skin or clothing. When used in this way the Taser does not immobilise the person, but inflicts acute pain in the area where the Taser is applied.
- Pointing a Taser in the direction of a person, or holding the Taser against a person without deploying the Taser in either probe mode or drive stun mode.
- Accidental deployments of a Taser in either probe mode or drive stun mode.

Taser data downloads

Each Taser has an inbuilt system that records the date, time and duration of the weapon's last 1500 activations. These include the one-second 'spark tests' that officers are required to perform at the beginning of each shift to ensure that the Taser is functioning correctly, and any other operational or accidental activations of the Taser in probe mode or drive stun mode. The data can be downloaded and used to create reports indicating when the weapon has been discharged and for how long.

We analysed the Taser data downloads for all deployments that occurred between 22 January 2009 and 21 July 2010.

SERP reports

As of 1 January 2009, SERPs were established in each QPS region and command to conduct monthly reviews of significant event matters, including all Taser uses. We examined all minutes/reports produced by the SERPs between January 2009 and June 2010. (Further information about the scope and purpose of the SERPs is provided in Chapter 5.)

Information about officers' Taser training

To assist us in examining the effects of the revised Taser training on the operational use of Tasers, we obtained from the QPS the dates of the Taser training courses attended by a small sample of officers who had used a Taser between 22 September 2009 and 21 July 2010 (see Chapter 3 for more detail). This information was extracted from the QPS's Advance2 Learning Management System, which records information about all training and professional development activities undertaken by QPS members.

Limitations of these data sources

It is important to note that there are several possible limitations in the data we analysed from these sources.

First, there may be inaccuracies and incompleteness in the data obtained from the TURs, especially considering the potential difficulties for officers in recalling high-stress incidents in detail, the time required to enter comprehensive information, and the fact that a TUR is necessarily a police officer's subjective account of an incident.

Second, although the Taser is designed to record the length and time of each activation, inaccuracies in data downloaded from the weapon can occur through malfunctions in the weapon's clock. The data download function is also naturally limited by its inability to record the number of trigger pulls. For example, we cannot know whether a 10-second discharge represents two trigger pulls or one prolonged pulling of the trigger.

Third, incompleteness and insufficient detail in the data obtained from some SERP reports meant we were not able to fully assess the incidents reviewed by these SERPs, nor the SERP processes themselves. These problems are discussed in further detail in Chapter 5 as they indicate possible shortcomings in existing review processes.

Fourth, there were inaccuracies in a small number of cases where the training information indicated that officers who had used a Taser had not completed a Taser training course before the use.

More detail about these limitations and how we attempted to overcome them is provided in Appendix 1.

These limitations suggest that our Taser usage data, like much other recorded police data and crime data, should be treated with caution. The data we have presented in this report will not provide a definitive or 100 per cent accurate account of Taser use in the QPS, or of the review processes that are conducted by SERPs.

CMC complaints data

We reviewed all complaints received by the CMC between 22 January 2009 and 21 July 2010 that contained at least one allegation relating to the use of Tasers by QPS officers.

Since we relied only on information contained in the complaint file, we could not always develop a detailed understanding of the nature of the complaint. In addition, like the TURs, complaints are subjective accounts of an incident that may not always reflect what actually happened.

Review of recent developments in international best practice

To help us identify recent developments in international best practice with respect to CEWs and any gaps in QPS Taser design, policy, procedures and training, we did two things.

First, we examined Taser policies and training materials from all other jurisdictions in Australia and New Zealand (NZ). We also reviewed publicly available policies and guidelines for the Royal Canadian Mounted Police (RCMP) and agencies in Alberta, Canada (Alberta Solicitor General and Public Security 2009), Ontario, Canada (Ontario Ministry of Community Safety and Correctional Services 2010), and England, Wales and Northern Ireland (ACPO 2008). The model policies developed by the Police Executive Research Forum (PERF; 2005) and the United States Department of Justice and PERF (Cronin & Ederheimer 2006) were also considered.

Second, we reviewed Taser-related literature published since January 2009, particularly literature relevant to weapon design, policy, training and monitoring processes. All research literature cited in this report is included in the reference list.

About 'best practice'

The term 'best practice' is commonly used in a variety of fields, but it is not always clear what it means (see Duignan 2009). Two possible interpretations are that it refers to a practice that:

1. is believed to probably improve some outcome, but for which no strong research evidence has yet been produced to support the claim
2. has been proven through rigorous research and evaluation to have positive impacts on a certain outcome.

In reviewing the literature on Tasers, it is clear that there are still considerable gaps in our knowledge with respect to the use of the weapons by police. Some researchers have in fact concluded that 'the limited scope of research on the TASER prohibits any sort of discussion related to "best practices"' (White & Ready 2009, p. 886). We agree that it is difficult to speak of best practice with respect to Tasers if best practice is taken to have the second meaning above. There is simply not enough research evidence to know which policies, training courses and monitoring processes produce the most positive outcomes in areas such as officer safety, subject safety and the effectiveness of Tasers as a law enforcement tool.

For this reason, we have adopted the first meaning above to guide our discussion of best practice. It may be worthwhile thinking of these practices as 'good practices', acknowledging that we do not, as yet, know for certain what are the 'best'.

Our review of recent developments in international best practice revealed some key areas of concern regarding Taser policy, training, monitoring processes and design:

Policy

- When officers should be permitted to use Tasers (that is, the threshold for use)
- Restrictions on how officers should be permitted to use Tasers — for example, restrictions on using Tasers against people who are running away from police, or for multiple cycles
- Special considerations for using Tasers against people from suspected 'vulnerable' groups, such as people who have underlying medical conditions or are under the influence of alcohol or drugs
- Aftercare and medical assistance for people exposed to Taser deployments

Training

- The content of Taser user training
- Training delivery methods (for example, scenario-based training)
- The continued improvement of Taser user training

Monitoring processes

- Incident review processes
- Regular audits of Taser use
- Regular electrical output testing of Tasers
- Regular monitoring reports on Taser usage

Design

- Accountability mechanisms — for example, the ability to record the number of trigger pulls
- Built-in limits on the number and length of cycles that can be delivered

We deal with these areas where relevant throughout our report.

2

IMPLEMENTATION OF POLICY AND TRAINING RECOMMENDATIONS FROM THE QPS–CMC REVIEW

This chapter:

- reports on our audit of the policy and training recommendations from the QPS–CMC review
- describes how the QPS's Taser policy and training have changed as a result of the implementation of recommendations
- identifies the expected effects of the revised policy and training on the use of Tasers by QPS officers, in order to establish a direction for our data analysis in the next chapter.

Key findings from the chapter include:

- All 14 policy recommendations from the 2009 QPS–CMC review (Recommendations 1 to 13 and 27) have been implemented by the QPS.
- All five training recommendations from the 2009 QPS–CMC review (Recommendations 14 to 18) have been implemented by the QPS.
- The main effect of the revised Taser policy has been to limit the circumstances in which officers can use Tasers, particularly by restricting the use of Tasers to situations where there is risk of serious injury to a person, and by prohibiting officers from deploying Tasers for multiple or prolonged cycles or against people who are handcuffed unless exceptional circumstances exist.
- The implementation of the training recommendations has led to considerable changes in the length and content of the QPS's Taser training courses. In particular, the new 16-hour initial user training course now covers possible medical effects of Taser deployments in some detail and involves a scenario-based learning and assessment session.
- Expected effects of the policy and training changes on the operational use of Tasers by QPS officers were identified as relating to the number of Taser uses, context of uses, extent to which Tasers are deployed during incidents, characteristics of people involved in Taser deployments and outcomes of Taser uses.

Audit of recommendations from the 2009 QPS–CMC review

This section reports on our audit of the policy and training recommendations from the QPS–CMC review.

Policy recommendations

Table 2.1 shows the policy recommendations from the 2009 QPS–CMC review and their implementation status as of 31 January 2011. The table indicates that each of the 14 recommendations made with respect to the QPS's Taser policy has been implemented by the QPS, and details the relevant sections of the Operational Procedures Manual (OPM). More information about how the implementation of these recommendations has changed the QPS's Taser policy is provided in the next section of this chapter.

Table 2.1: Policy recommendations from the QPS–CMC review and their implementation status as of 31 January 2011

Recommendation	Status	Notes
Recommendation 1: That the QPS Taser Policy state that a single deployment of a Taser is characterised by a single five second cycle in either probe or drive stun mode (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM (QPS 2009d)
Recommendation 2: That the QPS Taser Policy prevent officers from using the Taser on persons by application of more than a single five second cycle, unless the officer is satisfied after reassessing the situation, that exceptional circumstances exist (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 3: That the QPS Taser Policy place increased emphasis on the risks associated with the use of the Taser, particularly the risks arising from multiple or prolonged use (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 4: That the QPS Taser Policy highlight that while each and every use of the Taser will be carefully scrutinised, officers should be aware that multiple or prolonged deployments will be subjected to increased scrutiny (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 5: That the QPS Taser Policy state that officers must not use more than one Taser on one person at the same time (Refer 14.23.4 Use of More than One Taser).	Implemented	• Covered in Section 14.23.4 of the OPM • See Table 2.3 of this report for more information
Recommendation 6: That the QPS Taser Policy specifically re-state the importance of the general policy regarding the use of force, namely that officers should only use the minimum amount of force necessary to resolve an incident (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 7: That the QPS Taser Policy prohibit officers from using Tasers unless it can be established that there is a *risk of serious injury* to a person (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 8: That the QPS Taser Policy require officers to continually reassess the circumstances of the incident, particularly before they re-deploy a Taser or decide to deploy a different use of force option (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information

Continued next page >

Recommendation	Status	Notes
Recommendation 9: That, in addition to the circumstances identified in the QPS Taser Policy about when a Taser should not be used, the following situations are also included: (i) that the Taser should not be used against persons who are handcuffed, unless exceptional circumstances exist; (ii) that the Taser should not be used against persons of particularly small body mass, except in extreme circumstances; and (iii) that the secondary injuries identified in the policy as a potential consequence of a person falling after being Tasered, include the example of concussive brain injury (Refer 14.23.3 Use of Tasers).	Implemented	• All covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 10: That the QPS Taser Policy include a specific statement about Tasers being associated with or linked to deaths (Refer 14.23.3 Use of Tasers).	Implemented	• Covered in Section 14.23.3 of the OPM • See Table 2.3 of this report for more information
Recommendation 11: That the QPS Taser Policy include additional requirements for officers who deploy a Taser on a person who is suspected to be mentally ill, namely to ensure that the assistance of the Queensland Ambulance Service is obtained and where possible, discuss options with mental health professionals (Refer new section 14.23.5 Using the Taser on people who are suspected mentally ill).	Implemented	• Covered in Section 14.23.5 of the OPM • See Table 2.3 of this report for more information
Recommendation 12: That the QPS Taser Policy prohibit officers from aiming a Taser to purposely strike the head or neck of a subject unless this is unavoidable (Refer new section 14.23.6 Special Precautions to avoid eye and head injuries).	Implemented	• Covered in Section 14.23.6 of the OPM • See Table 2.3 of this report for more information
Recommendation 13: That the QPS Taser Policy prohibit the intentional direction of a Taser's laser sight target function[a] at a subject's eyes (Refer new section 14.23.6 Special Precautions to avoid eye and head injuries).	Implemented	• Covered in Section 14.23.6 of the OPM • See Table 2.3 of this report for more information
Recommendation 27: That the QPS adopt the draft policy recommended in this report (Refer Attachment 1).[b]	Implemented	• Draft policy adopted as Section 14.23 of the OPM

Notes: a The Taser has a laser sight to assist officers in aiming the weapon.
b See Appendix 2 of this report.

The draft policy (Recommendation 27) was adopted in full by the QPS as of 22 September 2009, and now comprises Section 14.23: 'Conducted Energy Weapon (Taser)' of the QPS's OPM.[6] In adopting the draft policy, each of the other 13 recommendations has also been implemented.

6 The draft policy was initially adopted and published as Commissioner's Circular 15/2009 (QPS 2009e). This was in effect from 22 September 2009 to 10 December 2009, after which the contents of the circular were incorporated into Section 14.23 of the OPM.

We note that some minor changes have been made by the QPS in adopting the draft policy (for example, changes to cross-references and wording), but we believe that these have not altered the intended messages of the draft policy.

One problem we did note with the revised policy was inconsistency in the use of terminology. This problem also existed in the draft policy recommended in the QPS–CMC review report, and probably arose because of the short timeframe in which that report was prepared. Concerns about inconsistent terminology in the revised Taser policy were also raised in the QPS's submission to our evaluation.

Inconsistent use of terminology has the potential to cause great confusion among officers about the appropriate use of the Taser. For example, OPM Section 14.23.4 states that 'officers must not use two or more Tasers on the one person at the same time'. QPS training staff informed us that, consistent with the definition of 'use' provided in Section 14.23.10, some officers believed that they were prohibited from drawing and presenting more than one Taser at a time. However, the intention of this part of the policy is to prevent officers from deploying (that is, discharging) more than one Taser at a time on the same person.

A similar problem lies in OPM Section 14.23.3, which states that 'there must be a risk of serious injury to a person before an officer can *deploy* a Taser' (emphasis added). However, consistent with Recommendation 7, this threshold should apply to all uses of the Taser, including presentations without deployments. Much confusion between terms, particularly 'use' and 'deploy', was also evident in many of the SERP reports we examined.

To reduce uncertainty and confusion among officers about various policy requirements, the existing policy needs revising to ensure that (a) relevant terms, specifically including 'use', 'deployment' and 'presentation', are clearly defined in the OPM, and (b) the terms are used consistently throughout the OPM and other QPS guidelines and training materials (such as the Taser Good Practice Guide). This is consistent with a recommendation made by the QPS in its submission.

Recommendation 1

That:

a. the QPS Taser policy (Section 14.23 of the OPM) be revised to include clear definitions of relevant terms, specifically including 'use', 'deployment' and 'presentation'

b. these terms be used consistently throughout QPS policies, guidelines, training materials and review reports.

Training recommendations

Table 2.2 shows the training recommendations from the 2009 QPS–CMC review and their implementation status as of 31 January 2011. It indicates that each of the five recommendations has been implemented by the QPS. Further information about how the implementation of these recommendations has changed the QPS's Taser training is provided in the following section of this chapter.

Table 2.2: Training recommendations from the QPS–CMC review and their implementation status as of 31 January 2011

Recommendation	Status	Notes
Recommendation 14: QPS Taser training should be updated wherever necessary to incorporate the changes to Taser policy recommended by this review.	Implemented	• QPS's revised CEW (Taser) Initial User Course, revised CEW Instructor Course and new Block 3 Taser Requalification training all commenced from January 2010 [a, b] • All three courses and associated training materials comprehensively updated to reflect the QPS's revised Taser policy • See Table 2.4 of this report for more information
Recommendation 15: QPS Taser training should be increased from the current training of 10 hours to a minimum of 14 hours over two full days.	Implemented	• Initial user training now around 16 hours long, comprising a two-day workshop plus a two-hour computer-based training package • See Table 2.4 of this report for more information
Recommendation 16: QPS Taser training should be enhanced by incorporating more practical scenario-based training that emphasises decision making, the need for continual assessment of a situation and selection of proportionate tactical use of force options.	Implemented	• All Taser training courses modified to include a scenario-based learning and assessment session at least two hours long • See Table 2.4 of this report for more information
Recommendation 17: QPS should review its current use of open book testing for officer accreditation relating to Tasers as well as Operational Skills.	Implemented	• Review of open-book exam used in Taser user training conducted by two senior staff development officers from the QPS's Education and Training Support program (Human Resource Development Branch) in September 2009 • Review found open-book testing 'is valid and an appropriate assessment strategy' for adult learners needing to deal with real-life situations • Review found exam currently used in Taser user course was appropriate in that it assessed the course's relevant learning outcome • Review suggested existing assessment procedures could be improved by questioning trainees about relevant policies and guidelines during scenario-based assessment activities; this is now covered in the scenario-based aspects of training
Recommendation 18: That the QPS Risk Management Committee should undertake a detailed risk analysis of the circumstances under which voluntary exposure in Taser training currently occurs.	Implemented	• QPS commissioned QRMC Risk Management[c] to conduct a risk assessment of voluntary exposures in training [d] • Final report provided to the QPS in October 2010 • Report concluded that there was a high risk of psychological injury as a result of the exposure aggravating a pre-existing condition or triggering an unexpected mental reaction

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Recommendation	Status	Notes
Recommendation 18: (continued)		• Report noted that the risk of psychological injury should be mitigated once all initial user training is rolled out by June 2011 and all initial user courses are then delivered by OST to recruits in the closely-monitored academy environment (rather than delivered across the regions as currently) • QPS will continue to undertake voluntary exposures during training, according to a revised technique • Voluntary exposures will be used to demonstrate to officers that they will not be affected by electricity if they place their hands on a person who is being exposed to a Taser cycle, in response to the findings of a QPS Taser usage audit (see p. 68–9) • QPS has undertaken to conduct a further risk assessment after June 2011 when all initial user courses are delivered only by OST

Notes: a Between September 2009 and December 2009, existing QPS instructors attended an update training course in preparation for the rollout of the revised user training in 2010.

b The QPS's OST training is conducted annually in three blocks — Block 1 focuses on core operational skills and tactics, Block 2 focuses on dynamic interactive scenarios, and Block 3 focuses on Tasers.

c QRMC Risk Management is an independent consultancy firm that provides risk management and other business advisory services.

d This refers to a person (usually a police officer, for the purposes of training) volunteering to be exposed to the effects of the Taser. Typically, the Taser's probes are attached directly to the person and the electrical current is delivered; less often, the probes are fired directly at the person, as would occur in an operational deployment of the Taser in probe mode.

Changes in the QPS Taser policy and training

This section describes how the QPS's Taser policy and training have changed as a result of the implementation of the above recommendations. Tables 2.3 and 2.4 document these changes.

Policy changes

Table 2.3 on pages 16–18 summarises the substantive changes to the QPS Taser policy. For clarity, we have grouped these changes into the following categories:

1. *Officer use of Tasers.* Major changes include raising the threshold for Taser use to situations where there is a risk of serious injury to a person, and prohibiting officers from deploying Tasers for multiple or prolonged cycles and against people who are handcuffed unless exceptional circumstances exist. The policy now also highlights the link between Taser deployments and some deaths, particularly where multiple or prolonged discharges are involved and where the person has underlying health problems, is under the influence of alcohol or drugs, or has already been exposed to oleoresin capsicum (OC) spray.
2. *Accidental Taser deployments.* All accidental deployments must now be reported and reviewed by a supervisor.
3. *Voluntary exposures.* There are now specific requirements for how voluntary exposures are to be undertaken in training.
4. *Monitoring and review processes after the use of a Taser.* In particular, there is now a requirement that, within 72 hours of a Taser incident, data is downloaded from the Taser and the incident is reviewed by a Chief Superintendent.

Table 2.3: Changes to the QPS Taser policy

	Issue	Old policy (1 January 2009 to 21 September 2009)	Revised policy (22 September 2009 onwards)
Officer use of Tasers	Threshold for Taser use	• Any incident involving a violent or physically aggressive person • Statement that Tasers may be used against people who physically assault or actively resist an officer in a manner that may result in *injuries* to the officer or others, including themselves (note no requirement for the injury to be 'serious')	• Only incidents involving a person who poses a *risk of serious injury* to police, another person or themselves
	Deployments against handcuffed people	• No restrictions	• Not permitted unless exceptional circumstances exist
	Deployments against people of particularly small body mass	• No restrictions	• Not permitted unless exceptional circumstances exist
	Deployments from more than one Taser	• No restrictions	• Not permitted on the one person at the same time
	Aiming the Taser	• No restrictions	• Not permitted to aim the Taser at a person's head or neck unless unavoidable • Not permitted to intentionally aim the Taser's laser sight at a person's eyes
	Multiple and/or prolonged Taser discharges	• No restrictions	• Not permitted unless exceptional circumstances exist • Statement that they will be subjected to greater scrutiny and will need to be justified • Statement that they have been linked to deaths
	Guidance around general use of force	• Officers should consider all use of force options available to them and all the circumstances of an incident when determining the most appropriate use of force option	• Officers should only use the minimum amount of force necessary to resolve an incident • Officers should continually assess the situation before deciding to apply another use of force • Officers should consider all use of force options available to them and all the circumstances of an incident when determining the most appropriate use of force option

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	Issue	Old policy (1 January 2009 to 21 September 2009)	Revised policy (22 September 2009 onwards)
	Guidance about possible adverse health effects associated with the Taser	• Officers should be mindful of the area in which the subject may fall because of the potential for fall-related injuries	• Statement that multiple and prolonged discharges have been linked to deaths, particularly where the subject exhibits certain risk factors (i.e. underlying health problems or being under the influence of alcohol or dugs) or has already been exposed to oleoresin capsicum (OC) spray • Statement that some people with these risk factors have died some time after being exposed to the effects of a Taser • Officers are to request the assistance of the Queensland Ambulance Service (QAS) and discuss options with mental health professionals where possible when the incident involves a person who is suspected to have a mental health condition • Officers should be mindful of the area in which the subject may fall because of the potential for fall-related injuries
Accidental Taser deployments	Reporting	• No requirements	• TUR to be submitted • Shift supervisor and Officer in Charge (OIC) to be notified by officer involved • Significant event message also to be submitted if any person is subjected to the accidental deployment or if the accidental deployment causes substantial property damage
	Review and monitoring	• No requirements	• To be reviewed by the shift supervisor (or OIC, DDO or RDO) • Reviewing officer is to make inquiries to establish the cause of the incident (e.g. memory lapse, lack of proficiency, equipment failure, deliberate disregard of policies) • Reviewing officer is to make a recommendation about how the matter should be dealt with (e.g. further training, managerial guidance, formal investigation)
Voluntary exposures	Procedures for undertaking voluntary exposures	• No guidance in policy, but processes required by revised policy were being followed in training	• Only to be undertaken as part of QPS Taser training by a qualified Taser instructor • Are to be limited to one five-second cycle • Are not to take place unless the officer has read an approved QPS fact sheet and signed a waiver

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	Issue	Old policy (1 January 2009 to 21 September 2009)	Revised policy (22 September 2009 onwards)
Monitoring and review processes after the use of a Taser	Data downloads	• No requirement for data to be downloaded after every deployment	• After any incident in which a Taser is deployed, the relevant District Officer (DO) or manager is to ensure that data from the Taser are downloaded by an appropriately qualified person within 72 hours • Downloaded data are to be provided to the SERP as a priority • See p. 91 for more information
	Chief Superintendent reviews	• Not required	• All incidents involving the deployment of a Taser are to be reviewed by the relevant Chief Superintendent within 72 hours • See p. 91 for more information
	Debriefs with officers involved in Taser incidents	• No mention	• Any supervisor reviewing a Taser incident should consult with the officer involved where practicable • See p. 90 for more information

Note: A copy of the old policy (Commissioner's Circular 33/2008) is included in Appendix 3.

Training changes

Table 2.4 highlights the major changes to the length and content of QPS Taser training following the implementation of Recommendations 14 to 16:

- The initial Taser user workshop has increased from one to two days.
- All Taser courses have been comprehensively updated to reflect the revised policy. They focus on key policy areas, including the threshold for use, the need to avoid multiple and prolonged discharges, and the possibly increased risk of death associated with Taser deployments against a range of medically vulnerable people.
- All Taser courses now involve a session on the medical effects of Tasers, and provide more information about recommended aftercare procedures
- Taser training now incorporates at least two hours of scenario-based learning and assessment focused on trainees' decision-making skills, situational awareness, threat assessment processes, communication skills and practical skills in using the Taser in simulated operational scenarios.

These and the other major changes to training are highlighted in Table 2.4.

Table 2.4: Changes to the QPS Taser training

Area	Old training (2009)	Revised training (1 January 2010 onwards)
Length of CEW (Taser) Initial User Course	• Around 8 hours (1-day workshop)	• Around 14 hours (2-day workshop)
Policy and procedure presentation	• Reflected old policy • Officers advised to avoid multiple or prolonged Taser discharges where practicable	• Reflects revised policy • Issue of multiple and prolonged discharges discussed in a more formalised way • Includes a key focus on the threshold for use and the increased risk of death associated with Taser deployments against certain people
Taser Good Practice Guide and other training resources	• Reflected old policy	• Reflects revised policy
Written exam content	• Reflected old policy	• Reflects revised policy
Medical effects presentation	• Not included	• All courses include a 30-minute presentation on the possible health risks associated with Taser use • Emphasis on the risks of multiple and prolonged discharges when other risk factors (e.g. mental illness, substance use, pre-existing physical health conditions) are present • Emphasis on the risk of Taser-induced muscle contractions leading to impaired breathing, especially where the probes are placed across the subject's chest or diaphragm • Risk of head and eye injuries from probe strikes highlighted • Risk of secondary injuries when an incapacitated subject falls highlighted • Additional information provided on recommended aftercare procedures following Taser deployments • Emphasis placed on officers using the QPS's Post Arrest Risk Assessment (PARA) Scale to assist them in making decisions about the possible health risks of people who have been taken into custody, and about what medical assistance they may require to minimise the likelihood of sudden in-custody deaths • Need to continually assess subjects while being transported and in custody reiterated to trainees

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Area	Old training (2009)	Revised training (1 January 2010 onwards)
Scenario-based learning and assessment	• Not included	• All courses involve a scenario-based learning and assessment session at least two hours long • Sessions guided by the Dynamic Interactive Scenario Training (DIST) model • Scenarios aim to assess trainees' use of the Taser in simulated operational situations • Training involves a 'shoot' scenario (where use of a Taser would be appropriate because of the subject's violent behaviour) and a 'don't shoot' scenario (where deployment of a Taser would be contrary to QPS policy as the subject is in possession of a can of petrol)[a] • Scenarios are generally drawn from operational incidents • There is an attempt to break down the scenarios so that the instructor can question trainees about their assessment of the situation at various points • Focus is on translating theory and policy into practice • Tasers also being incorporated into scenarios in more general use of force training

Note: a A deployment in this situation would be contrary to Section 14.23.3 of the OPM, which states that a Taser should not be deployed 'near explosive materials, flammable liquids or gases due to the possibility of ignition'.

Potential for improving the training scenarios

We believe that the introduction of scenarios has greatly improved the Taser training provided to officers, and particularly support the focus on questioning officers about their decision making. The use of scenarios that are informed by real-life situations is also positive.

However, we recommend further attention be given to developing scenarios that are less 'black and white'. As indicated in Table 2.4, the training currently involves a 'don't shoot' scenario in which a Taser deployment is strictly prohibited by QPS policy. Although we realise that this scenario was developed to avoid dangerous operational deployments that have occurred in other jurisdictions (see Sydney Morning Herald 2009), we also believe that training scenarios should be more focused on developing officers' skills in conducting continual threat assessments, making decisions and selecting an appropriate use of force option.

Recommendation 2

That the QPS considers incorporating scenarios in the revised 2012 Taser training courses that cover more of the 'grey areas' in relation to Taser use — that is, scenarios that challenge officers and help them to further develop their skills in decision making and conducting continual threat assessments.

Expected effects of the policy and training changes

In Chapter 3 we examine the effects of the policy and training changes on Taser use by QPS officers.[7] To help us do this, we identified the following areas that we expected would reflect the effects of these changes:

1. Number of Taser uses
2. Context of Taser uses
3. Extent to which Tasers are deployed during Taser incidents
4. Characteristics of subjects involved in Taser deployments
5. Medical assistance provided to subjects involved in Taser incidents who are suspected to have a mental health condition
6. Outcomes of Taser uses
7. Taser-related complaints to the CMC.

The expected effects of the policy and training changes, and the rationale for them, are explained in more detail in Table 2.5.

7 We had also intended to look at the effects of the revised training on officers' evaluations of the courses they had attended, but found that trainee evaluations are not currently included in the QPS's Taser courses. Time and resource constraints meant that we were also unable to survey officers about the training they had received.

Table 2.5: Expected effects of the revised Taser policy and the revised Taser training on officers' use of Tasers

Area of interest: Number of Taser uses	
Given the following changes to Taser policy: • the higher threshold for Taser use • the increased emphasis on using the minimum amount of force required to resolve a situation • the acknowledgment that some people have died some time after being exposed to a Taser deployment.	After implementation, we would expect: • fewer Taser uses overall.
Area of interest: Context of Taser uses	
Given the following change to Taser policy: • the higher threshold for Taser use.	After implementation, we would expect: • Tasers are being used in more 'serious' situations.
Given the following change to Taser training: • the increased emphasis on the higher threshold for Taser use.	
Area of interest: Extent to which Tasers are deployed during Taser incidents	
Given the following changes to Taser policy: • the requirement that officers do not apply more than one five-second cycle (unless in exceptional circumstances) • the increased emphasis on continually reassessing situations and using a minimum amount of force • the statement that multiple or prolonged discharges will be subjected to extra scrutiny • the stated link between multiple or prolonged discharges and some deaths • the requirement that officers do not deploy more than one Taser on the one person at the same time.	After implementation, we would expect: • fewer instances in which a Taser is discharged multiple times on a person • fewer instances in which a Taser is discharged for longer than five continuous seconds on a person • fewer incidents in which two or more Tasers are deployed simultaneously on a person.
Given the following changes to Taser training: • the increased emphasis on minimising the application of multiple and prolonged discharges • the increased amount of time spent doing practical training exercises.	
Area of interest: Characteristics of subjects involved in Taser deployments	
Given the following changes to Taser policy: • the requirements that officers do not deploy a Taser against a person who is handcuffed or of particularly small body mass (unless in exceptional circumstances) • the increased emphasis on possible adverse health effects to subjects with suspected risk factors (e.g. those previously sprayed with OC spray, those suspected to have underlying medical conditions), particularly where multiple or prolonged Taser discharges are involved.	After implementation, we would expect: • fewer Taser deployments against handcuffed people • fewer Taser deployments against people of particularly small body mass • fewer deployments and multiple or prolonged Taser discharges against people who had been sprayed with OC spray • fewer deployments and multiple or prolonged Taser discharges against people suspected to have an underlying physical or mental health condition • fewer deployments and multiple or prolonged Taser discharges against people suspected to be under the influence of alcohol and/or drugs.
Given the following changes to Taser training: • the increased emphasis on the new policy restrictions (e.g. relating to handcuffed people and people of particularly small body mass) • the new session on the possible medical effects of Tasers.	

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Area of interest: Medical assistance provided to subjects involved in Taser incidents who are suspected to have a mental health condition	
Given the following change to Taser policy: • the requirement that officers seek the assistance of the QAS when the incident involves a person with a suspected mental health condition.	After implementation, we would expect: • more officers who use a Taser against a person with a suspected mental health condition seeking the assistance of the QAS.
Area of interest: Outcomes of Taser uses	
Given the various changes to Taser policy, particularly: • the increased emphasis on continually reassessing situations and using a minimum amount of force • the requirement that officers do not apply more than one five-second cycle of the Taser (unless in exceptional circumstances) • the acknowledgment that some people have died some time after being exposed to a Taser deployment.	After implementation, we might expect more positive outcomes when it comes to: • officer perceptions of the effectiveness of Taser uses • the frequency with which Taser uses are associated with injuries to subjects and/or officers • the appropriateness of Taser uses as judged by the SERPs.
Given the following changes to Taser training: • the new session on the possible medical effects of Tasers • the vastly increased amount of time spent doing practical and scenario-based training exercises.	
Area of interest: Taser-related complaints to the CMC	
Given the various changes to Taser policy, particularly: • the various new restrictions on when and how officers can use Tasers.	After implementation, we might expect: • fewer complaints to the CMC about the use of Tasers.

3

EFFECTS OF THE POLICY AND TRAINING CHANGES ON THE USE OF TASERS BY QPS OFFICERS

This chapter examines:

- effects of the QPS's revised policy on Taser use by QPS officers
- effects of the QPS's revised training on Taser use by QPS officers.

Key findings from the chapter are:

- The revised policy appears to have been associated with some improvements in how QPS officers are using Tasers, including:
  - a considerable reduction in the number of uses, particularly presentations and probe mode deployments
  - a possible slight increase in the seriousness of situations in which Tasers were used
  - a small to moderate reduction in the percentage of subjects who were the targets of multiple discharges, and a very small reduction in the percentage of subjects who were the targets of prolonged discharges
  - a small but noticeable reduction in Taser deployments against handcuffed people
  - a slight reduction over the longer term in the number of Taser-related complaints to the CMC.
- Contrary to our expectations, Taser deployments (including multiple and/or prolonged discharges) after the revised policy was introduced were generally *more* likely than those in the period before to involve a person who was suspected to have a mental or physical health condition, or believed to be under the influence of alcohol and/or drugs.
- Officers who had completed the revised Taser training did not seem to be using Tasers any differently when compared with officers who had not completed the revised training, suggesting that the revised training had no positive effects on the operational use of Tasers.

Effects of the revised policy on the use of Tasers

This section examines the effects of the revised Taser policy on the use of Tasers by QPS officers, specifically in the following areas:

- number of Taser uses
- context of Taser uses
- extent to which Tasers were deployed during Taser incidents
- characteristics of subjects involved in Taser deployments[8]
- medical assistance provided to subjects involved in Taser incidents who were suspected to have a mental health condition
- outcomes of Taser uses
- Taser-related complaints to the CMC.

8 We use the term 'subjects' rather than 'people' to avoid any confusion between other people involved in Taser incidents (for example, police officers, bystanders).

Methodological note

Using information obtained from QPS Taser Usage Reports (TURs), SERP reports, Taser data downloads and CMC complaints data, we examined whether the introduction of the revised policy on 22 September 2009 had the expected effects discussed in the previous chapter.

Time periods used

To identify any changes in Taser use associated with the introduction of the revised policy, we analysed data from two time periods:

1. The eight months before the revised policy was introduced, 22 January 2009 to 21 September 2009 (labelled in order as Months 1 to 8 in the figures in this chapter)
2. The 10 months after the revised policy was introduced, 22 September 2009 to 21 July 2010 (labelled in order as Months 9 to 18 in the figures in this chapter).

Examining the data

Generally, we looked at:

- the trend over the eight months before the revised policy was introduced
- the change immediately after the revised policy was introduced
- the trend over the 10 months after the revised policy was introduced, and whether this differed from the trend over the previous eight months
- whether our findings for the end of the post-policy period (Month 18) differed from what would have been predicted had the revised policy not been implemented and had pre-existing trends been maintained.

This enabled us to examine the short- and longer-term effects of the revised policy on Taser usage, taking into account usage patterns before the revised policy was introduced. More information about our data analysis approach is provided in Appendix 4.

Units of analysis

Readers should be aware that our unit of analysis varies throughout this chapter — that is, we have variously analysed:

- Taser uses, where one Taser use may involve one or more subjects and may involve one or more Taser discharges
- Taser incidents, where one Taser incident may involve one or more subjects, one or more Taser uses and one or more officers who used the Taser
- Taser subjects, who are the people Tasers are used against.

For example, if two officers both drew their Tasers and presented them at a group of three people who were fighting, this would represent two Taser uses (one use for each officer), one Taser incident and three Taser subjects. More information about how we classified Taser uses, incidents and subjects is provided in Appendix 4.

Data for figures

Tables of data for the figures in this section are provided in Appendix 5.

Missing data

Cases with missing data were deleted on an analysis by analysis basis, so total sample sizes vary slightly between analyses.

Effects on the number of Taser uses

Summary of discussion

There was a considerable reduction in the number of Taser uses, from around 40 per month immediately before the introduction of the revised policy to around 31 per month after. Presentations and probe mode deployments especially decreased.

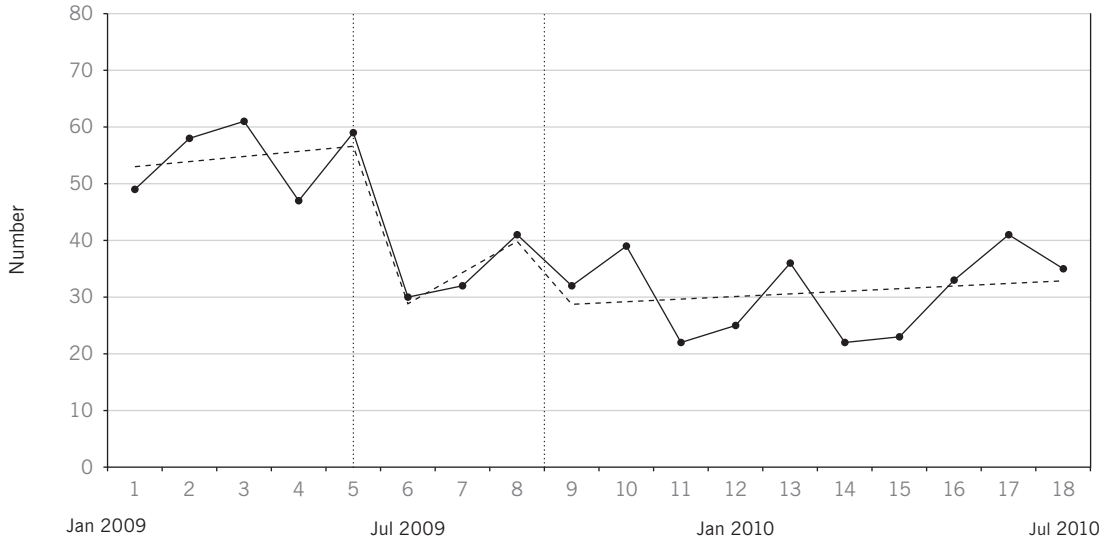
We examined the number of operational Taser uses reported over the 18-month period of interest.[9] Because the death at Brandon in June 2009 had a noticeably large impact on the trend in Taser uses in the pre-policy period, with the number of uses dropping dramatically in the first full month after the incident, we decided to examine trends in the number of uses over three periods rather than two:

- the first five months of the Taser rollout, including the month in which the death at Brandon occurred (Months 1 to 5)
- the three months after the death at Brandon but before the revised policy was introduced (Months 6 to 8)
- the 10 months after the revised policy was introduced (Months 9 to 18).

Trends for all operational Taser uses

Figure 3.1 shows the total number of operational Taser uses reported per month over the 18-month period of interest, with trends in these three periods indicated.

Figure 3.1: Number of Taser uses by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line at Month 5 denotes the death at Brandon.

The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

There was no apparent tendency for Taser uses to occur more often in some months than others, as, for example, is the case with public order offences (where offences tend to be more common in the warmer summer months; see CMC 2008b, 2010).

It is evident that the death at Brandon had a marked impact in terms of reducing the number of Taser uses. In the first five months of the Taser rollout (Months 1 to 5) the number of Taser uses was increasing by 0.9 uses per month. After the death at Brandon, Taser uses dropped by around 30 uses between Months 5 and 6, before beginning to increase again (by 5.5 uses per month) over the last three months of the pre-policy period. In the month immediately before the introduction of the revised policy, there were around 40 Taser uses.

9 It should be noted that 47 accidental Taser deployments were also reported, but these are not examined in this section (see Chapter 4 for more information). Briefly, however, we found that only seven accidental deployments were reported in the pre-policy period, compared with 40 in the post-policy period, suggesting that the new policy requirement that accidental deployments be reported has in fact led to increased reporting.

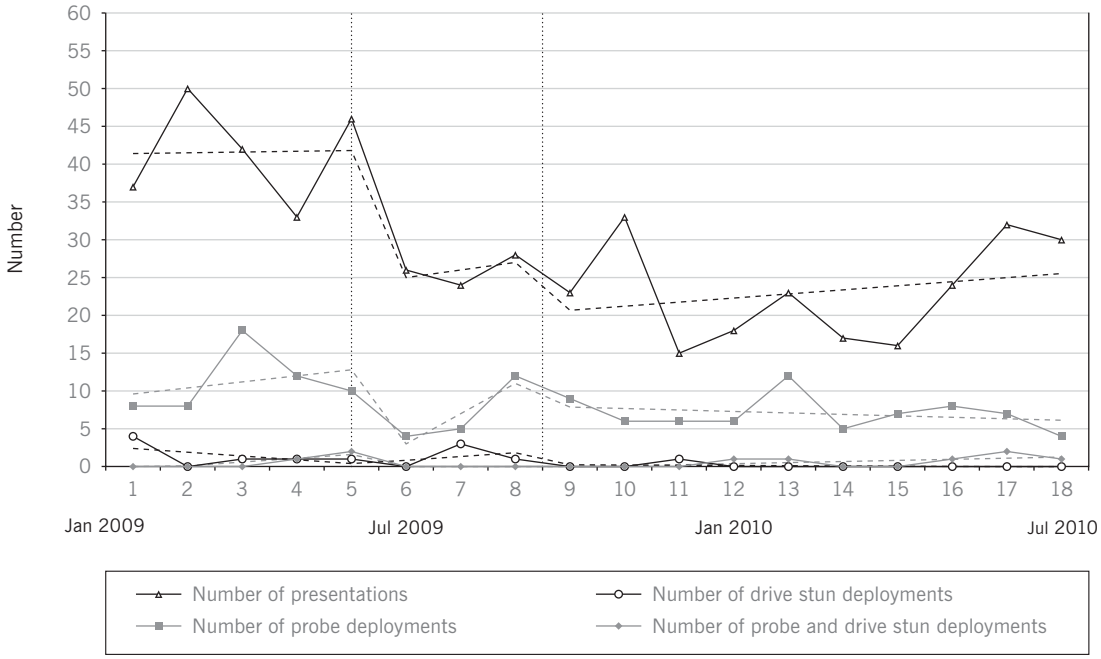
In the month immediately after the revised policy was introduced, the number of Taser uses decreased by 11.5 uses. This suggests that the policy may have had an immediate effect on reducing the frequency of Taser uses in the QPS. Furthermore, although there was an increasing trend in use in the 10 months after the revised policy was introduced, with the number of uses increasing by 0.5 uses a month, this was considerably smaller than the increasing trend across Months 6 to 8. Overall, there were around 31 Taser uses per month across the post-policy period.

Together, these results suggest that the introduction of the revised policy was associated with considerably fewer Taser uses.

Trends for each type of Taser use

We also looked at trends in the pre- and post-policy periods for each specific type of Taser use. Figure 3.2 shows the number of (a) presentations, (b) probe deployments, (c) drive stun deployments and (d) probe and drive stun deployments reported per month over the 18-month period of interest.[10]

Figure 3.2: Nature of Taser uses by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line at Month 5 denotes the death at Brandon.
The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

As for all Taser uses, Figure 3.2 illustrates the noticeable effects of the death at Brandon, particularly in reducing the number of presentations and probe deployments. It also shows that:

- In the three months immediately before the revised policy was introduced, presentations were increasing by 1.0 presentation per month. They decreased by 6.9 presentations immediately after the revised policy was introduced, though started to increase by 0.5 presentations per month over the 10 post-policy months.

10 We regarded instances where the officer applied the Taser directly to a person's body to complete a circuit (that is, where one probe missed or failed to make effective contact with the subject) as a probe deployment. Probe and drive stun deployments involved a probe deployment combined with a drive stun deployment used only to achieve pain compliance (rather than to complete a circuit).

- Probe deployments were increasing by 4.0 deployments per month over the last three months of the pre-policy period. They dropped by 2.9 deployments immediately after the revised policy was introduced, before levelling off in the post-policy period.
- Drive stun deployments were increasing by 0.5 deployments per month in the three months before the revised policy was introduced. Immediately after, they dropped by 1.6 deployments, and remained stable over the following 10 months.
- Deployments in both probe and drive stun modes were stable over the last three months of the pre-policy period, with no such deployments recorded between Months 6 and 8. There was no change in this number immediately after the revised policy was introduced, and the number remained more or less unchanged in the post-policy period.

Altogether, it appears that the revised policy may have had some immediate, positive impact in terms of reducing the frequency of Taser presentations, probe deployments and drive stun deployments. Furthermore, the reductions in probe deployments and drive stun deployments were maintained over the 10 months after the introduction of the revised policy. In contrast, the introduction of the revised policy did not seem to have any impact on the consistently small number of deployments in both probe and drive stun modes.

Effects on the context of Taser uses

In assessing whether the revised policy might have led to officers using Tasers in more 'serious' situations, we examined the following three variables that may serve as approximate indicators of the seriousness of a situation:

1. The officer's threat assessment
2. The subject's behaviour before the use of the Taser
3. Presence of a weapon.

Summary of discussion

There was possibly a slight increase in the seriousness of situations in which Tasers were used. More subjects were reported to pose a risk of serious injury to a person, and there was a slight increase in the percentage of uses that involved a subject who was armed and acting in a way that signalled a threat to a person. Conversely, fewer uses involved a subject who was described as resisting or struggling with police, or who appeared to be merely failing to comply with police directions or running away from police. There was no sustained increase, however, in the percentage of uses that involved a subject who was observed or believed to be armed.

1. The officer's threat assessment

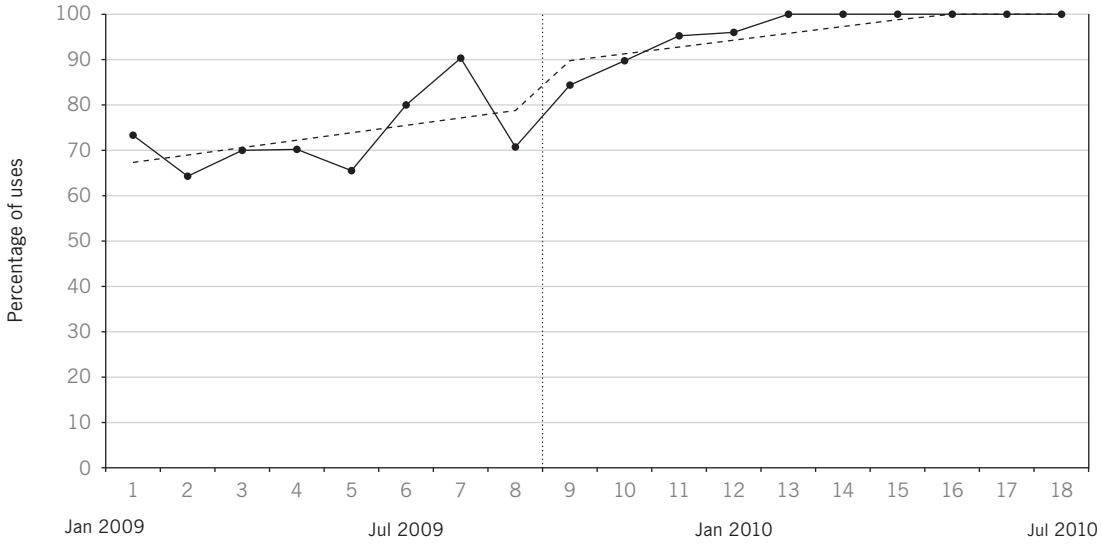
Figure 3.3 shows the percentage of Tasers uses in each month that involved a subject who the reporting officer believed posed a risk of serious injury to a person. It is important to interpret the figure with much caution, as the data over time are not directly comparable (see the following box).

A note of caution in interpreting Figure 3.3

Officers are now asked to report on the TUR whether the subject posed a *risk of serious injury* to a police officer, a civilian or themselves. Previously, however, the corresponding questions in the TUR asked whether the subject had *attempted to assault* a police officer or a civilian or had *attempted to commit self-harm*. The QPS was not able to advise us of when the wording changed, though we believe it was not immediately after the revised policy came into effect, but some time thereafter.

For those uses that occurred before the wording of the TUR changed, we deemed a subject to pose a risk of serious injury to a person if the officer indicated they had attempted to assault someone or commit self-harm. Caution nevertheless needs to be exercised in interpreting the data given the differences in wording over time, which might have affected officers' responses to these questions. Certainly, a person may be perceived to pose a risk of serious injury without having yet attempted to assault a person or commit self-harm.

Figure 3.3: Percentage of Taser uses that involved a subject who posed a risk of serious injury by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of uses between Months 1 and 8 = 368; total number of uses between Months 9 and 18 = 307.

With regards to the percentage of uses that involved a subject who reportedly posed a risk of serious injury, the figure shows:

- an increasing trend of 1.6 per cent per month in the pre-policy period
- a 9.5 per cent increase immediately after the revised policy was introduced[11]
- an increasing trend of 1.5 per cent per month in the post-policy period.

11 Throughout this section, phrases like 'an *x* per cent increase/decrease' refer to changes in *percentage points*, not percentage changes relative to initial values. For example, an increase from 10 per cent to 15 per cent would be referred to as a 5 per cent increase (meaning an increase of 5 percentage points), not a 50 per cent increase.

For every month since Month 13, 100 per cent of uses reportedly involved a subject who posed a risk of serious injury. This contrasts with the 95.1 per cent of uses in Month 18 that would have been predicted to involve a subject who posed a risk of serious injury if the revised policy had not been introduced and the pre-policy trend had continued.

These findings suggest that the introduction of the revised policy was associated with an increase in the percentage of Taser uses reported to involve a subject who posed a risk of serious injury. However, given that the wording of the TUR also changed at some point in the post-policy period, we cannot conclude with certainty that the revised policy was responsible for these effects. (It is nevertheless noteworthy that an immediate increase was seen when the revised policy was introduced, even though we believe the wording was not changed at this time.) Furthermore, some officers we spoke to suggested that there might have been changes in the way officers have been *describing* situations since the revised policy was introduced, but few changes in the actual situations in which Tasers are being used. We cannot assess the validity of these suggestions from the data we have, but it is a possibility that should be borne in mind.

2. The subject's behaviour before the use of the Taser

How we analysed the subject's behaviour before the use of the Taser

From the narrative sections of the TUR, we were generally able to identify the subject's behaviour immediately before the Taser was *first presented* (note that the subject's behaviour at this time was not always the same as their behaviour immediately before any deployment of the Taser). We then classified these behaviours according to 20 categories including:

- Subject was armed and their actions indicated a threat to a person
- Subject was armed and they failed to comply with police directions
- Subject was reported to be armed and their actions indicated a threat to a person
- Subject's actions indicated a threat to police
- Subject was violently resisting or violently struggling with police
- Subject had assaulted a person (including a police officer).

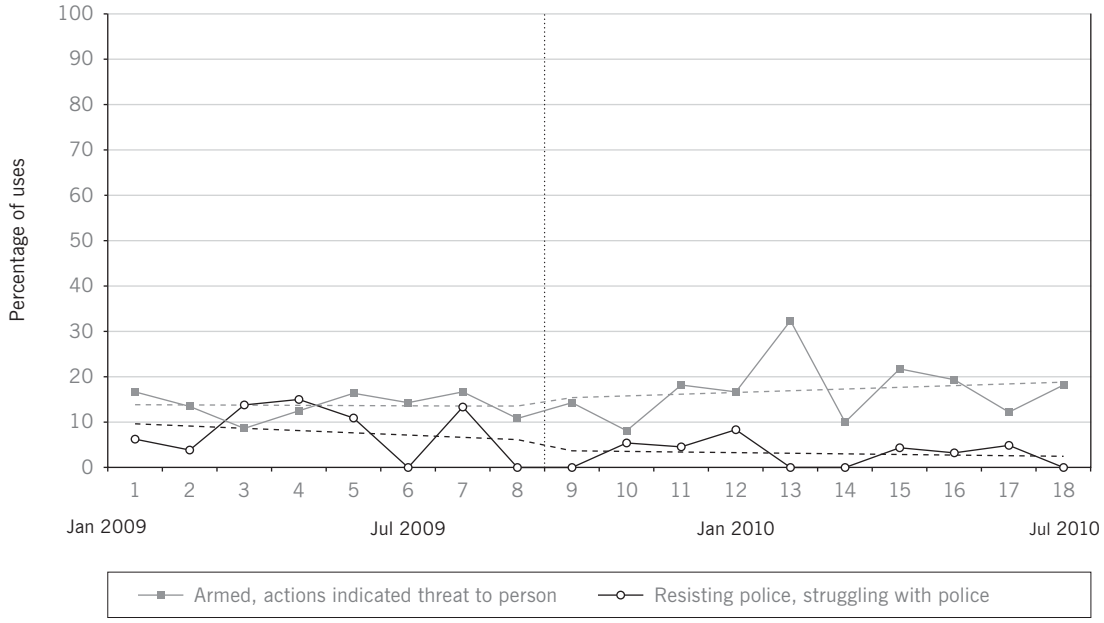
More information about the categories we used and the kinds of behaviour they involved is provided in Appendix 4.

It should be noted that the categories used to describe the subject's behaviour were created from the officer's own language and description of events in the TUR, and are not all clearly separated. For example, some officers may have simply stated that the subject violently resisted, without specifying that the subject punched an officer. Furthermore, some Taser uses appeared to be in response to more than one type of behaviour by the subject — for example, a subject who was reported to be armed may also have been refusing to comply with police directions; in such cases, the more 'serious' behaviour was used for analysis.

We examined trends over time for the most common categories of subject behaviour. Noteworthy findings in two categories are illustrated in Figure 3.4:

- armed, actions indicated a threat to a person
- resisting or struggling with police (not violently).

Figure 3.4: Percentage of Taser uses that were preceded by particular subject behaviours by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of uses between Months 1 and 8 = 348; total number of uses between Months 9 and 18 = 293.

We can see that the percentage of uses that involved a subject who was armed and behaving in a way that signalled a threat to a person was stable in the pre-policy period, but increased slightly when the revised policy was introduced and continued to increase by 0.4 per cent per month in the post-policy period. At Month 18, the percentage of uses that involved these subjects was slightly higher (18.8% according to the post-policy trend line) than would have been expected if the revised policy had not been introduced and if the pre-policy trend had been maintained (13.0%).In contrast, Figure 3.4 also shows that the percentage of uses involving subjects described as resisting or struggling with police (not violently) decreased by 2.3 per cent immediately after the revised policy was introduced and continued to decline in the post-policy period, though at a somewhat slower rate (0.1% per month) than in the pre-policy period (0.5% per month).

Although the small number of uses in many of the other categories precluded us from examining trends over time as above, we also found that the number of uses preceded by a subject who appeared to be (a) merely failing to comply with police directions or (b) merely running away from police was smaller in the post-policy period (1.4%, $n = 4$, and 0.7%, $n = 2$, respectively) than in the pre-policy period (3.8%, $n = 14$, and 2.2%, $n = 8$, respectively).

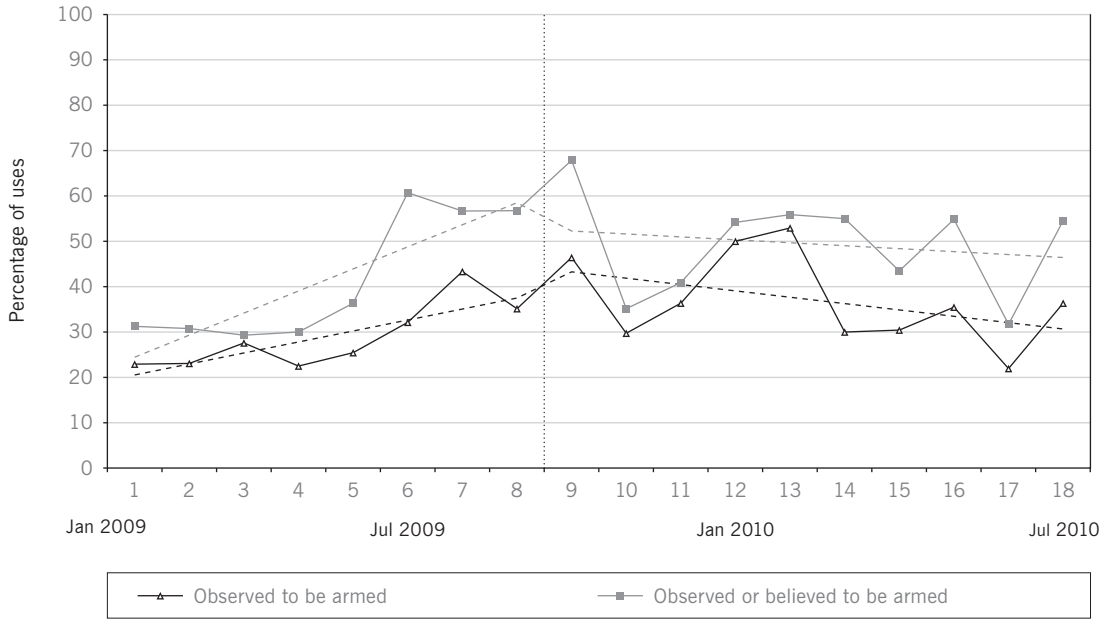
Together, these results suggest that there may have been some small changes in the kinds of subject behaviours preceding officers' use of Tasers after the introduction of the revised policy. In particular, situations were more likely to involve a subject who was armed and behaving in a way that signalled a threat to a person, and less likely to involve a subject who was described as resisting or struggling with police. 'Questionable' uses against subjects who were merely refusing to comply with police directions or fleeing from police also decreased, possibly reflecting the more limited conditions under which a Taser can be used.[12]

Overall, our findings suggest that the revised policy may have been associated with a slight increase in the seriousness of situations in which Tasers were used. As mentioned above, however, our findings may also merely reflect possible changes in the way officers have been describing situations since the introduction of the revised policy.

3. Presence of a weapon

Based on the categories of subject behaviour we developed, we also examined trends in the percentage of uses that involved subjects who were seen by police to be armed with a weapon or otherwise believed to be armed (for example, on the basis of information received from witnesses or informants) (see Figure 3.5).

Figure 3.5: Percentage of Taser uses that involved a subject who was (a) observed to be armed with a weapon and (b) observed or believed to be armed with a weapon by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of uses between Months 1 and 8 = 348; total number of uses between Months 9 and 18 = 293.

12 Further information about uses of this kind in the post-policy period is provided on pp. 59–62.

With regards to the percentage of uses that involved an armed subject, the figure shows:

- an increasing trend of 2.4 per cent per month over the pre-policy period
- a 7.2 per cent increase immediately after the revised policy was introduced
- a decline of 1.4 per cent per month over the post-policy period.

Overall, the percentage of uses that involved an armed subject in Month 18 (30.7% based on the post-policy trend line) was considerably lower than would have been expected had the revised policy not been implemented and had the pre-policy increase continued (61.7%).

Similarly, with regards to the percentage of uses that involved a subject who was either observed or believed to be armed, Figure 3.5 shows:

- an increasing trend of 4.9 per cent per month over the pre-policy period
- a 5.6 per cent drop immediately after the revised policy was introduced
- a decline of 0.7 per cent per month over the post-policy period.

Altogether, the percentage of uses that involved a subject who was armed or believed to be armed was markedly lower in Month 18 (46.4% according to the post-policy trend line) than would have been predicted if the revised policy had not been introduced and the pre-policy trend had been maintained (100%).

Taken together, these findings suggest that the revised policy was not associated with any sustained increase in the percentage of Taser uses that involved a subject who was observed or believed to be armed. If a subject being observed or reported to be armed is taken as an indicator of greater seriousness, these findings are in contrast to those reported in the previous section, where we suggested that the revised policy might have been associated with a slight increase in the seriousness of situations in which Tasers were used. It is also recognised, however, that a situation may be serious even if a weapon is not present.

Summary

Altogether, the findings from the three indicators of seriousness are relatively mixed. Overall, however, it seems that officers may have used Tasers in more serious situations after the revised policy was introduced. Caution should nevertheless be applied in light of the problems we highlighted with the changing wording of the TUR and the possibility that officers may now simply be describing situations in different ways.

Effects on the extent to which Tasers were deployed during Taser incidents

Summary of discussion

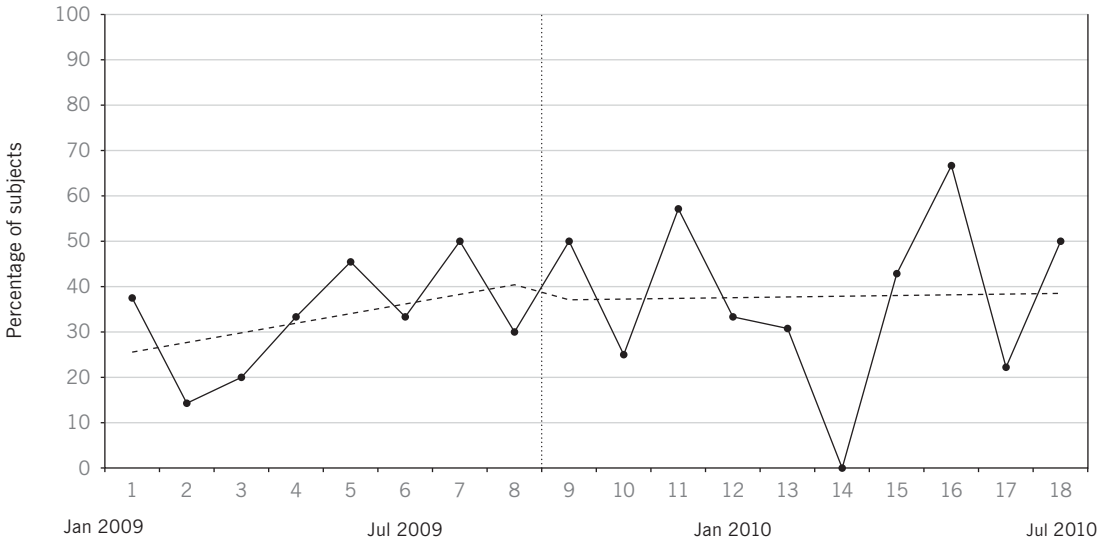
There was a small to moderate reduction in the proportion of subjects who were the target of multiple discharges, and a very small reduction in the proportion of subjects who were the target of prolonged discharges.[13] Simultaneous deployments continued to be rare.

13 We have used terms like 'small', 'moderate' and 'large' to provide a general description of the effects of the revised policy. We have based this on the difference at Month 18 between the percentage predicted by the pre-policy trend line and the percentage predicted by the post-policy trend line. A 10 per cent difference is considered 'small', a 30 per cent difference is considered 'moderate' and a 50 per cent difference is considered 'large'. Note that even modest effects in terms of percentage differences can be important in practice. For example, even one or two fewer people a month being the target of multiple discharges might be considered a valuable improvement given the possible health risks of such deployments.

Multiple discharges

By examining the Taser data downloads in conjunction with the TURs, we were able to determine the percentage of subjects who were the targets of more than one Taser discharge in the same incident (see Figure 3.6).

Figure 3.6: Percentage of subjects who had a Taser deployed at them who were the targets of multiple Taser discharges in the same incident by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of subjects between Months 1 and 8 = 72; total number of subjects between Months 9 and 18 = 69.

Figure 3.6 shows:

- an increasing trend of 2.1 per cent per month in the pre-policy period
- a 3.5 per cent drop immediately after the revised policy was introduced
- no real change over the post-policy period.

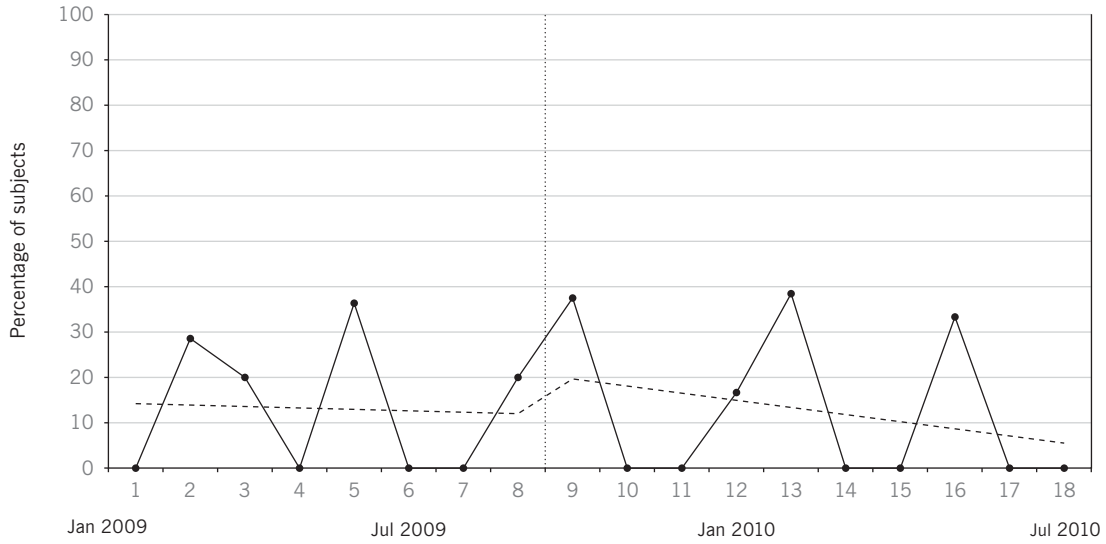
Overall, the percentage of subjects who were the targets of multiple Taser discharges in Month 18 (38.5% according to the post-policy trend line) was considerably lower than would have been predicted had the revised policy not been implemented and had the pre-policy trend continued (61.6%).

These results suggest that the revised policy may have had a small to moderate positive effect in reducing instances where multiple Taser discharges are targeted at the same person in the same incident.

Prolonged discharges

From the Taser data downloads, we were able to determine the percentage of subjects who were the targets of one or more prolonged discharges (any cycle greater than five continuous seconds). Our findings are illustrated in Figure 3.7.

Figure 3.7: Percentage of subjects who had a Taser deployed at them who were the targets of one or more prolonged Taser discharges by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of subjects between Months 1 and 8 = 72; total number of subjects between Months 9 and 18 = 69.

It can be seen that there was considerable variation from month to month in the percentage of subjects who were the targets of one or more prolonged Taser discharges; this variation is made particularly noticeable as we identified relatively few prolonged discharges. Nevertheless, Figure 3.7 shows that with regards to the percentage of subjects who were the targets of a prolonged discharge, there was:

- a downward trend of 0.3 per cent per month over the pre-policy period
- a 9.2 per cent increase immediately after the revised policy was introduced
- a 1.6 per cent per month decline over the post-policy period.

Overall, the larger decline over the post-policy period meant that slightly fewer subjects were the targets of a prolonged discharge in Month 18 (5.5% based on the post-policy trend line) than would have been expected if the revised policy had not been introduced and if the much smaller pre-policy decline had continued (8.9%).

These results suggest that, despite an initial increase in the percentage of subjects who were the target of a prolonged discharge after the revised policy was introduced, the revised policy was associated with a very small reduction in the frequency of these discharges over the longer term.

Simultaneous deployments

After examining the data downloads in conjunction with the TURs, we identified two incidents during the 18-month period of interest that may have involved more than one officer discharging a Taser at the same person at the same time — one in the pre-policy period and one in the post-policy period.[14] This indicates that simultaneous deployments were rare even before the revised policy was introduced and they continued to be uncommon.

14 Further information about the incident in the post-policy period is provided on page 70.

Effects on the characteristics of subjects involved in Taser deployments

Summary of discussion

There was a small reduction in the proportion of deployments against handcuffed subjects. Deployments against people of particularly small body mass continued to be rare. There was a very small reduction in the proportion of deployments against subjects who had been sprayed with OC spray. There was a moderate increase in the proportion of subjects who had a suspected mental health condition, and small increases in the proportions of subjects who had a suspected physical health condition or were believed to be under the influence of alcohol and/or drugs.

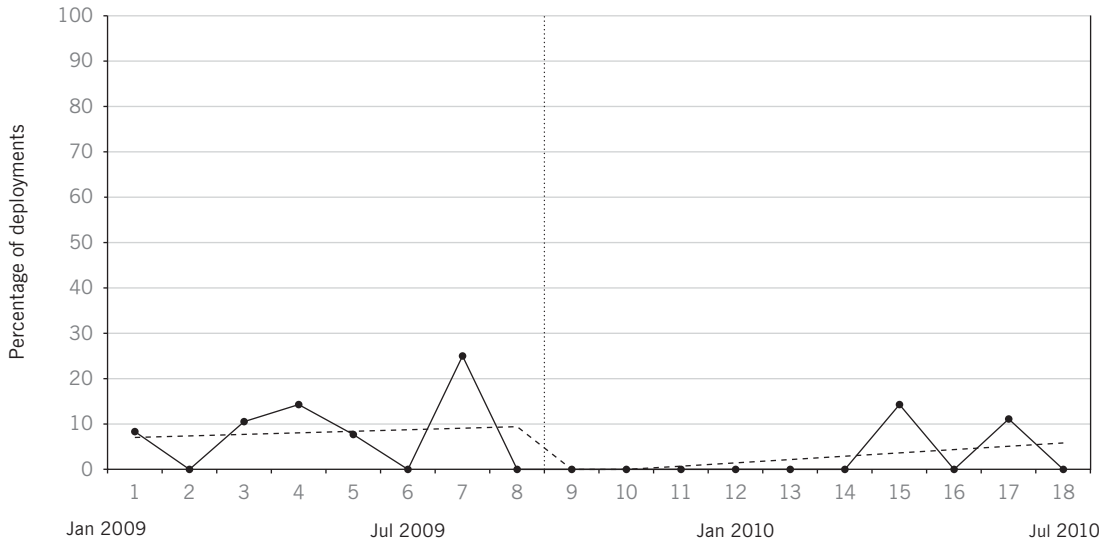
Handcuffed subjects

Figure 3.8 shows the percentage of deployments that involved a subject who was handcuffed at the time of the deployment.

Determining whether a subject was handcuffed

The TUR asks officers to record the other use of force options they used before using the Taser. In many cases, we found that the reporting officer indicated using handcuffs prior to using the Taser, but the narrative in the TUR showed that the subject was not actually handcuffed; rather, police had unsuccessfully attempted to handcuff the subject, or only one hand was restrained. In these cases, we did not regard the subject as being handcuffed. If the officer had indicated using handcuffs before the Taser but we were not able to determine from the narrative whether the subject was properly handcuffed, we regarded them as being handcuffed. It is possible, however, that some of these subjects were not actually handcuffed at the time of the Taser deployment.

Figure 3.8: Percentage of deployments that involved a subject who was handcuffed by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of deployments between Months 1 and 8 = 91; total number of deployments between Months 9 and 18 = 77.

The figure shows:

- an increasing trend of 0.3 per cent per month in the pre-policy period
- a 10.9 per cent drop after the revised policy was introduced, with no such deployments at all between Months 9 and 14
- an increasing trend of 0.7 per cent per month in the post-policy period; however, it is important to note that this trend is driven by the peaks in Months 15 and 17. As discussed in Chapter 4, there were actually only two Taser deployments against handcuffed subjects in the 10 months after the revised policy was introduced.

Overall, the percentage of deployments against a handcuffed subject in Month 18 (5.8% according to the post-policy trend line) was lower than would have been expected if the revised policy had not been implemented and the pre-policy trend had continued (12.8%).

These findings suggest that the revised policy was associated with a small reduction in Taser deployments against people who were handcuffed.

Subjects of particularly small body mass

We found only four subjects across the 18-month period of analysis who we regarded as being of 'particularly small body mass'.[15] Two were subjects in the pre-policy period, two were subjects in the post-policy period, and none were the target of an actual Taser deployment in probe or drive stun mode. The small number of these subjects makes it difficult to identify any real effect of the revised policy. However, the results suggest that officers are complying with the revised policy's restriction against Taser deployments on people of particularly small body mass, but that this is no different from the pre-policy period.

How we defined 'particularly small body mass'

On the TUR, officers are asked to estimate the subject's height and weight. As a proportion of all Taser subjects identified in the TURs, there were a considerable percentage of subjects (around 20%) for whom no height and weight were estimated. It is possible that, where estimates were provided, these were not particularly accurate. Nevertheless, this information gives some idea of where an incident involves a person of particularly small body mass.

For the purposes of our analyses, we considered a person to be of 'particularly small body mass' if they had an estimated body mass index (BMI) of 18.5 or less (based on the height and weight estimated by the reporting officer), which is typically considered underweight (Department of Health and Ageing 2006).

Subjects previously sprayed with OC spray

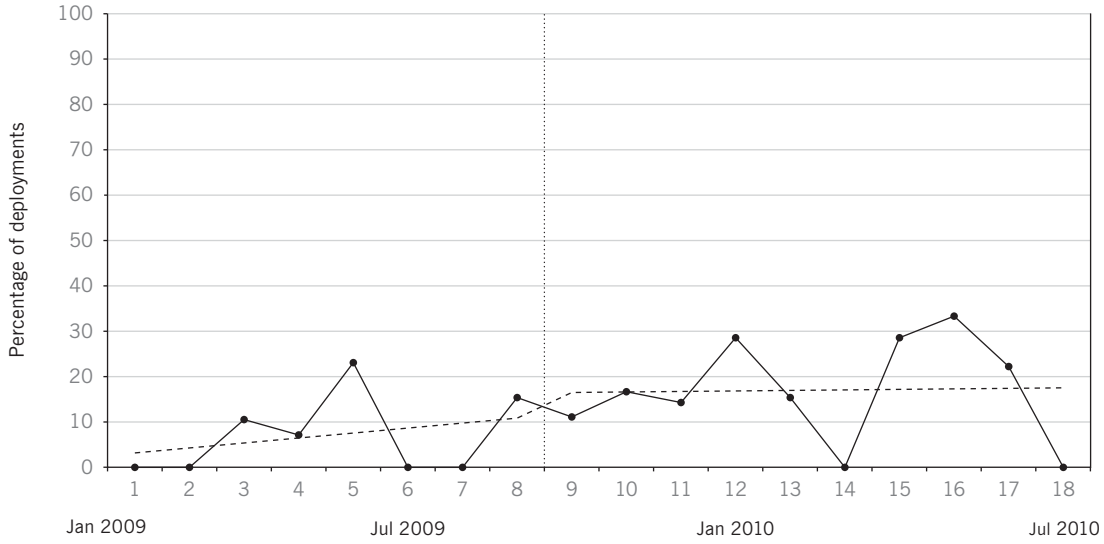
Figure 3.9 shows the percentage of deployments that involved a subject who had previously been sprayed with OC spray.

15 Best practice indicates that Taser policies should restrict the deployment of Tasers against people variously described as having 'a low BMI' or being of 'thin stature', 'very thin stature', 'small stature' or 'particularly small body mass', because of concerns that these people may be at a greater risk of suffering death or serious injury after a deployment (ACPO 2008; CCC 2010; Office of the Maryland Attorney General 2009; Robb et al. 2009).

Determining whether a subject had been sprayed with OC spray

As with handcuffs, there were many cases where the reporting officer indicated using OC spray before using the Taser, but the narrative in the TUR showed that the subject had not actually been sprayed; rather, police had merely presented the canister, or OC spray had been deployed against another person involved in the incident. In these cases, we did not regard the subject of the Taser deployment as having been sprayed with OC spray. If the officer had indicated using OC spray before using the Taser but we were not able to determine whether the subject was actually sprayed, we regarded them as having been sprayed, though it is possible that this was not the case in some instances.

Figure 3.9: Percentage of deployments that involved a subject who had been sprayed with OC spray by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of deployments between Months 1 and 8 = 91; total number of deployments between Months 9 and 18 = 77.

The figure shows:

- an increasing trend of 1.1 per cent per month over the pre-policy period
- a 5.5 per cent increase immediately after the revised policy was introduced
- a levelling off across the post-policy period.

Despite the increase immediately after the revised policy was introduced, a slightly smaller percentage of deployments in Month 18 (17.5% according to the post-policy trend line) involved a subject who had been sprayed with OC spray than would have been expected had the pre-policy increasing trend continued (21.8%).

These results show that the previously increasing trend in deployments against subjects who had been sprayed with OC spray stabilised in the 10 months after the introduction of the revised policy. This indicates that the revised policy may have had some minor positive effects over the longer term with regards to reducing deployments against these people.

With regards to multiple and prolonged discharges against subjects who had been sprayed with OC spray, we found that:

- five deployments (62.5%) in the pre-policy period involved multiple discharges against a subject who had been sprayed with OC spray, compared with four deployments (28.6%) in the post-policy period
- four deployments (50.0%) in the pre-policy period involved a prolonged discharge against a subject who had been sprayed with OC spray, compared with three deployments (21.4%) in the post-policy period.

The fact that multiple and prolonged discharges against subjects who had been sprayed with OC spray were uncommon even in the pre-policy period means that it is difficult for us to identify any real effect of the revised policy. However, it appears that fewer subjects sprayed with OC spray were the target of such discharges after the revised policy was introduced.

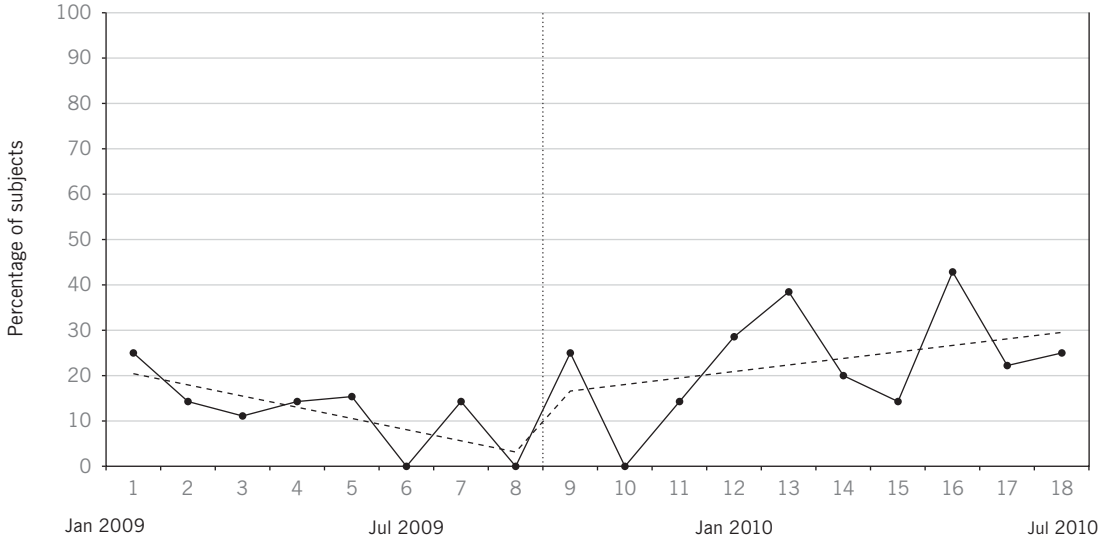
Subjects with a possible underlying medical condition

The TUR includes a section for the reporting officer to note any known or suspected medical conditions the subject has.

Mental health conditions

Based on this information, we examined trends over time in the percentage of subjects who had a Taser deployed at them who were suspected of having a mental health condition (see Figure 3.10).[16]

Figure 3.10: Percentage of subjects who had a Taser deployed at them who were suspected to have a mental health condition by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of subjects between Months 1 and 8 = 86; total number of subjects between Months 9 and 18 = 73.

16 Common mental health conditions considered here included depression, schizophrenia, bipolar disorder, post-traumatic stress disorder (PTSD), psychosis and other unspecified mental health problems.

With regards to the percentage of subjects who were suspected to have a mental health condition, Figure 3.10 shows:

- a downward trend of 2.5 per cent per month in the pre-policy period
- a 12.0 per increase immediately after the revised policy was introduced
- an upward trend of 1.4 per cent per month over the post-policy period.

The percentage of subjects who had a Taser deployed at them who were suspected of having a mental health condition was therefore considerably larger at Month 18 than would have been predicted from the pre-policy trend (29.5% versus 0.0%).

These findings indicate that the introduction of the revised policy was associated with a moderate increase in the percentage of subjects who had a Taser deployed at them who had a suspected mental health condition. It is possible that these results reflect a slight increase in the seriousness of situations in which Tasers are being used (for example, a trend towards more Taser deployments against people who have a mental health condition and are acting violently), particularly because of the higher threshold for use, or they might reflect a greater propensity among officers to record suspected mental health conditions.

With regards to multiple and prolonged discharges against subjects who were suspected to have a mental health condition, we found that:

- three (37.5%) of these subjects were the targets of multiple discharges in the pre-policy period, compared with nine subjects (50.0%) in the post-policy period
- none of these subjects were the targets of a prolonged discharge in the pre-policy period, compared with three subjects (16.7%) in the post-policy period.

This suggests that multiple and prolonged discharges against subjects suspected to have a mental health condition actually increased after the revised policy was introduced, despite the warnings it contains. Again, it could be that these findings reflect the seriousness of situations encountered by police. Further details about the circumstances surrounding some of these deployments are provided in Chapter 4.

Physical health conditions

Figure 3.11 illustrates trends over time in the percentage of deployment subjects who were suspected of having a physical health condition.[17]

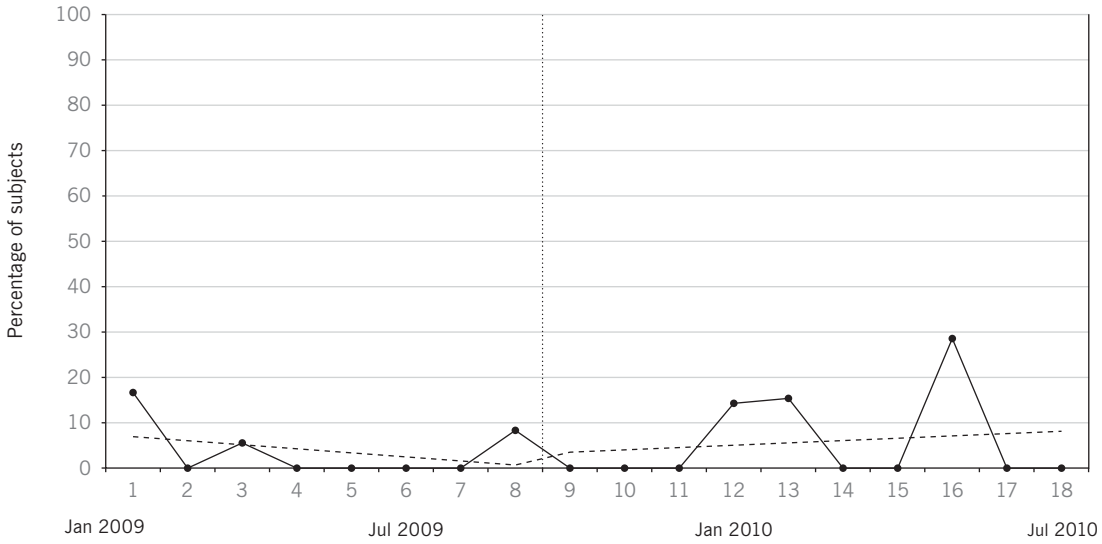
The figure shows:

- a decline of 0.9 per cent per month in the pre-policy period
- a 2.3 per cent increase immediately after the revised policy was introduced
- an increasing trend of 0.5 per cent per month over the post-policy period.

The percentage of subjects in Month 18 who had a possible underlying physical health condition (8.1% according to the post-policy trend line) was therefore somewhat larger than would have been expected if the revised policy had not been introduced and the pre-policy decline had continued (0.0%).

17 We considered here those reported physical health conditions that possibly have some bearing on how people respond to Taser deployments. These included heart conditions, asthma, epilepsy and histories of alcohol or other substance use or abuse (including where psychosis due to drug use was reported). Other physical health conditions sometimes reported by police, such as pre-existing lacerations, HIV and hepatitis C, were not considered here. It should also be noted that we did not regard alcohol and/or drug use immediately before the Taser incident as a 'physical health condition' as this was captured and examined separately.

Figure 3.11: Percentage of subjects who had a Taser deployed at them who were suspected to have a physical health condition by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of subjects between Months 1 and 8 = 86; total number of subjects between Months 9 and 18 = 73.

These findings suggest that the introduction of the revised policy was associated with a small increase in the percentage of subjects who had a Taser deployed at them who had a suspected physical health condition. Again, these findings might reflect an increasing tendency for reporting officers to record suspected physical health conditions when they deploy a Taser.

With regards to multiple and prolonged discharges against subjects who were suspected to have a physical health condition, we found that:

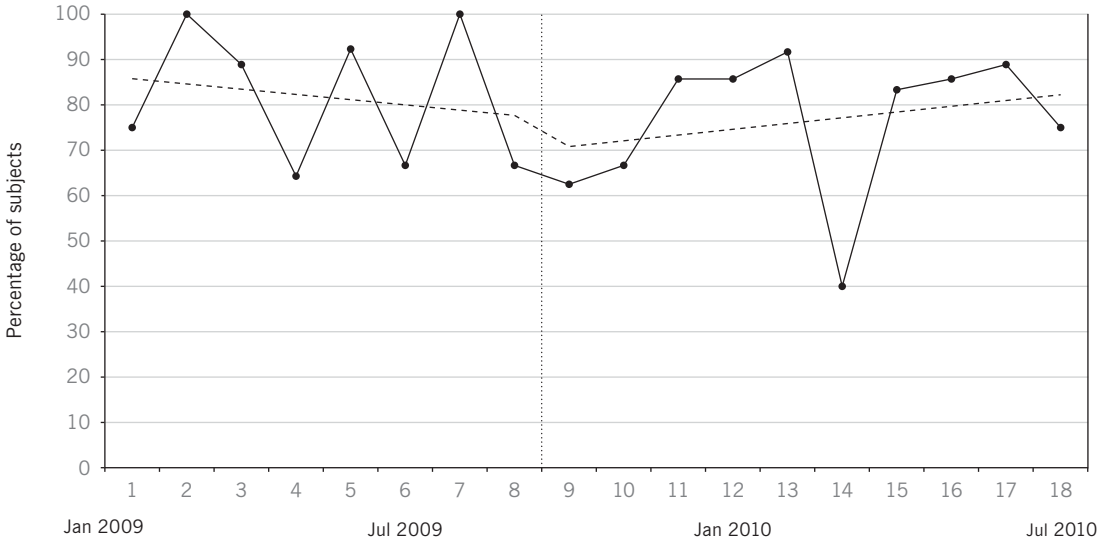
- none of these subjects were the targets of multiple discharges in the pre-policy period, compared with four subjects (80.0%) in the post-policy period
- none of these subjects were the targets of a prolonged discharge in the pre-policy period, compared with one subject (20.0%) in the post-policy period.

As for mental health conditions, this indicates that multiple and prolonged discharges against subjects with a suspected physical health condition actually increased after the revised policy was introduced. However, given the very small numbers of subjects reported to have a physical health condition, these changes might reflect, at least in part, changes in the propensity of officers to record these conditions on the TUR.

Subjects affected by alcohol and/or drugs

We examined trends over time in Taser deployments against subjects believed by the reporting officer to be under the influence of alcohol and/or drugs (prescription or illicit). Our findings are illustrated in Figure 3.12.

Figure 3.12: Percentage of subjects who had a Taser deployed at them who were believed to be under the influence of alcohol and/or drugs by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of subjects between Months 1 and 8 = 86; total number of subjects between Months 9 and 18 = 71.

The figure shows that there was considerable variation from month to month in the percentage of subjects who were believed to be under the influence of alcohol and/or drugs, particularly in the pre-policy period. However, it can be seen that there was:

- an overall decreasing trend of 1.2 per cent per month in the pre-policy period
- an 8.1 per cent decrease immediately after the revised policy was introduced
- an increasing trend of 1.3 per cent per month over the post-policy period.

Overall, a somewhat larger percentage of subjects who had a Taser deployed at them in Month 18 were believed to be under the influence of alcohol and/or drugs (82.2%) than would have been predicted based on the pre-policy trend (66.1%).

Despite the immediate decrease after the revised policy was introduced, the above findings altogether show a small increase over time in the percentage of Taser subjects who were suspected to be under the influence of alcohol and/or drugs.

On the one hand, this suggests that the guidance provided in the revised policy about possible adverse effects of Taser deployments on substance-affected individuals did not reduce Taser deployment against these people. On the other hand, our findings might reflect changes in the seriousness of situations in which Tasers were being deployed, particularly as a result of the higher threshold for use — that is, Tasers may increasingly have been deployed at subjects who were substance-affected and who, consistent with the common effects of alcohol and many illicit drugs, may have been especially aggressive.

With regards to multiple and prolonged discharges against subjects suspected to be under the influence of alcohol and/or drugs, we found:

- a small increase in the percentage of these subjects who were the targets of multiple discharges (from *n* = 18, 31.0% in the pre-policy period to *n* = 21, 39.6% in the post-policy period)
- no real change in the percentage of these subjects who were the targets of prolonged discharges (pre-policy: *n* = 11, 19.0%; post-policy: *n* = 9, 17.0%).

The relatively small numbers of subjects involved in these analyses should be kept in mind, however, as this makes it difficult to draw firm conclusions about the effects of the revised policy.

Effects on the medical assistance provided to subjects involved in Taser incidents who were suspected of having a mental health condition

Summary of discussion

There was a small increase in the proportion of subjects with a suspected mental health condition who received medical attention.

We attempted to examine the TURs to determine whether officers who had used a Taser against a person with a suspected mental health condition sought either assistance from the Queensland Ambulance Service (QAS) or some other kind of medical treatment for the subject, but information about QAS attendance and medical treatment was not consistently recorded. Our ability to assess this was therefore very limited.

However, a brief examination of the data indicated that just over half of subjects (51.9%, *n* = 28) with a suspected mental health condition in the pre-policy period received some kind of QAS or medical attention, compared with two-thirds of subjects (67.3%, *n* = 35) with a suspected mental health condition in the post-policy period. This suggests that, after the revised policy was introduced, officers may have increasingly sought medical assistance (either before or after the Taser was used) when incidents involved subjects with a suspected mental health condition.

Effects on the outcomes of Taser uses

Summary of discussion

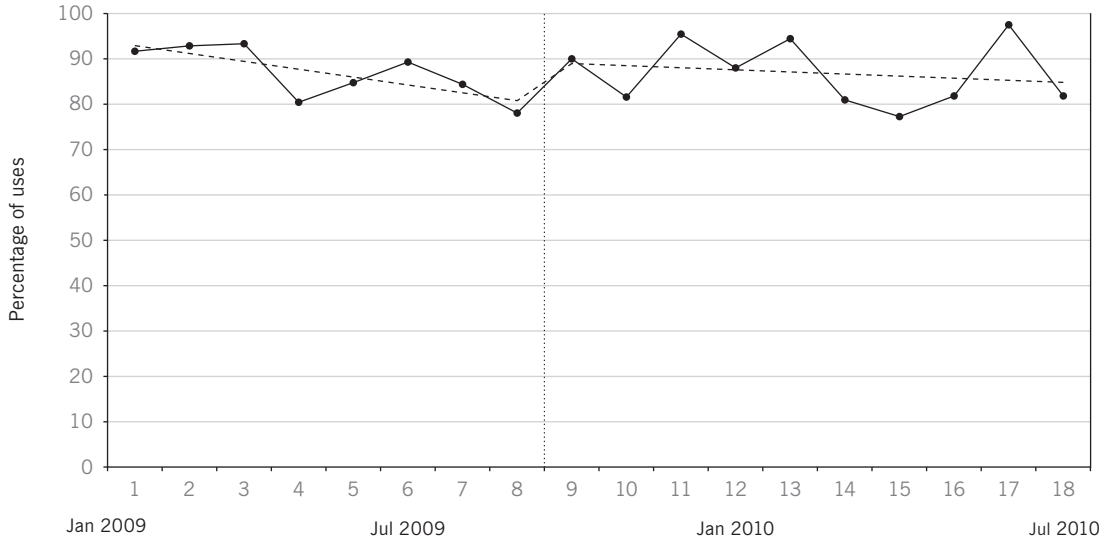
There was a small to moderate increase in the proportion of Taser uses judged effective. There were small reductions in the proportion of Taser incidents involving injuries to officers and in the proportion of subjects sustaining injuries after Taser deployments. However, despite the overall reduction in the rate of subject injuries, this again increased considerably over the post-policy period. There was a small increase in the proportion of Taser uses judged appropriate by the Significant Event Review Panels (SERPs).

Perceived effectiveness of the Taser

Officers are asked to indicate on the TUR whether they believed the use of the Taser was 'effective'. No definition of 'effective' is provided to guide officers' decisions, but presumably the use of the Taser would be deemed effective where it enabled the officer to safely control the subject and/or de-escalate and resolve the situation.

Figure 3.13 shows the percentage of Taser uses in each month that were judged effective by the reporting officer.

Figure 3.13: Percentage of Taser uses that were judged effective by the reporting officer by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of uses between Months 1 and 8 = 370; total number of uses between Months 9 and 18 = 300.

The figure shows:

- a decline of 1.7 per cent per month over the pre-policy period
- an 8.6 per cent increase immediately after the revised policy was introduced
- a decreasing trend of 0.5 per cent per month over the post-policy period.

Overall, the percentage of uses judged effective in Month 18 (84.8% according to the post-policy trend line) was considerably higher than what would have been expected had the revised policy not been implemented and had the pre-policy trend continued (63.4%).

These results suggest that the revised policy may have had some positive impact on the frequency with which officers perceived the use of the Taser to be effective in resolving incidents.

Injuries or other medical complications to subjects

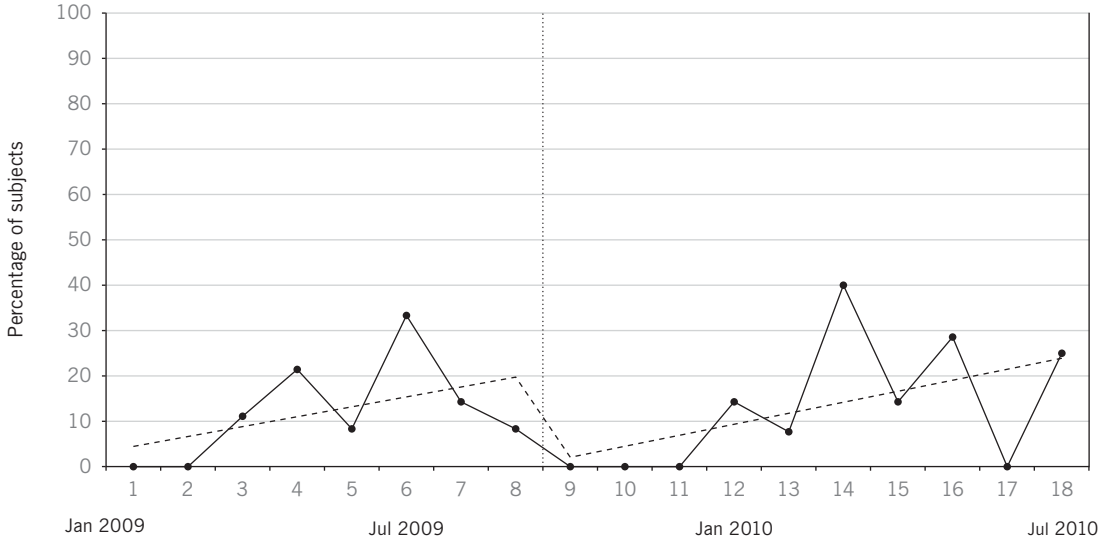
How we identified injuries to subjects

In examining possible indirect effects of the revised policy on injuries to subjects, we focused on injuries that clearly resulted from the Taser deployment (such as fall-related injuries) or other medical complications that might have been associated with the deployment (such as loss of consciousness or difficulty breathing). We excluded from our analysis minor injuries such as bruises, abrasions and lacerations that resulted from the Taser or its probes making contact with the subject's body.

It should be noted that, because of inconsistencies in the way subject injuries were recorded by officers in the multiple choice sections of the TUR (for example, reporting bruises from probes, not reporting notable injuries from Taser-induced falls), we have relied on information contained in the narrative sections of the TURs to identify subject injuries. This may have led us to underestimate the number of injuries sustained by subjects.

Figure 3.14 illustrates trends over time in subject injuries or medical complications caused by or possibly related to the Taser deployment. Note that we have excluded the death at Brandon (which occurred in Month 5) from these analyses.

Figure 3.14: Percentage of subjects who had a Taser deployed at them who sustained a possible Taser-related injury or complication by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of subjects between Months 1 and 8 = 85; total number of subjects between Months 9 and 18 = 73.

With regards to the percentage of subjects who had a Taser deployed at them who sustained a possible Taser-related injury or complication, the figure shows:

- an increasing trend of 2.2 per cent per month in the pre-policy period
- a 20.1 per cent drop immediately after the revised policy was introduced, with no injuries at all reported between Months 9 and 11
- an increasing trend of 2.4 per cent per month over the post-policy period.

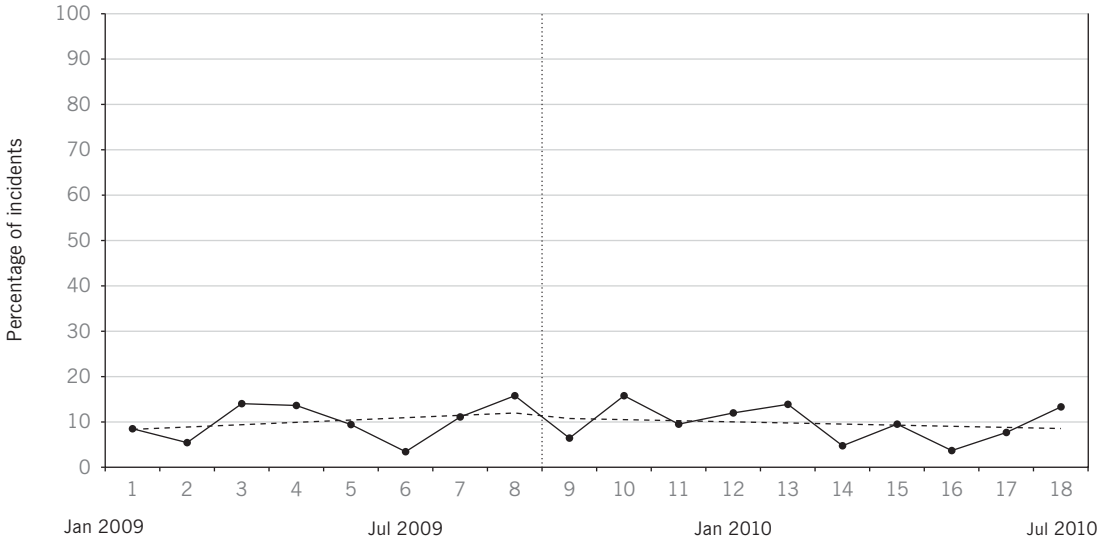
Despite the increasing trend over the post-policy period, the percentage of subjects who suffered an injury or other medical complication at Month 18 (23.9% according to the post-policy trend line) was still considerably lower than would have been expected had the revised policy not been implemented and had the pre-policy trend continued (41.6%). This is because of the noticeable decline immediately after the revised policy was introduced.

Altogether, these findings suggest that the revised policy was initially associated with a small to moderate reduction in the rate of subject injuries possibly related to Taser deployments, but that this then increased considerably over the post-policy period, at a rate similar to that seen in the pre-policy period.

Injuries to officers

Figure 3.15 shows the percentage of Taser incidents in each month that involved an injury to a police officer.

Figure 3.15: Percentage of Taser incidents that involved an injury to a police officer by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of incidents between Months 1 and 8 = 350; total number of incidents between Months 9 and 18 = 289.

The figure shows:

- an increasing trend of 0.5 per cent per month in the pre-policy period
- a 1.0 per cent reduction immediately after the revised policy was introduced
- a levelling off over the post-policy period.

Overall, a difference is evident at Month 18 in terms of the percentage of incidents involving officer injuries according to the post-policy trend line (8.6%) and the percentage of incidents that would have been expected to involve officer injuries if the revised policy had not been implemented and the pre-policy trend had continued (17.1%).

These findings suggest that the introduction of the revised policy was associated with a small reduction in the rate of officer injuries during Taser incidents.

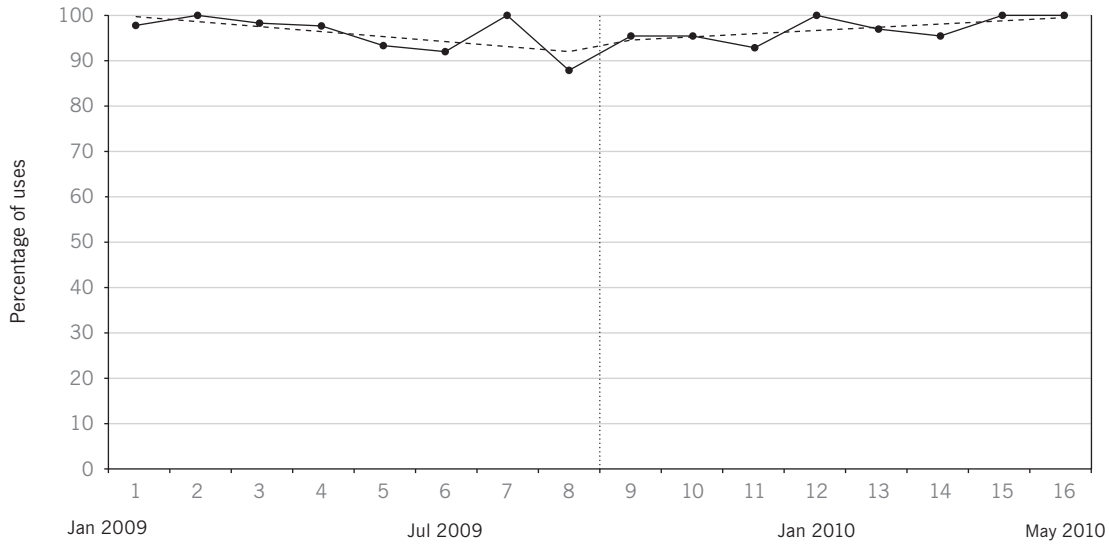
SERP findings

Figure 3.16 shows the percentage of Taser uses in each month that the SERP judged appropriate. We considered the SERP to have judged a Taser use appropriate if there were no adverse comments about the use in the SERP's written finding or recommendation (for example, 'Officers to be spoken to re: decision making', 'Guidance to be given re: policy', 'To participate in further Taser training as a priority').[18, 19]

18 We were able to locate a SERP judgment for 504 of the 609 uses reported between 22 January 2009 and 21 May 2010 (we did not have SERP findings for any of the uses in June or July 2010 because those uses were being reviewed at SERPs after our data request to the QPS). Generally, missing data about SERP judgments resulted from the SERP outcome not having been finalised yet, or a lack of information (for example, no officer name, incorrect dates) in the SERP reports that meant we could not accurately match reported uses with their SERP reviews.

19 It was not clear from the SERP reports, but it is possible that some uses received no adverse comments at the SERP because any problems had already been identified and addressed by lower-level reviews (see Chapter 5).

Figure 3.16: Percentage of Taser uses that were judged appropriate by the SERP by month, 22 January 2009 (start of Month 1) to 21 May 2010 (end of Month 16)



Source: QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.
Total number of uses between Months 1 and 8 = 331; total number of uses between Months 9 and 16 = 173.

With regards to the percentage of Taser uses judged appropriate by the SERPs, Figure 3.16 shows:

- a decline of 1.1 per cent per month over the pre-policy period
- a 1.8 per cent increase immediately after the revised policy was introduced
- an increasing trend of 0.7 per cent per month over the post-policy period.

Overall, the percentage of uses judged appropriate at Month 16 (99.5% based on the post-policy trend line) was somewhat higher than would have been predicted if the revised policy had not been introduced and the pre-policy trend had been sustained (83.2%).

This pattern of results suggests that the introduction of the revised policy was associated with an increased number of Taser uses being regarded as appropriate by the SERPs.

Effects on Taser-related complaints to the CMC

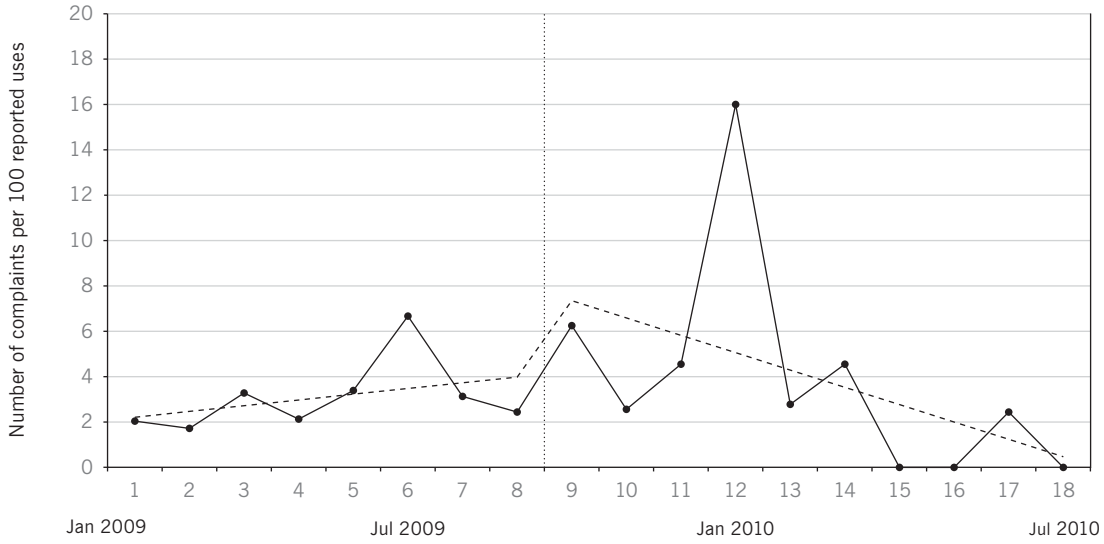
Summary of discussion

There was a slight reduction in the number of Taser-related complaints to the CMC per 100 reported Taser uses. Complaints about excessive Taser use especially appeared to decrease.

Number of complaints

We examined all Taser-related complaints received by the CMC in the period of interest that contained at least one allegation relating to the operational use of Tasers against members of the public.[20, 21, 22] Figure 3.17 shows for each month the number of complaints received by the CMC per 100 reported Taser uses.[23]

Figure 3.17: Number of Taser-related complaints received by the CMC per 100 reported Taser uses, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)



Source: CMC complaints data and QPS Taser usage data.

Notes: The vertical dotted line between Months 8 and 9 denotes the introduction of the QPS's revised Taser policy.

Total number of complaints between Months 1 and 8 = 11; total number of complaints between Months 9 and 18 = 11.

With regards to the number of complaints per 100 reported Taser uses, the figure shows:

- an increasing trend of 0.3 complaints per month in the pre-policy period
- an increase of 4.1 complaints immediately after the revised policy was introduced
- a decreasing trend of 0.8 complaints per month over the post-policy period.

By Month 18, there was less than 1.0 complaint per 100 reported uses, compared with the 6.5 complaints per 100 uses that would have been expected if the revised policy had not been introduced and the pre-policy trend had been maintained.

20 A complaint may contain one or more allegations.

21 We identified 12 complaint files (including one related to the death at Brandon) from the eight pre-policy months and 11 complaint files from the 10 post-policy months. We also identified five complaints about the use of Tasers in non-operational settings or other breaches of QPS Taser policy. These related to such incidents as the unauthorised use of Tasers on police officers and staff members, the carriage of a Taser by an officer not qualified to carry the weapon, and the loss of a Taser from an officer's belt during a search in bushland. We have not included these complaints in our analyses.

22 For four complaints, the date of the alleged incident was not recorded in the complaint file. We have included each of these complaints in a particular month based on the date it was received by the CMC, although it is possible that the actual incident occurred outside that month.

23 We did not include a complaint file related to the death at Brandon (which occurred in Month 5) in our analysis.

These findings suggest that, although there was initially an increase in complaints to the CMC after the revised policy was introduced, over the longer term the revised policy may have had some slight positive effect in reducing the number of Taser-related complaints to the CMC.

Nature of complaint allegations

We categorised the nature of each complaint allegation based on the information available in the CMC complaint file. In doing this, we focused on what appeared to be the complainant's key concern about the officer's behaviour. We found that each allegation could be grouped into one of five broad categories (see the following box).[24]

Categories of Taser-related allegations

1. *Inappropriate verbal threat to use a Taser.* The complainant believed the officer behaved inappropriately in verbally threatening to use a Taser (without drawing or displaying the weapon)[25] (*n* = 10 complaints containing at least one such allegation).
2. *Inappropriate display of a Taser.* The complainant believed the officer drew their Taser and pointed it at a person without justification (for example, the person was not a threat) (*n* = 3).
3. *Excessive deployment of a Taser.* The complainant believed the officer deployed the Taser in an excessive manner. This included allegations where the complainant believed the officer had no reason to deploy their Taser at all (for example, the person was not a threat, or could have been restrained less forcefully) and/or unnecessarily discharged their Taser on multiple occasions or for a prolonged period (*n* = 9).
4. *Inappropriate deployment of a Taser on a person with a mental health condition.* The complainant believed the officer's deployment of the Taser was inappropriate because the subject had a mental health condition (*n* = 3).
5. *Inappropriate deployment of a Taser where there was a risk of secondary injuries.* The complainant believed the officer's deployment of the Taser was inappropriate because the subject was in a location where there was a risk of secondary injuries (*n* = 1).

Because of the small number of allegations in each category, we were not able to examine trends over time. We therefore compared the total number of complaints in each of the two periods (before the revised policy was introduced, and after the revised policy was introduced), and found that there was a moderate decrease in the percentage of complaints that involved an allegation of officers deploying a Taser in an excessive manner (down from 54.5%, *n* = 6 to 27.3%, *n* = 3). We also found small decreases in the percentage of complaints involving an allegation of officers deploying a Taser:

- in a way perceived to be inappropriate because the subject had a mental health condition (down from 18.2%, *n* = 2 to 9.1%, *n* = 1)
- where there was a risk of secondary injuries (down from 9.1%, *n* = 1 to 0).

Nevertheless, there were small increases in the other two categories:

- complaints involving an allegation about an *inappropriate verbal threat to use a Taser* increased from 36.4 per cent of complaints (*n* = 4) to 54.5 per cent (*n* = 6)[26]
- complaints involving an allegation about an *inappropriate display of a Taser* increased from 9.1 per cent of complaints (*n* = 1) to 18.1 per cent (*n* = 2).

24 These allegation categories were developed from the information contained in the complaint file and do not correspond to the official allegation types and subtypes used by the CMC.

25 In some cases, it could not be determined whether the Taser had been drawn and pointed at a person. If there was no explicit indication that the Taser had been pointed at a person, the allegation was classified as involving a verbal threat of use only.

26 Note that when the post-policy period was reduced to eight months to match the length of the pre-policy period, this increase was from 36.4 per cent (*n* = 4) to 50.0 per cent (*n* = 5).

We also examined the number of incidents complained about that allegedly involved the person being exposed to more than one Taser discharge (either by the same officer or by multiple officers) during an incident. We found only one incident in the post-policy period that allegedly involved multiple discharges, compared with six incidents in the pre-policy period. There was, however, also one incident in the post-policy period that allegedly involved a prolonged Taser discharge, compared with none in the pre-policy period.

As far as recorded complaints reflect actual Taser use, these findings suggest that the introduction of the revised policy may have had some small influence on reducing the excessive use of Tasers by QPS officers, particularly in terms of reducing multiple discharges. Of course, other explanations are possible. In particular, the changes across all categories are small and may represent natural fluctuations in complaint numbers.

Key findings from this section

- The revised Taser policy appeared to have some positive effects on the number and context of operational Taser uses, including:
  - a considerable reduction in the number of Taser uses, particularly presentations and probe mode deployments
  - a small increase in the percentage of uses that reportedly involved a subject who posed a risk of serious injury to a person.
- Following the introduction of the revised policy, there was a small to moderate reduction in the percentage of subjects who were the target of multiple Taser discharges, and a very small reduction in the percentage of subjects who were the target of prolonged Taser discharges.
- The introduction of the revised policy was associated with a small but noticeable reduction in Taser deployments against handcuffed subjects.
- The revised policy may have had some indirect positive effects on the outcomes of Taser uses, including:
  - a small to moderate increase in the frequency with which officers perceive the use of the Taser to be effective in resolving incidents
  - an immediate reduction in the number of subject injuries or medical complications possibly related to Taser deployments
  - a small reduction in the rate of officer injuries during Taser incidents
  - a small reduction in the number of Taser uses which the SERPs had concerns about
  - a slight reduction over the longer term in the number of Taser-related complaints to the CMC.
- Taser deployments (including multiple and/or prolonged discharges) in the post-policy period were generally *more* likely than those in the pre-policy period to involve a subject who was suspected to have a mental or physical health condition, or believed to be under the influence of alcohol and/or drugs.
- The rate of subject injuries and medical complications possibly related to Taser deployments increased considerably over the 10 months following the introduction of the revised policy.

Effects of the revised training on the use of Tasers

This section examines the effects of the revised training on the use of Tasers by QPS officers. As discussed in Chapter 2, we looked for effects of the revised training on:

- the context of Taser uses, in terms of the officer's threat assessment, the subject's behaviour before the use of the Taser and the presence of a weapon
- the extent to which Tasers were deployed during incidents, in terms of multiple and prolonged discharges
- the characteristics of subjects involved in Taser deployments, in terms of handcuffed subjects, subjects of particularly small body mass, subjects previously sprayed with OC spray, subjects with a possible underlying medical condition, and subjects affected by alcohol or drugs
- the outcomes of Taser uses, in terms of the perceived effectiveness of the Taser, injuries to subjects, injuries to officers, and the appropriateness of Taser uses as judged by the SERPs.

Methodological note

Using information obtained from QPS TURs, SERP reports and Taser data downloads, we examined whether the introduction of the revised Taser training had the expected effects proposed in Chapter 2.

Developing groups for comparison

As mentioned in Table 2.2, the revised Taser training went through somewhat of a phased rollout from late 2009, when Taser instructors began completing updated instructor courses in preparation for the revised Taser user courses in 2010. The problem therefore was that there was not one specific date where we could say that all uses before this time were by officers trained under the old scheme, and that all uses after this time were by officers trained through the revised courses.

To examine the effects of the revised training, we identified all Taser uses that occurred in the 10 months after the introduction of the revised policy on 22 September 2009 (this avoids the problem of uses having occurred under different policies). In some cases, it was clear from the TUR that the reporting officer was not the officer who used the Taser; in these cases, the details of the using officer were recorded if they were available elsewhere on the TUR, or the use was deleted from our analyses. We then selected a random sample of 220 of these 304 uses,[27] and requested that the QPS provide us with the date of the last Taser training course attended by the officer involved (as either a user or an instructor) before the Taser use in question.

From the information provided by the QPS, we were able to categorise most uses as by an officer who had received the revised Taser training ('revised training group') or by an officer who had not received the revised Taser training ('old training group').[28] Our final sample consisted of 86 uses by officers in the revised training group and 127 uses by officers in the old training group. We then compared the Taser uses, subjects and incidents that involved officers in each of these two groups to examine the possible effects of the revised training on the operational use of Tasers.

Statistical significance tests

We relied on statistical significance tests called the *chi-square test for independence* and *Fisher's Exact Test*. These allowed us to determine whether any differences in Taser use by officers who had received the revised Taser training, compared with officers who had not, may have arisen by chance.

27 We drew a stratified random sample to ensure that the proportions of presentations, probe deployments, drive stun deployments and probe and drive stun deployments included in our sample reflected the respective proportions in the population of total Taser uses.

28 The remaining uses could not be categorised as information about the officer's training was not available in Advance2, or the information we received appeared to be incorrect (see Appendix 1 for more information).

Despite our predictions, we found only one significant difference between the two groups of officers (see Appendix 6 for the full results of our analyses).[29] This indicated that Taser uses by officers in the old training group (55.0%, *n* = 66) were more likely to involve a subject who was seen or reported to be armed when compared with uses by officers in the revised training group (39.0%, *n* = 32). This may suggest that officers in the old training group were responding to more 'serious' situations; it may also suggest, however, that officers who received the revised training were more aware of the limitations of Tasers and the undesirability, in some circumstances, of using Tasers to deal with subjects who are armed or believed to be armed. Nevertheless, the absence of any other significant differences indicates that officers who had completed the revised training were not using Tasers any differently from officers who had only completed previous training courses.

Although we cannot conclude that the revised training had any positive effects on the way officers use Tasers, this may be due to factors other than the training itself. In particular, it is likely that training has less influence on the operational use of Tasers than policy. It may be unreasonable to expect too much difference between the two groups when it comes to deploying Tasers on handcuffed subjects, for instance, when this is generally prohibited by policy. It is also important to reiterate that some key aspects addressed by the revised Taser training (such as the need to avoid multiple or prolonged discharges wherever possible) were already dealt with in the old training, though in less formalised ways.

Our ability to identify positive effects of the revised training may also have been adversely affected by our data and analyses. For example, possible inaccuracies in our data may have led to some officers being incorrectly allocated to the old training group when they had in fact received the revised training (see Appendix 1). This may have served to 'improve' the outcomes for the old training group and reduce the likelihood of us finding differences in favour of the revised training group. Another possibility is that we were prevented from detecting small effects of the revised training on officers' use of Tasers because of small sample sizes in some of our analyses.

In theory, Taser training should have an effect on the operational use of Tasers by first influencing officers' knowledge, skills and confidence with the weapon. A major limitation of our analyses is that we cannot know whether the revised training does this more effectively than the old training because trainee evaluations are not currently included in the QPS's Taser courses. This is a shortcoming. Best-practice Taser training — and training of any kind — should include a mechanism by which trainees can provide feedback about the appropriateness and effectiveness of the training they receive, to identify aspects that could be improved. We acknowledge the QPS's commitment to identifying gaps in Taser training through a recent training audit,[30] but argue that regular monitoring and evaluation of the effectiveness of the QPS's Taser training, including the collection of trainee feedback, should allow any benefits of the current training to be better assessed over the long term.

29 For statistical significance tests, a 'significant' finding refers to one that was statistically significant at the .05 level. This means that the likelihood of the difference being due to chance alone is no more than 5 per cent.

30 As part of the QPS's review of multiple and prolonged deployments (see pp. 68-9), an audit was conducted of the Taser training provided across the districts. The aim of this was to determine the level of curriculum compliance across the QPS and identify possible improvements to Taser training. The audit found that some district instructors were not complying with the training schedule developed by OST, instead modifying the training to suit local requirements. The report noted that annual audits should be conducted by OST to ensure that slippage in training is limited. The audit also found that district instructors need to be provided with better support (such as improved training resources) and trained to develop skills in delivering training rather than just the technical skills required to use a Taser.

Recommendation 3

That the QPS:

a. develop a short trainee evaluation form that officers can complete at the end of each Taser training course; the form should include enough questions to allow the QPS to assess trainees' views about the appropriateness and effectiveness of Taser training and identify aspects of the training that might be improved, particularly in light of trainees' operational experiences

b. ensure that trainee feedback is included in part of a program of ongoing evaluation of Taser training designed to ensure that QPS Taser training courses are current, relevant and consistent with best practices.

Key findings from this section

- Officers who had completed the revised Taser training did not use Tasers any differently in operational situations when compared with officers who had not completed the revised training.
- The apparent lack of positive effects associated with the revised training may be explained by several factors unrelated to the training itself, including inaccuracies in our data, small sample sizes, and the possibility that policy has a greater influence than training on the operational use of Tasers.

4

EVALUATION OF TASER USE SINCE THE INTRODUCTION OF THE REVISED POLICY

This chapter focuses on Taser use in the QPS since the revised policy was introduced. More specifically, it examines:

- the nature of Taser uses by QPS officers in the 10 months after the policy was introduced
- emerging trends in the use of Tasers by QPS officers, including mission creep.

Key findings from the chapter are:

- Three-quarters of all operational Taser uses in the QPS involved the presentation of the Taser without deployment.
- Very few operational Taser deployments in the QPS were in drive stun mode.
- There is a considerable problem with accidental Taser deployments in the QPS, with these accounting for over 10 per cent of all reported Taser uses in the period we examined.
- Around 40 per cent (n = 28) of people who had a Taser deployed at them in the 10 months after the introduction of the revised policy were the target of multiple and/or prolonged Taser discharges. In half of these cases, the Taser was discharged twice.
- Indigenous Queenslanders were over seven times more likely than non-Indigenous Queenslanders to be involved in a Taser incident, accounting for over 20 per cent of Taser subjects.
- Over 10 per cent (n = 8) of people who were the target of a Taser deployment in the 10 months following the introduction of the revised policy sustained an injury or experienced some kind of medical complication after the Taser deployment. Half of these people sustained injuries after falling on hard surfaces while incapacitated by the Taser, including one person who lost three teeth.
- The Taser usage data provide no concrete evidence of mission creep in terms of Tasers being used in less serious situations, replacing other use of force options or being used earlier in policing interactions.
- Anecdotal information from some QPS officers and CMC complaints data suggest that some police may increasingly be using the threat of the Taser to control situations without actually presenting or deploying the weapon, thereby circumventing usual reporting and review processes.
- The data suggest that there is a trend for Taser deployments to increasingly involve people who are believed to have an underlying mental or physical health condition, or to be under the influence of alcohol and/or drugs.

Taser use since the introduction of the revised policy

This section provides a more detailed examination of those Taser uses that occurred in the 10 months between the introduction of the revised policy on 22 September 2009 and 21 July 2010. In particular, it describes the:

- number and nature of Taser uses
- context of Taser uses
- extent to which Tasers were deployed during incidents
- characteristics of subjects involved in Taser incidents
- outcomes of Taser uses.

Where relevant, we assess these uses in light of key requirements of the QPS Taser policy, paying particular attention to uses that might deviate from policy requirements. We also highlight uses that indicate ways to improve QPS policy and training.

Methodological note

Number of cases

We identified 329 incidents in which a Taser was used in the 10-month period of analysis. These incidents involved 348 uses and 309 subjects.[31] The number of uses and the number of subjects are different from the number of incidents as one incident may involve one or more uses and zero (in the case of accidental deployments) or more subjects.

Missing data

Cases with missing data were deleted on an analysis by analysis basis, so total sample sizes vary slightly between analyses.

Number and nature of Taser uses

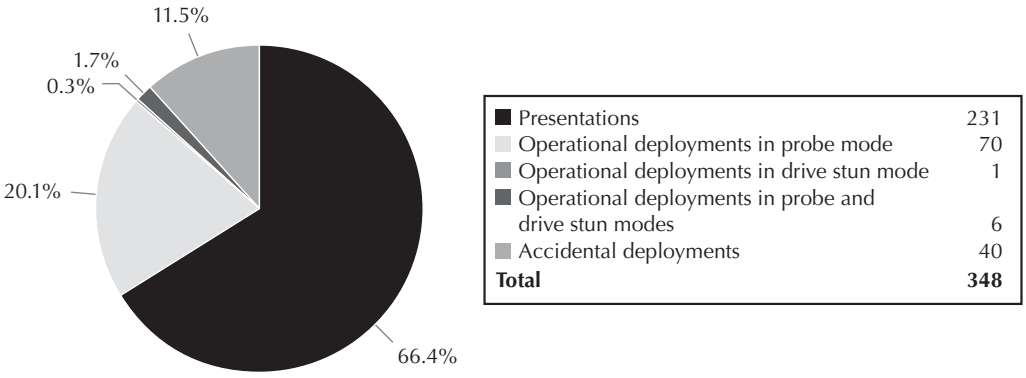
Summary of discussion

On average, there were 34.8 Taser uses a month in the QPS. Three-quarters of all operational Taser uses involved the presentation of the Taser without deployment. Very few operational Taser deployments were in drive stun mode; however, to reflect best practice, we recommend that the QPS policy explicitly prohibit drive stun deployments unless exceptional circumstances exist.

There is a considerable problem with accidental Taser deployments in the QPS, with these accounting for over 10 per cent of all reported Taser uses.

Tasers were used 348 times in the 10-month period of analysis, an average of 34.8 uses a month. Figure 4.1 shows the breakdown of the 348 uses by type.

Figure 4.1: Breakdown of Taser uses



There are a few important findings here. First, it is positive that most operational uses (75.0%) involved the presentation of the Taser without deployment. This suggests that simply presenting the Taser is usually enough to resolve the situation. This may reflect growing awareness among members of the public about the capabilities of the weapon and a strong desire to avoid its effects. Some QPS instructors also indicated an increased focus in training on the verbal communication accompanying the presentation of a Taser, which may help to explain why most situations are being resolved without officers needing to deploy the weapon.

31 The figure of 309 subjects excludes information from one Taser use against a dog and two Taser uses (presentations) against large groups of people where individual subjects were not identifiable.

Second, only a very small proportion of operational uses (2.2%, *n* = 7) involved the deployment of the Taser in drive stun mode. This is a very positive finding, particularly given that there were some signs of an over-reliance on drive stuns during the initial Taser trial and the early stages of the rollout. This problem was recognised by the QPS and addressed by training changes in early 2009. It is now heavily emphasised in training that drive stun mode is not a lesser use of force option, does not immobilise a person and should only be used to complete an incapacitation circuit.

Along these lines, our review of best practice showed that there has been a move in some Australian and overseas jurisdictions — such as Western Australia (WAPOL 2010), Victoria (Federation of Community Legal Centres (Victoria) 2010) and Ontario, Canada (Ontario Policing Standards Advisory Committee 2009) — to prohibit officers from deploying a Taser in drive stun mode unless in exceptional circumstances or when necessary to complete the circuit. These moves are consistent with recommendations from several recent reports into Taser use, including WAPOL's (2010) post-implementation review of Tasers and a report by the Office of the Maryland Attorney General (2009; see also Cronin & Ederheimer 2006; PERF 2005). Although our findings show that the QPS does not currently have a problem with a high rate of drive stuns, the CMC recommends that the QPS Taser policy explicitly prohibit drive stun deployments unless in exceptional circumstances, to ensure consistency with current best practice.

Recommendation 4

That the QPS Taser policy (Section 14.23 of the OPM) be amended to explicitly prohibit the deployment of Tasers in drive stun mode unless exceptional circumstances exist.

Third, there is a considerable problem with accidental Taser deployments in the QPS, with these accounting for over 10 per cent of all reported Taser uses in the period examined. Mostly, accidental deployments occurred inside police stations when officers were conducting their start of shift procedures, 'spark testing' the Taser while a cartridge was still attached and accidentally deploying the probes.[32] A few accidental deployments also occurred in operational settings, where the trigger was accidentally bumped while the Taser's safety device was deactivated.

To date, no injuries or major property damage have been reported as a result of accidental deployments. However, the number of accidental deployments recorded in these 10 months does raise some concerns from a financial and resourcing point of view given that Taser cartridges are not reusable.

The QPS is well aware of the problems it has with accidental deployments, stating in its submission that they 'continue to be a concern'. In early 2010, a flowchart was developed for display in all police stations, illustrating the station load/unload procedure in an attempt to prevent officers from spark testing the Taser with the cartridge attached. Station load/unload procedures are also a key focus of Taser training, comprising around 2.5 hours of the initial user course.

Furthermore, accidental deployments are reviewed in the same way as other Taser uses (see Chapter 5). Our review of SERP reports indicated that individual officers responsible for accidental deployments generally have their Taser qualifications suspended until they receive managerial guidance and/or re-training in station procedures. Improvements to station procedures are also considered where necessary.

32 A 'spark test' involves activating the Taser for one second to ensure that it is functioning correctly. This should be done without the cartridge attached, as this is where the Taser's wires and probes are fired from.

The QPS also commissioned QRMC Risk Management to conduct a risk assessment in relation to accidental deployments during the station load/unload procedure. This assessed the risk of physical damage to property or the officer involved as 'low' and the risk of physical damage to another person as 'medium', largely because the station load/unload procedure is usually undertaken in a designated location designed to prevent injury and minimise property damage.

It appears that accidental deployments have mostly resulted from officers not following the correct procedure — for example, having a lapse in concentration, or accepting a loaded Taser from another officer at the change of shifts rather than retrieving a Taser and cartridges separately from the Taser safe as required. The QRMC report recommended that the problem of accidental deployments may therefore be further dealt with by increasing management supervision of the load/unload procedure. The CMC supports this as a means of minimising the likelihood of officers accidentally deploying their Tasers as a result of failing to comply with proper start of shift procedures.

The QPS submission to our evaluation also noted that the QPS has recently purchased an additional 4500 Taser holsters to ensure that all Taser users have personal-issue holsters. The QPS expects that this will reduce the number of accidental deployments by preventing officers from handing over loaded Tasers already secured in their holsters at the change of shifts. The CMC is unconvinced that personal-issue holsters will actually reduce accidental deployments, since they will not prevent officers from handing over loaded Tasers (that are not secured in holsters). The QPS should continue to monitor the number of accidental deployments to see whether attempted solutions to date and the introduction of personal-issue holsters have any positive effects.

Context of Taser uses

This section briefly describes why Tasers were used by police over the 10-month period of analysis. These analyses are based on 289 incidents involving 308 operational uses, and focus on the officer's threat assessment and the subject's behaviour before the use of the Taser.

Summary of discussion

Over 96 per cent of Taser uses involved a subject perceived by the reporting officer to pose a risk of serious injury to a person. According to the TURs, almost 25 per cent of uses involved a subject whose behaviour was perceived as posing a threat to police (for example, signs the subject was preparing to fight police), and around 17 per cent involved a subject who was armed and behaving in a way that signalled a threat to a person.

Although most uses appeared to involve a subject whose reported behaviour suggested a risk of serious injury to a person, a small number did not. These included two uses against subjects who appeared to be merely running away from police and four uses that appeared to be because the subject failed to comply with police directions.

We also identified two uses where the Taser appeared to have been produced because of pre-existing information about the subject, and four uses inside watch-houses. The CMC sees these as 'grey areas' of Taser use; we believe that the SERPs should especially give extra scrutiny to uses based primarily on pre-existing information about the subject.

These uses also indicate that the existing QPS threshold for Taser use is not as restrictive as might be expected. Considering that the QPS has a 'medium-level' threshold for Taser use when compared with other jurisdictions, and given recent moves by other jurisdictions to raise their thresholds, the QPS should also consider reviewing its threshold for use.

The officer's threat assessment

For 307 uses, we were able to determine whether the use involved a subject who the reporting officer believed posed a risk of serious injury to police, another person and/or themselves. We found that over 96 per cent of uses (96.4%, *n* = 296) did in fact involve a subject who was perceived by the officer to pose a risk of serious injury. This high proportion is to be expected given that the QPS Taser policy authorises the use of the Taser only when this threshold is satisfied. However, the fact that 3.6 per cent of uses (*n* = 11) were reported by officers to *not* involve a subject who posed a risk of serious injury seems a matter of concern.

We further examined these 11 uses and found that:

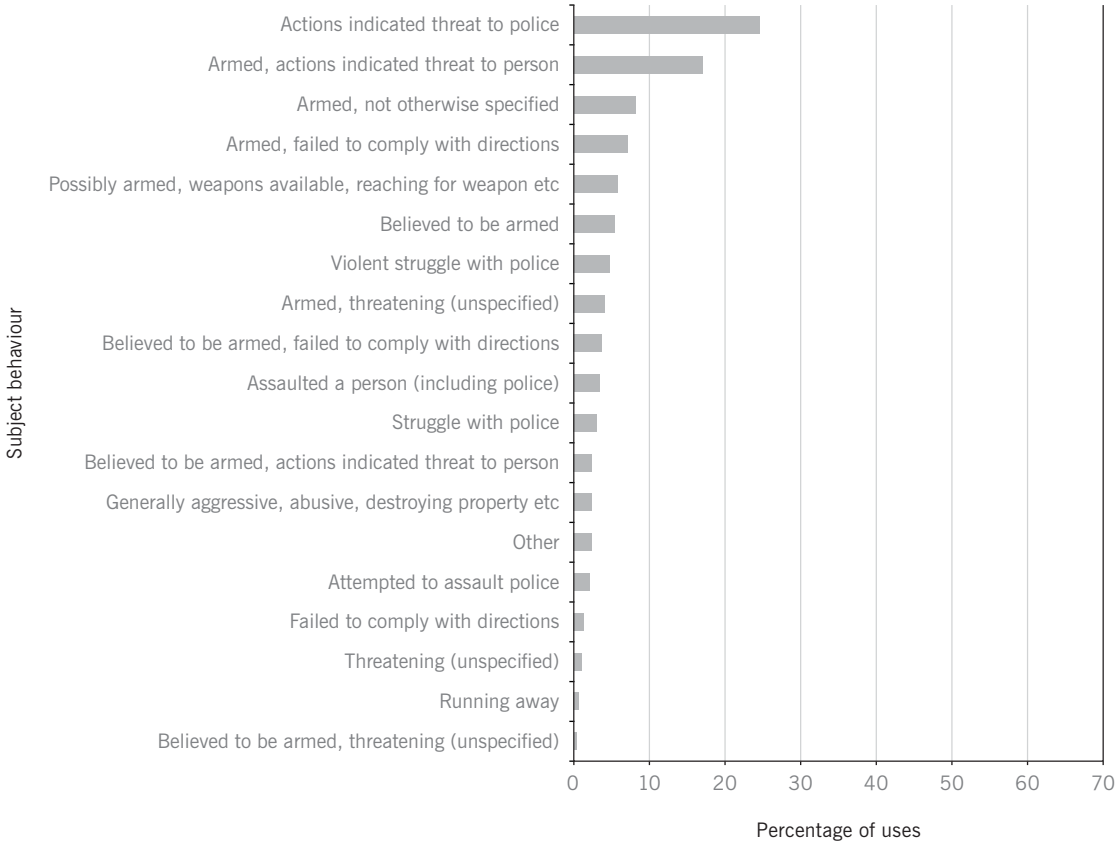
- All 11 uses occurred between 22 September 2009 and 23 December 2009, the three months immediately after the revised policy was introduced. As mentioned on page 29, the QPS was not able to advise us when the wording of the TUR was changed from 'attempt to assault a person or commit self-harm' to 'risk of serious injury to a person'. It is therefore possible that these 11 uses occurred before the wording was changed.
- Further examination of the 11 uses and the officer's description of the subject's behaviour showed that eight of the uses involved circumstances that suggested the subject may have posed a risk of serious injury. For instance, three subjects were armed, one subject was believed to be armed and one was violently struggling with police. Furthermore, all seven of the uses for which SERP findings were available were judged appropriate.

However, we also identified three uses that were more questionable — one involved a subject who was failing to comply with directions, one involved the presentation of the Taser during an attempt to make the subject exit their vehicle, and one involved the presentation of the Taser because of current intelligence about the subject. These circumstances, together with the officer stating that the subject did not pose a risk of serious injury, raise questions about whether the uses complied with the threshold for use contained in the QPS policy. These uses are discussed in more detail below as Cases 3, 13 and 7 respectively.

The subject's behaviour before the use of the Taser

As described on page 30, we used the information provided by officers in the narrative sections of the TURs to identify the subject's behaviour immediately before the Taser was first presented. We were able to do this for 293 uses in the post-policy period. Our findings are illustrated in Figure 4.2.

Figure 4.2: Subject behaviour immediately before the use of the Taser



The largest percentage of uses involved a subject whose behaviour was perceived as posing a threat to police (24.6%, *n* = 72). Generally, these subjects were displaying signs that they were preparing to fight police, such as advancing on officers, taking a fighting stance or clenching their fists. The second largest category involved subjects who were armed and behaving in a way that signalled a threat to a person (17.1%, *n* = 50). This included one use against a subject who was assaulting another person with a fence paling, and 11 uses against subjects who were self-harming or appeared to be about to self-harm (for example, placing a knife against their throat). Other subjects in this group commonly advanced on police or others while holding a weapon.

From our point of view, most of the categories generally suggest that there probably was a risk of serious injury to a person justifying the use of a Taser. A few categories, however, involve subject behaviours that do not as clearly suggest there was a risk of serious injury. We therefore further examined 13 uses (4.4% of all uses identified here) where we categorised the subject's behaviour as 'Running away', 'Failed to comply with directions' or 'Other'.

Uses where the subject was running away

Cases 1 and 2 below describe two uses that appeared to involve a subject who was running away from police immediately before the Taser was presented. (Note that all of the case studies in this section are based on the reporting officer's description of events in the TUR.[33])

33 We attempted to match the incidents described in the case studies with Taser-related complaints to the CMC. Only Case 19 was identified as having an associated complaint to the CMC. It is possible that other case studies had associated complaints that we were not able to match because of a lack of detail in the complaint file (for example, unknown subject officers), different dates in the complaint file and the TUR, or the complaint being made outside our period of analysis.

Case 1: Taser presented at a subject running from police

The subject was the person of interest in a disturbance/stealing matter at a retail outlet. When the subject was identified to police by a witness, the subject turned and ran away. The subject was called upon by police to stop, but they continued to run. The pursuing officer believed that they would not be able to catch the subject and that there was a risk of the subject running onto the road and sustaining an injury. As a bluff, the reporting officer called to the subject 'Stop or I shoot. Taser.' Upon turning around and seeing that the officer did not have their Taser drawn, the subject continued to run. The subject officer then drew their Taser, but did not have another opportunity to repeat their attempt to stop the subject.

Case 2: Taser presented at two subjects running from the scene of a violent assault

Two subjects were wanted in relation to a violent assault. The subjects ran from the scene and were called upon to stop by police, but they continued to run. The reporting officer pursued the subjects on foot for about two blocks, when the two subjects stopped running just around a corner. The reporting officer believed that the subjects may have been waiting to ambush them and drew the Taser as they came around the corner. Upon seeing the red dot of the Taser on their bodies, both subjects lay on the ground when directed. The Taser was not deployed.

In other jurisdictions, many concerns have been raised about the use of Tasers against subjects who are merely running away from police. Areas of concern include the appropriateness of using a Taser against a subject who may not pose a risk of serious injury if they are running away, and the increased risk of a running subject sustaining fall-related injuries if a Taser is deployed at them (for example, if they are hit in the back and fall forward). Best practice therefore indicates that Taser deployments against such subjects should generally be prohibited (Cronin & Ederheimer 2006; Office of the Maryland Attorney General 2009; PERF 2005; WAPOL 2010). Consistent with this, QPS training advocates that a Taser should not be used against a moving target because of the high risk of injury. Although not explicitly prohibiting deployments against subjects who are merely running away, the QPS Taser policy does prohibit such deployments through the existing threshold for use (that is, the risk of serious injury).

In relation to the above uses, it is important to note that (a) the Taser was not deployed in either case and (b) the officers reportedly perceived a risk of serious injury (to the subject in Case 1, and to the officer in Case 2). Both uses were re-reviewed by the relevant SERP as part of a QPS Taser use audit conducted in 2010 (see page 97). In Case 2, it was found that the Taser was not drawn while the subjects were running and the Taser was at no time likely to be deployed against a moving person. Case 1, in contrast, resulted in the initial SERP review recommending that the officer be given guidance about complying with QPS guidelines for appropriate Taser use.

That only two Taser uses (and no deployments) in our period of analysis appeared to involve a subject who was running away from police indicates that there is not any particular problem with Taser uses against subjects who are merely fleeing and not posing a risk of serious injury. Further, the fact that one use was acted on by the SERP indicates that current QPS review processes have been effective in identifying and addressing some inappropriate uses.

Uses where the subject failed to comply with police directions

For four uses, the subject's behaviour immediately beforehand was categorised as 'Failed to comply with directions', as described in Cases 3 to 6.

Case 3: Taser presented at a previously armed subject refusing to come out of a bedroom

Police attended a residence after reports of a person threatening the occupants. On arrival, they were informed by the occupant that the subject had a knife. On moving to the rear of the premises, police observed the subject in possession of a knife and drew their firearms. They yelled at the subject to drop the knife, which the subject did before entering the premises and moving into a bedroom. Police continually directed the subject to come out of the bedroom but they refused, demanding that police come in. The reporting officer then holstered their firearm and drew their Taser. The subject again refused to comply with instructions to come out of the bedroom, and the reporting officer entered the bedroom with their Taser drawn and activated. After several more unsuccessful attempts, the subject finally complied with police instructions to lie on the ground and they were arrested. The Taser was not deployed.

Case 4: Taser presented at a driver refusing to get out of their vehicle

The subject was involved in a police pursuit. The registered owner of the vehicle had a warning for previously being located with a loaded pump-action shotgun behind the front seat of their car. Based on this information, officers drew their firearms and directed the driver to get out of the vehicle. The driver did not comply. To prevent the possible use of lethal force, the reporting officer drew their Taser and issued a verbal warning to the subject. The subject then alighted from the vehicle and was handcuffed. The Taser was not deployed.

Case 5: Taser presented at a subject refusing to come out of a bedroom after an alleged assault

Police attended an incident where the subject was alleged to have seriously assaulted another person, leaving them with suspected serious injuries. The subject did not comply with police directions to come out of the bedroom where they were hiding. The Taser was therefore drawn and presented at the subject and they complied with further police instructions. The subject was arrested without incident and the Taser was not deployed.

Case 6: Taser presented at a subject refusing to remove their hands from their pockets

Police attended a residence and located a person outside with a significant cut to their forehead. This person advised police that they had had an altercation with the subject, resulting in the subject throwing a coffee cup at their head. While police were conducting inquiries with neighbours, the subject exited the residence with their hands in their pockets. The reporting officer directed the subject to stand still and remove their hands from their pockets. The subject failed to comply with this direction and the reporting officer presented their Taser. The subject then removed their hands from their pockets. The subject was subsequently handcuffed and the Taser was not deployed.

Relevant to these cases, the QPS Taser policy (Section 14.23.3 of the OPM) states that a Taser should not be deployed against people who are passively resisting police, including people refusing to comply with police directions.

It is first important to emphasise that none of the above four uses involved a Taser deployment in probe and/or drive stun mode. We believe, however, that it is also inappropriate to present a Taser to make a person comply with police directions when they do not pose a risk of serious injury. Clear definitions and consistent use of the terms ‘use’ and ‘deploy’ in the QPS Taser policy as recommended in Chapter 2 should remove any confusion about appropriate Taser use.

It is also important to note the context of these four uses. For example, Case 4 involved a subject who may have been in possession of a firearm, and Case 5 involved a subject who had just inflicted suspected serious injuries on another person and who may reasonably have been assumed to be extremely violent. From the relatively limited information provided in the TURs, it seems that the circumstances of these uses might have involved other, more serious considerations beyond the subject's mere failure to comply with police directions.

On this point, it is possible that the reporting officers in these cases have not fully articulated the circumstances surrounding their Taser use or the risk of serious injury they perceived. A lack of detail in the TURs was a problem we noted for many Taser uses. This not only made it difficult for us to examine particular uses, but it also makes it difficult for reviewing officers and the SERPs to properly judge their appropriateness. The QPS has now developed model TURs indicating the nature and level of information that should be included in the reports, and instruction about how to complete a TUR will be included in the Taser re-qualification course from Semester 1 2011 (QPS submission). This should improve the quality of TURs and allow reviewing officers to better understand the circumstances of Taser uses as described by reporting officers.

'Other' uses

Finally, there were seven uses where we categorised the subject's behaviour as 'Other', as follows:

- uses because of pre-existing information or intelligence about the subject (Cases 7 and 8)
- uses inside watch-houses (Cases 9 to 12)
- one use to make the subject leave their vehicle (Case 13).

The first two uses (Cases 7 and 8) relate to the use of a Taser because of pre-existing information or intelligence police had about the subject.

Case 7: Taser presented because of QPRIME warnings that the subject be treated as 'high risk'

Police attended a residence to arrest the subject in relation to traffic and obstruct police matters. The subject had numerous warnings on QPRIME (the QPS's crime recording system) for being armed and dangerous. Three weeks before, the subject produced a knife when challenged by police, leading to a siege. The QPRIME warnings advised that the subject be treated as 'high risk'. Based on this information, the reporting officer entered the residence with their Taser drawn and pointed at the subject to prevent the subject from arming themselves and possibly causing injury to police or others. The subject was handcuffed without incident and the Taser was not deployed.

Case 8: Taser presented because of current intelligence about the subject

The subject was wanted in relation to two outstanding arrest warrants and for questioning in relation to a home invasion where a handgun was produced. The subject also had numerous warnings for violent behaviour and was possibly in possession of a firearm. After hiding from police for around 15 minutes, the subject presented themselves. Because of current intelligence about the subject, the reporting officer presented the Taser at the subject and gave a verbal warning. The subject complied with police directions and was handcuffed. The Taser was not deployed.

Although representing only a very small proportion of Taser uses, these two cases raise the possibility that Tasers may sometimes be used primarily in response to information or intelligence about the subject rather than any actual behaviour by the subject during the incident. Although such uses may still satisfy the QPS's threshold for Taser use in particular circumstances, the CMC sees these situations as representing a 'grey area' of Taser use, with the possibility for it to lead to over-reliance on Tasers in the long term. The CMC believes that SERPs should give extra scrutiny to any Taser use that appears to rely primarily on pre-existing information or intelligence about a subject (as opposed to subject behaviour during the current incident) to ensure that it complies with policy. The SERP should particularly consider the age of the information relied upon (for example, how the subject behaved last week might have a greater bearing on decision making than how the subject behaved 10 years ago) and its relevance to the situation in which the Taser was used.

Cases 9 to 12 below all involve the use of a Taser in a police watch-house.

Case 9: Taser presented to fit protective gear on a subject in a watch-house cell

While in the watch-house, the subject made threats to hang themselves and continually head-butted, kicked and punched the cell door. The subject threatened to kill and assault police if they entered the cell. Watch-house staff attempted to enter the cell in order to shackle the subject and fit head protection. As police opened the door, the subject rushed at the door with clenched fists, threatening police. The door was closed. The reporting officer then entered the cell and presented the Taser at the subject, directing them to lie on the floor. The subject was subsequently restrained with handcuffs and a waist shackle, dressed in a hang-proof smock and fitted with protective headgear. The Taser was not deployed.

Case 10: Taser used while moving a subject to a padded cell in the watch-house

The subject had been punching the walls of the watch-house cell and occasionally head-butting the door. Watch-house staff decided that the subject needed to be moved to a padded cell to prevent self-harm. The planned movement was communicated by the reporting officer to the subject, who proceeded to yell, threaten police and adopt a fighting stance. The subject had also poured water on the floor of the cell. The reporting officer believed that the subject or an officer would be injured in the confined cell, and therefore activated the Taser, aimed it at the subject and gave directions to them to get down on their knees. The cell door was opened and further instructions given, which the subject failed to comply with. The subject, who had previously produced a screwdriver that police assumed was internally secreted before the subject was placed in the cell, started walking towards the reporting officer. The reporting officer was unaware if the subject had any other weapons in their possession, and the Taser was deployed in probe mode after multiple warnings. The subject was subsequently restrained and moved to a padded cell for continual observation.

Case 11: Taser presented to remove a blanket from a watch-house cell

While in the watch-house, the subject was observed to rip their blanket in half and begin shredding it into a rope-like piece of material. Police attended and the subject made threats that they wanted police to enter the cell. The subject refused to hand the blanket to police through the door and lay down on their bed. As police opened the door to the cell, the reporting officer drew their Taser because of the subject's extremely muscular physique and aggression, the small size of the concrete cell, and the risk of serious injury to police should the subject approach them or grapple with them. The blanket was removed from the cell and the Taser was not deployed.

Case 12: Taser presented to remove an abusive subject from the watch-house yard

The subject was bailed up by other detainees in the watch-house yard because of the subject's abusive behaviour. The reporting officer opened the door with the Taser drawn in order to extract the problem prisoner. The prisoner was removed without incident and the Taser was not deployed.

These four cases have been highlighted as they were regarded as involving circumstances unique to a watch-house environment.[34] In other jurisdictions — most notably Western Australia (CCC 2010; Guest 2010a, 2010b) — there has been much controversy over Taser deployments against people in the contained environment of a watch-house. Although the QPS Taser policy already places considerable restrictions on when and how Tasers can be deployed, including in watch-houses, and although the above four cases represent only a very small proportion of Taser uses in Queensland, the use and deployment of Tasers in watch-houses is nevertheless a 'grey area' for police. That said, the CMC is of the view that there may sometimes be exceptional circumstances in which the use of a Taser in a watch-house would be justified and appropriate to prevent serious injury to a person.

Finally, Case 13 describes the use of a Taser to extract a person from a vehicle.

Case 13: Taser presented during a 'high risk' vehicle extraction

After a short pursuit, the subject's vehicle pulled to the side of the road. Information received by police earlier in the day indicated that the vehicle contained two people, but only one was sighted. The reporting officer considered the situation to be a 'high risk' vehicle extraction, and produced the Taser and advised the subject. The subject was removed from the vehicle without incident and the Taser was not deployed.

Risk of serious injury? Issues concerning the threshold for Taser use

These last seven cases raise specific issues about the use of intelligence and the use of Tasers in watch-houses. However, more generally it can be seen that these cases tended to involve circumstances where any perceived risk of serious injury was not as obviously imminent as that in many of the other categories. It is clear, for example, that a person who is armed with a knife and advancing on police or self-harming might be regarded by officers as posing a risk of serious injury. In contrast, it may be that the subjects in the uses above were regarded by officers as posing a more distant risk of serious injury — for instance, if they armed themselves or became violent as they had in the past (Cases 7 and 8), if watch-house staff were unable to fit protective wear and the subject continued to head-butt the cell door (Case 9), or if the subject approached police and engaged them in a struggle (Case 11).

With regards to the threshold for use, the QPS Taser policy is purposely vague. When developing the policy, the QPS considered that developing a specific definition of 'serious injury' similar to the definition of 'bodily harm' or 'grievous bodily harm' in the *Criminal Code Act 1899* would artificially limit the practical use of Tasers in operational situations. Rather, what is considered 'a risk of serious injury' depends on the officer's assessment of the situation. As a result, the threshold for Taser use is a subjective rather than an objective one. Furthermore, QPS officers are trained to assess all conflict situations as either 'high risk' (for example, where a person is armed) or 'unknown risk' (all situations that are not 'high risk').

34 Two other uses occurred in watch-houses, but these involved circumstances that were not necessarily unique to the watch-house environment. One incident involved a subject who was reported to have violently resisted police at the cell door, while the other incident involved a subject in a cell who the officer reportedly believed was about to strike them.

Together, the subjective nature of the threshold and QPS officers' orientation to categorising risk may have the effect of allowing more situations to meet the threshold for Taser use than might initially be assumed. To illustrate, guidance provided by OST in the Taser Good Practice Guide and through an advisory to QPS Taser instructors includes the example of a person who is flicking blood at police, claiming that they have AIDS. The guidance notes that if the officer moves forward to take the person into custody and they are struck in the eyes or mouth by some blood, there is a risk of serious injury from the development of a blood-borne pathogen. The guidance states that the officer in this situation may elect to use a Taser to mitigate the threat and establish control of the subject.

The issue here is not necessarily that the above uses raise obvious concerns about lack of compliance with current QPS policy. They do suggest, however, that the current threshold for use is not as restrictive as might be expected. Given the subjective nature of the threshold, the use of a Taser may still be justified in a relatively wide variety of circumstances.

Compared with other jurisdictions in Australia and overseas, Queensland has what may be regarded as a medium-level threshold in terms of when officers can and cannot use a Taser. Lower thresholds tend to permit Taser uses to prevent 'injury' (not specifically 'serious injury'), as in Alberta, Canada (Alberta Solicitor General and Public Security 2009). Higher thresholds tend to permit Taser uses only where there is an *imminent* risk of serious injury, violent confrontation or bodily harm — as in the Northern Territory, Victoria (CCC 2010) and the RCMP (2010) — or only when a person is armed — as in South Australia (CCC 2010). These thresholds are consistent with recent recommendations from the Northern Territory Coroner at the inquest into the death of Gottlieb Rubuntja (2010), the Corruption and Crime Commission (CCC; 2010) and the Office of the Maryland Attorney General (2009).

The question of what is the most appropriate threshold for Taser use is a complicated one. On the one hand, further raising the threshold for use may limit the operational usefulness of Tasers. Permitting Taser use only when a person is armed, for instance, fails to recognise that an unarmed person can also inflict serious injury in some circumstances. Similarly, elevating the threshold to require an *imminent* risk of serious injury raises questions about just what is imminent, and this would probably again rely on the officer's subjective assessment.

On the other hand, the QPS's current threshold may allow for the justification of some Taser uses where less use of force would have been appropriate, or may enable mission creep to occur. It has also been argued in a report of the Commission for Public Complaints Against the RCMP (CPC–RCMP) that:

> the assumption should be that the CEW poses inherent risk and unless and until it can be demonstrated clearly that it does not, the bias should go to less usage, rather than more. (CPC–RCMP 2009, p. 33)

In light of suggested best practice and recent trends in some jurisdictions towards higher thresholds for Taser use, the QPS should also consider reviewing its threshold. It is also essential for the QPS and the CMC to continue to monitor trends in Taser use, with a particular focus on identifying and addressing any possible signs of mission creep. In addition, appropriate Taser use — regardless of the threshold for use contained in policy — needs to be ensured by rigorous monitoring and review processes (see Chapter 5).

Extent to which Tasers were deployed during incidents

This section focuses on those occasions where a Taser was actually deployed at a person. We examine cases where subjects were the targets of multiple and prolonged discharges and simultaneous deployments.

Although we identified 73 people who had a Taser deployed at them, we were only able to verify the number and length of Taser discharges from the Taser data downloads for 69 subjects. Our analyses below are therefore based on these 69 subjects only.

Summary of discussion

Almost 38 per cent of people (n = 26) who had a Taser deployed at them were the target of multiple discharges in the one incident. Just over half of these cases involved two discharges. The most discharges targeted at a subject in the one incident were 13; this incident is the subject of an ongoing QPS internal investigation. A smaller proportion of people who had a Taser deployed at them — around 16 per cent (n = 11) — were the target of one or more prolonged discharges.

After examining these incidents and considering the findings of a QPS Taser use audit, we believe that the relatively high proportion of incidents involving multiple and/or prolonged discharges arose out of a combination of serious circumstances and tactical decision making and actions by officers that sometimes could have been better. The QPS has identified several ways of improving training to remedy these problems, which we support. We also support the QPS's proposal for medical assistance to be requested whenever an incident involves multiple or prolonged discharges, to help mitigate the risk of harm to subjects.

Multiple and prolonged discharges

We found that most people who had a Taser deployed at them (62.3%, n = 43) were the target of just one discharge in each incident, although there was still a relatively high proportion of subjects — almost 38 per cent (n = 26) — who were the target of multiple discharges. More specifically:

- 14 subjects (52.8% of all subjects who were the target of multiple discharges) were the target of two discharges
- 5 subjects (19.2%) were the target of three discharges
- 2 subjects (7.7%) were the target of four discharges
- 5 subjects (19.2%) were the target of five or more discharges, including 2 subjects who were the target of seven discharges (Cases 14 and 15) and 1 subject who was the target of 13 discharges. This last incident was a siege situation involving a person with a suspected mental health condition who was reportedly armed with a knife; it involved Taser deployments by three separate officers and is the subject of an ongoing QPS internal investigation.[35]

35 The data downloads available to us allowed us to verify seven of these discharges; the other six discharges (from a Taser we did not have data downloads for) were identified by the QPS during its review of all multiple discharges.

Case 14: Seven discharges against a subject armed with an edged weapon

The subject was seen by police exiting a residence that appeared to have just been broken into, carrying a screwdriver and numerous items of property. After a foot pursuit into a nearby yard, the subject confronted police and threatened them with an edged weapon, believed to be a Stanley knife. The reporting officer drew their Taser and instructed the subject to drop the weapon and get on the ground. The subject failed to comply, and the Taser was deployed at the subject. The Taser took effect and two other officers moved in to restrain the subject. A struggle ensued, and the reporting officer cycled the Taser another two times with no effect, before realising that the probes had come out of the subject. The subject continued to resist police attempts to restrain them, violently kicking out with their feet and thrashing their arms and body in an attempt to break away from police. After warning the subject to stop violently resisting police or they would be Tasered again, the subject continued their behaviour and the reporting officer deployed the Taser again. The deployment had only minimal effect as the probes entered the subject's body too close together to incapacitate the subject, and the subject continued to thrash about violently. The reporting officer considered trying to extend the circuit by applying a drive stun but it was not safe to do so. Two further cycles of the Taser were then applied in an attempt to gain control of the subject, but with little effect. The subject was eventually restrained and handcuffed after the use of open- and closed-hand tactics and OC spray.[36]

Case 15: Seven discharges against an aggressive, naked subject

Police were called to a disturbance at a residence. On approaching the dwelling, they heard the sound of smashing glass and screaming. Police entered the area and saw the naked subject climbing through a smashed glass door. Police entered the room and found two children and another person cowering in the corner. The subject was in the opposite corner of the room, punching the television and yelling aggressively. The subject was bleeding heavily from numerous cuts on their body. The reporting officer drew their Taser, activated it and called for the subject to get on the ground. The subject turned towards the officer before moving towards the children in the corner of the room. The reporting officer deployed the Taser at the subject, causing them to tense up and slide to the floor against a cabinet. As the subject slid down the cabinet, one of the probes dislodged from the subject's body, breaking the circuit. The subject then attempted to stand up and police used open- and closed-hand tactics in an effort to subdue the subject. The subject showed increased strength and these tactics were not effective. The reporting officer then deployed the Taser in drive stun mode six times. Along with further open- and closed-hand tactics, the use of the Taser helped police control the subject and they were handcuffed.

With regards to the length of discharges, most people who had a Taser deployed at them (84.1%, *n* = 58) had the Taser applied for only the standard five-second cycle/s. Of those 11 people who were the target of one or more prolonged discharges:

- 8 subjects (72.7% of all subjects who were the target of one or more prolonged discharges) were the target of one prolonged discharge ranging from 6 seconds to 10 seconds, as well as one or more five-second discharges
- 2 subjects (18.2%) were the target of one prolonged discharge only, ranging from 6 to 7 seconds
- 1 subject (9.1%) was the target of four prolonged discharges (of 6, 14, 10 and 8 seconds each), plus two five-second discharges (Case 16).

36 The SERP found that, in the circumstances, the use of the Taser was justified and appropriate even though it was not effective. It recommended that the matter might be further reviewed by the district's OST training group.

Case 16: Multiple and prolonged discharges against a fleeing motorist on a highway

This case involved a subject who was stopped on the highway for speeding. The subject and their passenger both fled on foot, with the reporting officer giving chase. During the prolonged interaction that followed, the subject on numerous occasions ran onto and across the highway, causing cars to brake and swerve to avoid hitting them. The subject failed to comply with repeated calls from the reporting officer to stop, and ended up in a violent struggle with the officer on the side of the highway.

The first Taser deployment (6 seconds) was made after the subject advanced on the reporting officer at the side of the highway. The deployment was ineffective because of the subject's leather jacket. OC spray also had little effect. The Taser was deployed a second time (14 seconds) about three minutes later as the subject and the reporting officer stood on the shoulder of the highway. This deployment was only partially effective, and the subject turned to run back into the fast lane. A third cycle (5 seconds) was again applied with only minor success because of the subject's leather jacket. A fourth cycle (10 seconds) was then applied successfully and the subject fell to the ground. Once the cycle was complete, however, the subject again attempted to run onto the highway before being tackled to the ground in the fast lane by the reporting officer. The subject violently resisted the officer's attempts to restrain them. The officer backed away from the subject and the road because of the presence of traffic, and the subject again stood up and threatened the officer. A fifth and a sixth cycle were deployed (5 seconds and 8 seconds respectively) and the subject was eventually taken to ground, dragged off the highway and handcuffed.[37]

Reducing QPS officers' use of multiple and prolonged discharges

Altogether, around 40 per cent (n = 28) of people who had a Taser deployed at them were the target of multiple and/or prolonged discharges. This is a relatively large proportion, although similar to that recently reported in Western Australia (CCC 2010). It is also important to recognise that in each case we cannot confirm whether all the cycles recorded by the Taser actually affected the person; in many cases, it seems that some of the Taser discharges were ineffective, as highlighted by the incidents described in Cases 14 to 16.

A 2010 Taser use audit by the QPS examined in detail the circumstances surrounding incidents involving multiple and/or prolonged discharges. It especially sought to identify the factors that gave rise to the application of multiple and/or prolonged discharges, and involved both a survey of the officers involved and a review of training throughout the state. It identified that people exposed to multiple and/or prolonged discharges were generally not being effectively controlled during the initial five-second Taser cycle. They therefore continued to pose a risk of serious injury after the cycle was completed, requiring the officer/s involved to deploy or discharge the Taser again or deliver a prolonged discharge in an attempt to control the subject.

The QPS's audit noted that the 23 police officers surveyed had a sound knowledge of QPS Taser policy and procedures, particularly in relation to multiple and/or prolonged discharges. They were also reportedly aware of the increased risk of harm associated with such discharges. This suggests that a lack of familiarity with or understanding of the policy was not a key contributing factor to these situations.

The QPS's audit also stated that most of the situations in which Tasers were discharged multiple times or for prolonged periods involved 'highly motivated, violent and armed offenders'. It reported that 'a number of officers surveyed indicated if the Taser was not available then they would have been forced to resort to lethal force to resolve the situation'. From the limited Taser usage data available to us, we considered that, at the time the Taser was first presented,

37 The SERP found that, despite the number and length of deployments, the incident was handled appropriately given the officer being 'one-up' (working as a single officer), the subject's 'fight not flight' attitude, and the need to restrain the subject because of imminent danger from traffic on the highway.

10 of the 28 subjects were armed, four were involved in violent struggles with police, two had assaulted police, two were struggling with police, one had attempted to assault police, and one was reported to be armed and refusing to comply with police directions; six other subjects were acting in ways that signalled a threat to police, while one other subject was acting aggressively and destroying property.[38] The situations therefore generally appeared to involve subjects whose behaviour was described as being at the more serious end of the scale.

Beyond the generally serious nature of the situations and the subjects' behaviour, the QPS audit identified some problems that may have also contributed to the relatively high proportion of incidents involving multiple and/or prolonged discharges. These included:

- a tendency for officers to become over-reliant on the Taser once it was selected — that is, officers did not appear to reassess the situation and reconsider other use of force options if the initial deployment/s were unsuccessful in resolving the incident
- a reluctance by officers to move in and attempt to restrain or handcuff the subject while the Taser was operating and the subject was incapacitated
- a relatively high proportion of single-officer patrols in incidents involving multiple and/or prolonged discharges. In these situations there are difficulties associated with the one officer being responsible for both deploying the Taser and restraining the subject — the latter would normally be the role of the cover officer and would be able to be done while the person is incapacitated.

In this regard, the audit found that current Taser training could be improved by:

- further emphasising the importance of taking control of the subject during the initial five-second cycle, while they are incapacitated; voluntary exposures will continue to be undertaken in Taser training as one way of achieving this (see Chapter 2)
- addressing the issue of how single officers should best manage Taser deployments
- assessing the actions of the cover officer in the scenario-based component of Taser training.

The CMC supports the QPS's undertaking to address these matters in a curriculum review of the QPS's Taser training.

It appears to us that the relatively high proportion of incidents involving multiple and/or prolonged discharges did not arise because of a widespread lack of policy compliance, but rather because of a combination of serious circumstances and tactical decision making and actions by officers that sometimes could have been better. Improving training in the ways identified by the QPS audit should go some way towards remedying these problems and reducing the number of subjects who are the target of multiple and/or prolonged discharges. The CMC will re-examine the issue of multiple and/or prolonged discharges in a further review scheduled to commence by the end of 2011.

Mitigating the health risks associated with multiple and prolonged discharges

Relevant to the problem of multiple and prolonged discharges, the QPS's submission to our evaluation highlighted Taser usage guidelines developed by Public Safety Canada (2010) that state:

> Where operationally feasible, medical assistance should be sought when a situation necessitates multiple or extended cyclings of a CEW. Medical assistance should be sought when an individual has any apparent injuries, is in obvious distress, or requests medical assistance.

38 The behaviour of one other subject prior to the use of the Taser was not clear from the information available to us.

The QPS submission recommended that its policy and training should be amended to incorporate this procedure as a matter of priority. The CMC agrees that this procedure may help to mitigate the risks associated with multiple and prolonged Taser discharges. We strongly support the QPS's proposal, particularly in light of the fact that most people targeted by multiple and/or prolonged discharges were suspected of having an underlying health condition or being under the influence of alcohol and/or drugs (see pages 74–5). It is nevertheless essential for the QPS's emphasis to remain on officers using the minimum amount of force to resolve incidents, and avoiding multiple or prolonged Taser discharges wherever possible.

Simultaneous deployments

Only one (0.3%) of the 329 incidents in the 10 post-policy months involved two officers possibly deploying their Tasers against the same person at the same time. This incident was mentioned previously (page 66) as being the subject of an ongoing internal QPS investigation.

Characteristics of subjects involved in Taser incidents

This section describes the subjects involved in Taser incidents in terms of their gender, age, racial appearance and possible underlying medical conditions. It also discusses Taser uses that involved subjects who were believed to be under the influence of alcohol and/or drugs, were handcuffed or had previously been sprayed with OC spray.

Summary of discussion

Most Taser subjects were male, and aged between 20 and 39 years. Around 3 per cent of subjects were juveniles (aged 16 years or under), with only two juveniles being the target of an actual Taser deployment.

Over 20 per cent of subjects were described as being of Aboriginal or Torres Strait Islander appearance. Given both the over-representation of Indigenous people in QPS Taser incidents and recent policy changes and recommendations in other Australian jurisdictions, we believe QPS policy and training should warn officers of the greater likelihood of Indigenous people having underlying health conditions that may place them at greater risk of harm following a Taser deployment.

Less than 4 per cent of subjects were suspected of having a physical health condition, around 17 per cent were suspected of having a mental health condition, and almost 80 per cent were believed to be under the influence of alcohol and/or drugs. We found that around one-third of all subjects who were the target of multiple and/or prolonged discharges had a suspected mental health condition, and almost 80 per cent were believed to be substance-affected.

Although there is a possibly increased risk of harm associated with multiple or prolonged discharges on these 'at-risk' subjects, there may be exceptional circumstances where the behaviour of people from these groups necessitates a Taser deployment. We believe that improving Taser training with a view to reducing multiple and prolonged discharges generally is one way of addressing these discharges against people in medically vulnerable groups. Ensuring that medical assistance is sought whenever a person is exposed to multiple or prolonged discharges may also help to mitigate the possible health risks to these subjects.

There were two cases involving a subject who was reportedly handcuffed at the time the Taser was deployed. Around 9 per cent of uses (n = 28) involved a subject who had previously been sprayed with OC spray, including five that involved multiple and/or prolonged discharges.

Gender

We were able to determine the gender of all 309 subjects, and found that the vast majority were male (93.5%, *n* = 289).

It is worth noting here that the QPS Taser policy prohibits officers from deploying Tasers against females reasonably suspected to be pregnant, except in extreme circumstances. None of the information available to us indicated that any of the 20 female subjects were pregnant.

Age

We were able to determine the age of 299 subjects. We found that:

- Most subjects (65.9%, *n* = 197) were aged between 20 and 39 years.
- Ten subjects (3.3%) were juveniles (that is, aged 16 years and under), with the youngest subject being 14 years old.
- Three subjects (1.0%) were over the age of 60, with the oldest subject being 75 years old.

That such small proportions of subjects were juveniles or over the age of 60 is a positive finding. However, given that the QPS Taser policy prohibits Taser deployments against juveniles and elderly persons except in extreme circumstances, we further examined all Taser uses against juveniles and people over the age of 60.

Of the 10 juveniles who were involved in Taser incidents:

- Most (80.0%, *n* = 8) were 16 years old.
- In at least half of the cases, the officer did not appear to know the subject's age before using the Taser.
- Three subjects were armed with a knife or other sharp object and four subjects were believed to be armed with a knife based on information received from members of the public. In the other three cases, the subject's behaviour was perceived by the officer involved as signalling that they were at risk of assault.
- In eight cases, the Taser was presented at the subject but not deployed in probe mode or drive stun mode. In the other two cases, the Taser was deployed in probe mode (Cases 17 and 18).

Case 17: A Taser deployment against a suicidal juvenile

A member of the public contacted police about a juvenile cutting their arms in a car park. The subject had previously come to the attention of police and was known to have made at least three suicide attempts in the preceding four months. When police arrived, the subject was bleeding heavily from both forearms. The subject moved towards the railing of the car park and threatened to jump to the level below if police came any closer. The subject was armed with shards of glass, and was behaving in an erratic and distressed manner. Initial attempts to negotiate with the subject failed, and the officers requested the attendance of the DDO. After the DDO arrived, the subject again threatened to jump and placed a hand on the railing. The DDO drew the Taser and deployed it in probe mode. The deployment was effective, with the subject falling to the ground without injury. The subject was restrained by police and assessed by QAS officers at the scene, before being transported to hospital and admitted under an Emergency Examination Order (EEO).

Case 18: A Taser deployment against a juvenile alleged to have broken into a shop

A police officer responded to a break and enter in progress. Members of the public told police on arrival that two people had just broken into the shop and were still inside. The officer drew their Taser upon entering the darkened shop, and announced themselves and the presence of the Taser several times while searching the premises. After turning a corner, the officer encountered one subject in front of them with an arm raised. Fearing that they were about to be struck by the subject, the officer deployed the Taser in probe mode. One probe missed and the other probe accidentally struck the subject in the forehead. The subject was subsequently arrested and received first aid from QAS officers at the scene. The subject was then conveyed to hospital, where the probe was removed by medical staff.

Based on the information available to us, none of the Taser uses against a juvenile raise obvious concerns about lack of compliance with QPS policy. Consistent with this, the SERPs identified no problems with policy compliance in any of the nine uses for which we had SERP information.

Of the three subjects who were over the age of 60:

- All three were armed with a knife, including one subject who had stabbed themselves in the stomach in the presence of police before running the knife across their throat and wrists.
- In all three cases, the Taser was presented at the subject but not deployed.

In each case, the use of the Taser appears to have been justified in the circumstances and highly effective in resolving the situation without the Taser needing to be deployed.

Racial appearance

Racial appearance was specified for 301 subjects.[39] Of these subjects, two-thirds (67.1%, *n* = 202) were described as Caucasian and over one-fifth (21.6%, *n* = 65) were described as Aboriginal or Torres Strait Islander. The remainder of the subjects (11.3%, *n* = 34) were described as being of some other racial appearance, including Pacific Islander (*n* = 23), European (*n* = 5), African (*n* = 2) and South-East Asian (*n* = 2).

It is clear from these figures that people of Aboriginal or Torres Strait Islander appearance are greatly over-represented as Taser subjects. If all subjects described as being of Aboriginal or Torres Strait Islander appearance are assumed to be Indigenous (recognising that racial appearance does not necessarily equate to cultural identity), Indigenous Queenslanders were over seven times more likely than non-Indigenous Queenslanders to be a subject in a Taser incident — they comprised 21.6 per cent of all Taser subjects but account for only 3.5 per cent of the Queensland population (Australian Bureau of Statistics 2010).

The over-representation of Indigenous people in other areas of policing and criminal justice is well documented, and often at an even higher rate than identified here (see, for example, Australian Institute of Criminology 2009, 2010). Our findings may also reflect in part the higher prevalence of related factors such as mental health problems, high-risk levels of alcohol consumption, and illicit drug use among Indigenous Australians in comparison with non-Indigenous Australians (Australian Bureau of Statistics and Australian Institute of Health and Welfare 2008; Australian Institute of Health and Welfare 2008).

When it came to how the Taser was used against people during Taser incidents, we found that the Taser was slightly less likely to be deployed against subjects of Aboriginal or Torres Strait Islander appearance (20.0%, *n* = 13, of these subjects had the Taser deployed against them) when compared with subjects described as Caucasian (23.8%, *n* = 48). This means that subjects of Aboriginal or Torres Strait Islander appearance were slightly less likely to have the Taser deployed against them *once becoming involved in a Taser incident*. However, as a proportion

39 We use the term 'racial appearance' (rather than ethnicity, for example) as this is the term used in the TUR.

of the population, Indigenous people were still over-represented as the subjects of Taser deployments. They comprised 17.8 per cent of people who were the target of a Taser deployment yet represent only 3.5 of the Queensland population.

In some other Australian jurisdictions, attention has recently been given to the fact that Indigenous people are more likely to suffer from illnesses such as heart disease and lung disease that may place them at greater risk of harm when they experience a Taser deployment. The Federation of Community Legal Centres (Victoria) (2010), for instance, recommended that Victoria Police policies warn officers that Aboriginal people should be considered an 'at-risk' group when it comes to the effects of Taser deployments, and the policy of one other Australian jurisdiction does in fact do this.

The CMC is of the view that it would be useful to include similar guidance in the QPS's Taser policy and training considering the relatively high proportion of Taser subjects in Queensland who are Indigenous. The CMC therefore recommends that the OPM and Taser training courses address the higher likelihood of Indigenous people suffering from heart disease, lung disease and other illnesses that may increase their risk of experiencing adverse health effects when a Taser is deployed against them.

Recommendation 5

That:

a. the QPS Taser policy (Section 14.23.3 of the OPM, under 'Deployment of a Taser') be amended to include the following statement after '(v) a combination of these factors existed': 'Officers should be aware that Indigenous people are more likely to suffer from underlying health problems such as heart disease, lung disease and other illnesses that may increase their risk of experiencing adverse health effects when a Taser is deployed against them.'

b. the QPS Taser training be amended to address the above policy change.

Possible underlying medical conditions

We examined the medical conditions reported for subjects to determine how many were suspected of having an underlying physical or mental health condition. Of the 302 subjects for whom this information was available, we found that:

- Less than 4 per cent of subjects (3.6%, *n* = 11) were suspected of having a physical health condition. This comprised three subjects (27.3% of those with a suspected physical health condition) with suspected heart conditions, five (45.5%) who were known drug users, and one each (9.1%) with diabetes, asthma and possible epilepsy.
- Over 17 per cent of subjects (17.2%, *n* = 52) were suspected of having a mental health condition. Almost half of these subjects (48.1%, *n* = 25) reportedly had some kind of mood disorder (such as depression or bipolar disorder) or were suicidal; around one-third (30.8%, *n* = 16) were suspected to have schizophrenia or some other kind of psychosis; and three (5.8%) had post-traumatic stress disorder (PTSD). The mental health conditions of the remaining subjects (23.1%, *n* = 12) were not specified beyond a generic description such as 'mentally ill' or 'mental health issues'.[40, 41]

40 Percentages do not add to 100 per cent because some subjects had more than one suspected condition specified.

41 During our examinations, we also found that two subjects (0.7%) were suspected of having a developmental disorder or disability — one subject described as having a mild mental handicap, who reportedly was aggressive, threatening people with a metal bar and non-compliant with police directions to drop the weapon, and one subject with Asperger's syndrome who had reportedly attempted to kick and punch attending police, before getting hold of one officer's torch and threatening police with it. The Taser was only presented at both of these subjects.

The QPS Taser policy does not prohibit Taser use against people with suspected physical or mental health conditions, but it does note that they may be at greater risk of death after a Taser deployment, particularly where multiple or prolonged discharges are involved. This point is also emphasised in the QPS Taser training. Consequently, we further examined the nature of uses against those people with a suspected health condition.

Of the 11 subjects who had a suspected physical health condition, only five (45.5%) were the target of a Taser deployment in probe and/or drive stun mode. Of these five subjects, three (60.0%) were drug users (see Cases 19 and 20), one (20.0%) reportedly had a heart condition and one (20.0%) was asthmatic. Four (80.0%) of these five cases involved multiple and/or prolonged Taser discharges.

Of the 52 subjects who had a suspected mental health condition, the majority (65.4%, $n = 34$) only had the Taser presented at them. Of the 18 subjects who had the Taser deployed against them in probe and/or drive stun mode, eight (44.4%) reportedly had some kind of mood disorder or were suicidal, seven (38.9%) were suspected to have schizophrenia or some other kind of psychosis, and five (27.8%) had unspecified mental health problems. Nine (50.0%) of these 18 subjects were the target of multiple and/or prolonged discharges, including those in Cases 19, 20 and 21. Put another way, around one-third (32.1%) of the 28 people who were the target of multiple and/or prolonged discharges had a suspected mental health condition.

Case 19: Two Taser discharges against a subject with suspected drug-induced psychosis

Police attended a residence in relation to a disturbance between two people. One of these people — suspected by police to be experiencing psychosis due to drug use — suddenly became physically violent towards police and a struggle ensued as police attempted to restrain them. The subject punched and kicked both attending officers, knocking one of them down and causing them to briefly lose consciousness. The other officer subsequently deployed their Taser, successfully hitting the subject with both probes. The subject fell to the floor but continued to struggle and fight with police after the initial five-second discharge. The subject continued to attempt to kick and punch the officers as they tried to restrain the subject, and a second five-second discharge was applied. The subject was then subdued by the officers and handcuffed.

Case 20: Two Taser discharges against a subject believed to have a history of schizophrenia due to drug use

Police received reports of a violent domestic disturbance, involving a person who was armed with a large kitchen knife. On arrival, the three attending officers approached the subject — believed to have a history of schizophrenia due to drug use — and called on them to drop the knife. Two of the officers drew their firearms, before the subject moved towards them with the knife held in their direction, yelling obscenities and threats. The third officer drew their Taser and activated it, staying in position behind the subject. The subject failed to comply with further directions from police to drop the knife. Without warning, the aggrieved person in the domestic disturbance matter attempted to reason with the subject, asking them to drop the knife and moving towards the subject. The subject then started walking towards the aggrieved person, still armed with the knife, and the reporting officer deployed the Taser into the subject's back. The subject fell to the ground, but refused to release the knife. The subject regained movement after the initial five-second cycle and again raised the knife towards police. A second five-second cycle was applied, causing the subject to release the knife. The subject was subsequently handcuffed after a short struggle with police.

Case 21: Three Taser discharges against a subject believed to have bipolar disorder

The subject was aggressive towards police and QAS officers who were attempting to transport them to hospital for a mental health assessment. Several attempts to restrain the subject were unsuccessful, and OC spray was used on three occasions to little effect. At this point, two additional police officers — including the deploying officer — arrived to provide assistance. On entering the dwelling, the subject approached the deploying officer with their fists clenched, yelling at the officer to get out of the house. The deploying officer then drew their Taser and aimed it at the subject, warning them twice to move back. The subject continued to approach the deploying officer and the Taser was subsequently deployed. The first five-second cycle of the Taser was effective and the subject person dropped to the ground, but they were able to remove one of the probes after the cycle had ended. The deploying officer instructed the subject to place their hands behind their back but the subject refused to comply, continuing to rise to their feet and make threats to the officers present. Because of the size and the aggressive demeanour of the subject, a second cycle was applied before the deploying officer noticed the probe that the subject had pulled out lying on the ground. Two other officers then attempted to restrain the subject, who was kicking out at police, striking one officer in the stomach. The Taser was then applied in drive stun mode, completing the circuit with the still-attached probe and enabling police to restrain the subject. The subject was assessed by QAS officers at the scene before being transported to hospital.

As discussed on pages 68–9 in relation to multiple and/or prolonged discharges generally, those people with a suspected health condition targeted by such discharges generally appeared to be involved in reportedly serious situations, as highlighted in Cases 19 to 21. Although QPS Taser policy and training warns officers of the increased risk of harm that may be associated with multiple or prolonged discharges on these 'at-risk' people, it must also be recognised that the behaviour of these people may in exceptional circumstances warrant a Taser deployment as the most appropriate use of force option. Improving QPS Taser training as discussed on page 69 should go some way toward reducing the frequency with which people with a suspected health condition are the target of multiple and/or prolonged discharges. The QPS's recommendation that medical assistance be sought whenever a person is exposed to multiple or prolonged Taser discharges (page 70) may also help to mitigate possible health risks in those subjects with underlying medical conditions.

Subjects affected by alcohol and/or drugs

In 297 cases, the TUR stated whether the subject was believed by police to be affected by alcohol and/or drugs (prescription or illicit) at the time of the Taser use. Almost 80 per cent of subjects (78.8%, $n = 234$) were believed to be under the influence of alcohol and/or drugs, while the remaining subjects were not. Around two-thirds of these subjects (65.3%, $n = 194$) were believed to be under the influence of alcohol, and around one-quarter (25.6%, $n = 76$) were believed to be under the influence of illicit drugs.

Again, the QPS Taser policy does not prohibit Taser use against people who are believed to be under the influence of alcohol or drugs, but it and the Taser training do draw officers' attention to the possibly increased risk of death when a Taser is deployed against such people, particularly where multiple or prolonged discharges are involved. We therefore further examined uses against those people who were suspected to be substance-affected.

We found that, of the 234 subjects believed to be substance-affected, less than a quarter (23.9%, $n = 56$) were the target of a Taser deployment in probe and/or drive stun mode. Twenty-two (39.3%) of these cases involved multiple and/or prolonged Taser discharges, including those described in Cases 14, 15, 16, 19 and 20. This means that almost 80 per cent (78.6%) of the 28 people who were the target of multiple and/or prolonged discharges were believed to be substance-affected.

Again, substance-affected people may sometimes behave in ways that necessitate a Taser deployment. Improving Taser training with a view to reducing the frequency of multiple or prolonged discharges generally would also be beneficial in terms of reducing the frequency of these discharges against substance-affected people. Seeking medical assistance whenever a person is exposed to multiple or prolonged Taser discharges is another way of addressing the possibly increased health risks for subjects under the influence of alcohol and/or drugs who are exposed to discharges of this nature.

Handcuffed subjects

We found that nine of the 308 Taser uses (2.9%) involved a person who appeared to be handcuffed at the time the Taser was used.

As the QPS Taser policy prohibits Taser deployments against people who are handcuffed unless exceptional circumstances exist, we further examined the circumstances surrounding these nine uses. We found that:

- Seven uses involved the presentation of the Taser.
- Only two uses involved the Taser being deployed at the subject, as described in Cases 22 and 23.

Case 22: A drive stun and probe mode deployment against a handcuffed subject struggling with police

In this case, the reporting officer stated that handcuffs were used before the Taser deployment, although we were not able to confirm from the narrative that the subject was actually handcuffed at the time of the deployment (as mentioned on page 36, we found that many officers reported using handcuffs before using the Taser, but that this did not always mean that the subject was actually handcuffed).

The incident involved police attending a violent domestic dispute between the subject and their spouse. The subject was intoxicated and their level of aggression increased when police advised them they were under arrest. Police attempted to restrain the subject but their attempts were unsuccessful. A struggle ensued, with the subject ending up in the kitchen, where police observed several knives to be present. A drive stun was applied to the subject without success. Police then used the Taser in probe mode, allowing the subject to be properly restrained.

Case 23: A probe mode deployment against a handcuffed subject violently struggling with police

The subject was placed under arrest for being in charge of a vehicle while under the influence of liquor after returning a positive breath test (with a reading more than four times the legal limit). The subject was handcuffed at the front by police and escorted to the police vehicle. At this time, the subject became uncooperative and started struggling with police. The subject refused to comply with police directions and resisted all attempts to be placed in the vehicle. Because of the violent struggle ensuing, the subject's non-compliance and the subject's physical size, the Taser was deployed at the subject in probe mode, but it was ineffective. The violent struggle continued for around 15 minutes until back-up arrived. The subject continued to violently struggle for a further 20 minutes before they were able to be placed into the police vehicle and transported to the watch-house.

In relation to Case 22, the SERP report identified no problems with the use. This suggests either that the subject was not actually handcuffed when the Taser was deployed, or that the subject was handcuffed but the SERP believed the deployment was nevertheless justified by the existence of exceptional circumstances. Similarly, the SERP concluded that the officer in Case 23 was justified in their decision to deploy the Taser. However, it also recommended that the officers involved receive guidance and re-training in relation to other use of force options to help them better deal with similar situations in the future.

Subjects previously sprayed with OC spray

Our analyses showed that 28 of the 308 Taser uses (9.1%) involved a subject (in one case, two subjects) who had previously been sprayed with OC spray.

The QPS Taser policy does not prohibit Taser deployments against people who have been sprayed with OC spray, but it does caution officers that some people exposed to both OC spray and a Taser deployment have died some time after the incident, particularly where multiple or prolonged discharges were involved. We therefore further examined the nature of those uses that involved a subject who had been sprayed with OC spray.

We found that half (50.0%) of the 28 uses involved the presentation of the Taser, while the other half (50.0%) involved a Taser deployment. Five of these 14 deployments (35.7%) involved multiple and/or prolonged discharges, including the one illustrated in Case 21. The fact that OC spray was used in addition to multiple and/or prolonged Taser discharges may indicate the seriousness of these situations, although the possible adverse health risks of Taser discharges in combination with OC spray also need to be borne in mind. As for multiple or prolonged discharges against people in other 'at-risk' groups, attention should be given to improving Taser training with a view to reducing the frequency of such discharges and seeking medical assistance whenever a person is exposed to them.

Outcomes of Taser uses

This section discusses injuries or other medical complications sustained by the subjects of Taser deployments, as well as the SERPs' findings about the appropriateness of Taser uses.

Summary of discussion

Eleven per cent of people (n = 8) who had a Taser deployed at them sustained some kind of injury or medical complication following the deployment. Four of these people were injured after falling on a hard surface while incapacitated by the Taser, including one person who lost three teeth. Although the risk of fall-related injuries is covered in current QPS Taser policy and training, the emphasis is on subjects in unusually high or awkward locations. We believe that policy and training could give further attention to the risk of fall-related injuries when subjects are standing on a hard surface.

The vast majority of Taser uses were judged appropriate by the SERP, with only five uses questioned. Two uses were questioned because of a lack of policy compliance, including one where the officer threatened to use a Taser against a person running away; the officer was subsequently given guidance about the appropriate use of a Taser. The other three uses were questioned on tactical grounds. Although this is encouraging, we believe that the SERPs could do better in terms of critically examining officers' tactical decision making and threat assessments.

Injuries or other medical complications to subjects

For each person who was the target of a Taser deployment, we examined the narrative sections of the TUR to determine whether they sustained any injury or suffered any complications after the deployment (minor injuries such as bruises, abrasions or lacerations from the probes coming into contact with the person's body were excluded). The possibility that we may have underestimated the number of subject injuries is important to reiterate here (see page 44 for more details).

Of the 73 people who were the target of a Taser deployment in the 10 months after the introduction of the revised policy, eight (11.0%) were noted to have sustained an injury or experienced some kind of medical complication following the Taser deployment. More specifically:

- One person was struck in the forehead by a Taser probe (see Case 18). They were taken to hospital to have the probe removed by medical staff.
- One person appeared to pass out five minutes after the Taser deployment, one appeared non-responsive to verbal commands and another complained of breathing difficulties. The first two subjects were assessed at the scene by QAS officers, who reportedly formed the opinion that both subjects were 'faking' their symptoms. The last two subjects were taken to hospital, where medical staff identified no Taser-related injuries to either of them.
- Four people sustained injuries after falling on hard surfaces while incapacitated by the Taser. One grazed their knee, one sustained a laceration to their ear and one sustained an abrasion to the back of their head. All three of these people were treated at the scene by the QAS, while the third subject was also taken to hospital for treatment. The fourth person who sustained a fall-related injury fell face first during the Taser deployment and struck their head and torso on the concrete below. They lost three teeth and suffered bleeding from the face and nose. The subject was taken to hospital for medical treatment (see Mckean 2010).

Although the risk of fall-related injuries is covered in QPS Taser policy and training, and officers are advised to consider where subjects may fall when deploying a Taser, current policy and training arguably place most emphasis on the risk of fall-related injuries when subjects are in unusually high or awkward locations — such as standing on stairs or a ladder — without drawing sufficient attention to the risk of serious fall-related injuries where the subject merely falls on a hard surface. For instance, the subject who lost teeth was not in an elevated location, but fell from a standing position onto concrete.

We recognise that a Taser deployment may be a preferred use of force option when the risk of a fall-related injury is substantially outweighed by the risk of serious injury, or where lethal force may otherwise be necessary. We also recognise the split-second decisions officers are often required to make in these situations. Nevertheless, the CMC recommends that the QPS amend its Taser training to better highlight the risk of fall-related injuries when the Taser is deployed on a subject standing on a hard surface (by including reference to the case where the subject lost teeth, for example), and to further encourage officers to consider this in their situational assessments and decision-making processes.

Recommendation 6

That the QPS Taser training specifically highlights for officers the risk of fall-related injuries to subjects who are standing on hard surfaces (such as concrete, gravel, roadways) when a Taser is deployed against them.

SERP findings

We were able to locate a SERP judgment for 192 Taser uses.[42] For the vast majority of uses (97.4%, *n* = 187), the SERP finding indicated no problems with the officer's actions in terms of their compliance with policy, lawfulness, reasonableness and tactical soundness. This included 11 uses (5.7% of all uses) where the SERP finding made explicit mention of the officer's good work.

For only five uses (2.6%) did the final SERP finding indicate that some problems or concerns were identified with the use. More specifically, two uses were questioned because of a lack of policy compliance:

42 This refers to the initial SERP judgment of a use, and does not include any new or additional judgments made as a result of the QPS's Taser use audit in 2010.

- One case was that described in Case 1. As mentioned, the SERP recommended that the officer be provided with guidance about complying with QPS guidelines for the appropriate use of a Taser. More specific details were not provided in the SERP report, but possible concerns include questions over whether the subject posed a risk of serious injury, and the appropriateness of the threatened Taser use. Certainly, the CMC is concerned that there may be an emerging trend for some officers to verbally threaten people with Taser use, including in situations where a Taser use would not be justified. This is discussed further on page 81.
- In the second case, the officer did not provide the subject with a verbal warning when presenting the Taser. The SERP recommended that the use of a warning be addressed with the officer in training.

The other three uses were questioned by the SERP on tactical grounds:

- In the first case, it was recommended that an officer participate in further Taser training as a priority. This followed an incident in which the officer and their partner attempted to deploy their Tasers four times at a person. The first three deployments had no effect, while the fourth attempt was unsuccessful in that the Taser failed to fire.
- In the second case, the SERP recommended that the officers be debriefed by a Police Operational Skills and Tactics (POST) instructor in relation to best-practice responses to knife-related incidents.
- In the third case, the SERP recommended that the officers be spoken to about their decision-making processes and be reminded of the QPS's COPS (Consider all Options and Practise Safety) philosophy. This followed a prolonged incident in which the subject was pursued on foot after a struggle with police. The person was eventually restrained after three attempted Taser deployments.

Though it is pleasing to see the SERP questioning some uses on tactical grounds, we believe that the work of the SERPs could be better in this regard. For example, a number of incidents involving multiple or prolonged discharges might have received much greater attention from a tactical decision making and threat assessment perspective in light of the findings of the QPS's audit. This issue is considered further in Chapter 5 on monitoring and continuous improvement processes.

Key findings from this section

- Three-quarters of all operational Taser uses involved the presentation of the Taser without deployment.
- Very few operational Taser deployments were in drive stun mode.
- There is a considerable problem with accidental Taser deployments in the QPS, with these accounting for over 10 per cent of all reported Taser uses in the period we examined.
- Around 40 per cent (n = 28) of people who had a Taser deployed at them in the 10 months after the introduction of the revised policy were the target of multiple and/or prolonged Taser discharges. In half of these cases, the Taser was discharged twice.
- Indigenous Queenslanders were over seven times more likely than non-Indigenous Queenslanders to be involved in a Taser incident, accounting for over 20 per cent of Taser subjects.
- Over 10 per cent (n = 8) of people who were the target of a Taser deployment in the 10 months following the introduction of the revised policy sustained an injury or experienced some kind of medical complication after the Taser deployment. Half of these people sustained injuries after falling on hard surfaces while incapacitated by the Taser, including one person who lost three teeth.

Emerging trends and issues in the use of Tasers

The data we have presented throughout this chapter and Chapter 3 have highlighted some comments about possible emerging trends in the use of Tasers by QPS officers. In light of this, this section:

- examines the issue of mission creep
- considers whether there is evidence of any other emerging trends in Taser use in Queensland.

An explanation of mission creep

Mission creep (also known as 'Taser creep' and 'usage creep') refers to the tendency for police officers to, over time, use Tasers in situations for which they were not intended. Rather than using Tasers only in situations where there is a risk of serious injury, officers may start to become over-reliant on Tasers as a use of force option, using them in situations where there is no risk of serious injury or where a lesser use of force option would have been as effective. Mission creep may also be indicated by officers using Tasers earlier on in their interactions with people, reflecting the Taser becoming 'a weapon of first choice' or 'go-to' option for resolving situations (see QPS 2009a, p. 2). Importantly, Taser creep has the potential to undermine community confidence and trust in the use of the weapons by police officers. This, in turn, may undermine community respect for and cooperation with police more generally.

Mission creep has been commonly identified as a key risk associated with police use of Tasers. Recently in Western Australia, for example, the CCC reported that there is a real risk of mission creep in the use of Tasers by WAPOL officers. The CCC (2010) especially raised concerns about the increasing use of Tasers against people physically resisting arrest, and against people with mental health conditions.

Similarly in Canada, a 2008 review by the CPC–RCMP noted that there was some evidence that mission creep was occurring in the RCMP. The CPC–RCMP (2008, p. 9) was particularly wary of RCMP officers' increasing reliance on drive stun mode, stating its view that 'push stun mode is the most susceptible usage subject to usage creep'.

Mission creep and over-reliance on Tasers were also identified as a key risk in the QPS's Taser trial evaluation (QPS 2009a). In rolling out Tasers to all frontline officers, the QPS undertook to implement a range of monitoring activities that may help to reduce the risk of mission creep occurring — for example, reviewing and monitoring TURs, auditing Taser data downloads and having Taser incidents reviewed by SERPs (see Chapter 5). Consistent with this evaluation's terms of reference, the following section looks at whether there is any evidence of mission creep in the QPS.

Examination of mission creep in the QPS

The use of Tasers in situations for which they were not intended

In the QPS, signs of mission creep could include an increasing tendency for officers to use Tasers in less serious situations, or in situations where there is no risk of serious injury.

As we saw in Chapter 3, there was a small trend after the introduction of the revised policy towards more Taser uses in response to a person who was armed and threatening a person, and fewer Taser uses in response to a person described as simply resisting or struggling with police. There were very few uses against people who appeared to be merely failing to comply with police directions or running away from police. We also found an apparently increasing tendency for Taser uses to reportedly involve a subject who posed a risk of serious injury. Together, these findings provide no indication of mission creep; they actually suggest that, overall, officers may be using Tasers in slightly more serious situations.

Mission creep could also be indicated by the SERPs judging an increasing number of Taser uses as inappropriate or of concern. As discussed in Chapter 3, SERPs actually judged more Taser uses as appropriate after the revised policy was introduced and raised concerns about only a very small proportion of uses. These findings again suggest that mission creep is not occurring.

Finally, the QPS has maintained a very low rate of drive stun deployments since early 2009, indicating that there is no over-reliance on this mode of deployment.

The use of Tasers earlier in police interactions with people

There could also be cause for concern about mission creep if it appeared that officers were becoming more reliant on Tasers as a weapon of choice, reducing their use of other use of force options or turning to the Taser earlier in their interactions with people.

Since this report has not examined any possible changes in how often police officers are using other use of force options, such as OC spray, batons or firearms, we cannot make any statement about whether the use of Tasers is replacing the use of other use of force options. However, we did note in Chapter 3 that there was a slight increase in Taser use over the 10 months after the revised policy was introduced. At this stage, the Taser usage data do not raise any serious concerns of over-use. Nevertheless, the overall number of Taser uses in the QPS should continue to be monitored by the QPS and the CMC for any sign of over-reliance on Tasers.

With regards to whether officers are using Tasers earlier in their interactions with people than before, this is extremely difficult to ascertain without detailed qualitative information about Taser-related incidents from beginning to end. Such an analysis was beyond the scope of this evaluation. Nevertheless, we did gain some possible insight into this question from our discussions with various QPS officers.

On the one hand, there were perceptions in over half of the QPS regions that officers had become increasingly reluctant to use Tasers over the last 12 to 18 months. It was especially believed that, in many cases, officers would have been justified in using the Taser much earlier than they did. That around 10 per cent of Taser uses in our 10-month period of analysis involved the prior use of OC spray (page 77) further suggests that officers are not always simply using the Taser without first trying other use of force options.

On the other hand, we also heard anecdotally from some QPS officers that some operational police might increasingly be using the threat of the Taser to control situations without actually presenting or deploying the weapon. For example, we have heard that officers may be drawing the Taser and holding it by their side to demonstrate to the subject their capacity to deploy the weapon. Since this action is not a reportable Taser 'use' under current QPS policy, this allows the officer to draw the person's attention to the Taser and easily resolve the situation, while circumventing the usual reporting and review processes.

CMC complaints data lend some support to the possibility that officers might also verbally threatening people with a Taser deployment as a means of controlling their behaviour. While the actual complaint numbers are small, alleged inappropriate verbal threats to use a Taser were the most frequent kind of allegation in Taser-related complaints to the CMC in the 10 months after the revised policy was introduced — as reported in Chapter 3, six (54.5%) of the 11 Taser-related complaints in this period featured such an allegation. These kinds of allegations were less frequent in the pre-policy period, suggesting that this kind of behaviour among police may also be becoming slightly more common.

If these behaviours are indeed increasing, there is a concern about mission creep. We would clearly be very concerned if officers were threatening to use a Taser — either through words or actions — to resolve situations where the actual use of the Taser would not be permitted (for example, to make a person who is passively resisting comply with police directions).

We believe that the QPS would better understand the extent of this problem if instances where an officer draws their Taser to resolve a situation were captured by the Taser policy and subjected to the usual review processes. Verbal threats are obviously far more difficult to manage unless they are brought to light by a complaint.

Recommendation 7

That the QPS amend the Taser policy (Section 14.23 of the OPM) to require officers to report instances where they draw their Taser from the holster in the presence of a person to demonstrate a capacity to deploy the Taser as a use of force option, even if the Taser is not pointed in the direction of a person.

Overall, the Taser usage data we have considered provide no concrete evidence of mission creep in terms of Tasers replacing other use of force options or being used earlier in policing interactions. However, anecdotal information and our examination of Taser-related complaints to the CMC suggest that there may be a tendency for some officers to use the sight of the Taser or the threat of a deployment to resolve situations while avoiding reporting and review processes. If so, this may be considered a possible sign of some mission creep in the QPS.

Other emerging trends in the use of Tasers

Taser uses against people in 'medically vulnerable' or 'at-risk' groups

Our analysis of Taser usage data has also highlighted a few other important trends in the use of Tasers by QPS officers. In particular, the data from the post-policy period presented in Chapter 3 suggest that there is a trend for Taser deployments to increasingly involve subjects who are believed to:

- have an underlying mental health condition (representing around 17 per cent of Taser deployment subjects in the post-policy period)
- have an underlying physical health condition, including a history of drug use (around 4 per cent of deployment subjects)
- be under the influence of alcohol and/or drugs (almost 80 per cent of deployment subjects).

This finding is concerning and it is difficult to reconcile it with the revised policy, which was intended to minimise the likelihood of harm to such individuals through a Taser deployment.

The finding may reflect several factors. In particular, the new policy's higher threshold for use may have led to a slight increase in the seriousness of situations in which Tasers were used. This may well have increased the proportion of subjects from vulnerable groups, since factors that contribute to the 'at-risk' status of these individuals (for example, mental health conditions and drug use) may also be associated with serious behaviours such as physical violence or self-harm that can lead to police intervention with a Taser. To introduce policy that prohibits deployments in these situations may unduly limit the operational value of Tasers, to the detriment of overall safety. Nor did our review of best practice in other jurisdictions support such a restrictive approach.

In addition, recent case reports and research studies continue to produce mixed findings in relation to the possible adverse effects of Taser deployments on people in certain 'at-risk' groups, including those with mental illnesses (Sanford et al. in press; White & Ready 2009), known drug users (Sanford et al. in press), and people under the influence of alcohol or drugs (Moscati et al. 2010; White & Ready 2009).

In light of this, the current QPS policy approach of drawing officers' attention to the possible health risks of Taser deployments against people in vulnerable groups seems to be an appropriate way of balancing the potential risks and benefits of deployments against such individuals who are posing a risk of serious injury. This policy approach is supported by a focus in training on

the possible adverse health effects of Taser deployment in these circumstances. It is essential that QPS training courses maintain this focus, to help ensure that officers consider these risks when choosing among the various use of force options in operational situations.

Despite the mixed evidence around the adverse health effects of Tasers, our review of recent developments in best practice indicated that mandatory medical assessments following Taser deployments have been widely recommended (Alpert & Dunham 2010; CCC 2010; Office of the Maryland Attorney General 2009; Ontario Ministry of Community Safety and Correctional Services 2010; Smith et al. 2010; see also Cronin & Ederheimer 2006; PERF 2005).

In practice, mandatory assessments by qualified medical personnel have been adopted in some jurisdictions in Australia and overseas, such as Victoria (Federation of Community Legal Centres (Victoria) 2010), New South Wales (CCC 2010), the Northern Territory (CCC 2010) and New Zealand (NZ Police 2008). Requirements range from mandatory assessments for all people exposed to Taser deployments, to mandatory assessments for subjects only when particular risk factors are present (for example, when the subject is in a medically vulnerable group or when the probes have struck the subject near the heart). The rationale for such procedures is that they will allow any possible adverse effects, as well as any existing medical conditions (such as mental health problems), to be identified and treated by medical professionals as quickly as possible.

We understand the resource implications that mandatory medical assessments would have for both police and medical personnel, as well as practical limitations that might arise in some remote locations. Nevertheless, we recommend that the QPS examine the feasibility of seeking a medical assessment whenever a Taser is deployed against a person (particularly those who fall into a vulnerable group) in light of the recent developments in international best practice.

Recommendation 8

That the QPS examine the feasibility of seeking a medical assessment by a qualified medical practitioner for any person who has a Taser deployed against them.

In the interim, we believe that the QPS could make further improvements to the aftercare procedures conducted by officers following Taser deployments. In particular, the CMC believes that it would be beneficial for officers to conduct an assessment according to the Post Arrest Risk Assessment (PARA) Scale whenever a Taser is deployed against a person. As mentioned in Table 2.4, the PARA Scale has been developed by the QPS's OST Program to assist officers in making decisions about a subject's possible health problems and required medical assistance, with a view to reducing the likelihood of sudden in-custody death. The PARA Scale highlights to officers the need to consider factors such as alcohol and drug use, mental health conditions and exposure to OC spray, and may therefore be especially useful when incidents involve people from vulnerable groups.

Although the use of the PARA Scale is strongly advocated in training and the Taser Good Practice Guide, it is not currently mandatory. The CMC recommends that the QPS Taser policy require officers to conduct an assessment according to the PARA Scale immediately after restraining any person exposed to a Taser deployment. The CMC recognises that the use of the PARA Scale has application across all arrest or custody situations, and that the QPS may choose to amend the OPM more generally to reflect this.

Recommendation 9

That the QPS amend the OPM to require any person exposed to a Taser deployment to be assessed by an officer according to the Post Arrest Risk Assessment (PARA) Scale immediately after being restrained.

While these strategies would help to address health concerns after a Taser incident, the CMC believes that the QPS should also develop targeted, front-end strategies aimed at decreasing the likelihood of Tasers being deployed against people from medically vulnerable groups.

The QPS has implemented similar strategies in the past. In particular, it developed a community engagement strategy to coincide with the initial Taser rollout in January 2009 (QPS 2009f). This strategy aimed to ensure that community members — particularly those from groups more likely to come into contact with police — were informed about the Taser rollout and the policy, training and accountability frameworks surrounding it. Since the initial rollout, much has changed in the QPS's Taser policy, training and monitoring processes. In addition, we now know much more about the use of Tasers in Queensland, including how often they are used, who they are being used against, and what kinds of behaviours they are used in response to.

In light of these advances, the CMC believes that the QPS should develop an updated community engagement strategy, targeting people who have underlying health conditions that may put them at greater risk of physical harm from a Taser deployment. The QPS should collaborate with non-government organisations and advocacy groups representing these people — such as the Queensland Alliance for Mental Health and the Aboriginal and Torres Strait Islander Legal Service (ATSILS) — in both developing and implementing the strategy.

Recommendation 10

That the QPS develop an updated community engagement strategy for Tasers in light of the significant changes that have been made to policy, training and monitoring processes since the initial Taser rollout. The strategy should:

- **target people who have underlying health conditions that may put them at greater risk of physical harm from a Taser deployment**
- **be developed in consultation with peak bodies — including non-government organisations and advocacy groups such as the Queensland Alliance for Mental Health and the Aboriginal and Torres Strait Islander Legal Service (ATSILS) — to determine the most appropriate and effective ways of engaging with different parts of the community.**

The use of Tasers against people from vulnerable groups will be re-examined by the CMC in a further review scheduled to commence by the end of 2011.

Possible Taser-related injuries or other medical complications to subjects

Our findings in Chapter 3 also suggested that there was a considerable increase in the rate of possible Taser-related injuries and medical complications to subjects iover the 10 months following the introduction of the revised policy. As discussed on page 78, such adverse outcomes are still relatively uncommon, affecting around 11 per cent (n = 8) of subjects; still, the increasing trend needs to be considered. We have suggested that fall-related injuries in particular may be better addressed by modifying current QPS Taser training, and the QPS and the CMC should continue to monitor the extent to which any training changes affect the rate of subject injuries.

Key findings from this section

- The Taser usage data provide no concrete evidence of mission creep in terms of Tasers being used in less serious situations, replacing other use of force options or being used earlier in policing interactions.
- Anecdotal information from some QPS officers and CMC complaints data suggest that some police may increasingly be using the threat of the Taser to control situations without actually presenting or deploying the weapon, thereby circumventing usual reporting and review processes.
- The data suggest that there is a trend for Taser deployments to increasingly involve people who are believed to have an underlying mental or physical health condition, or to be under the influence of alcohol and/or drugs.
- The rate of possible Taser-related injuries or complications to the subjects of Taser deployments increased considerably over the 10 months following the introduction of the revised policy, although such adverse outcomes are still relatively uncommon.

5

QPS TASER MONITORING AND CONTINUOUS IMPROVEMENT PROCESSES

This chapter:

- reports on our audit of those recommendations from the QPS–CMC review report related to Taser monitoring and continuous improvement processes
- examines how individual Taser uses are monitored and reviewed in the QPS, and what other continuous improvement activities are undertaken in the QPS in relation to Tasers.

Key findings from the chapter are:

- Five of the eight recommendations related to Taser monitoring and continuous improvement processes (Recommendations 19 to 23) have been implemented by the QPS. Work is continuing on the Taser Cam and body worn video (BWV) camera trials (Recommendation 24) and the review of the National Guidelines on the Use of Force (Recommendation 25). Collaborative research on Tasers between the QPS and the CMC (Recommendation 26) has not yet begun because of the current evaluation.
- All Taser uses in the QPS go through a number of layers of scrutiny at the local, district, regional and QPS-wide levels.
- SERPs sometimes seem to give officers involved in Taser incidents the benefit of the doubt without critically examining their threat assessments and decision making.
- There is a need for the SERPs to be subjected to central overview to ensure that they are objective and robust processes able to drive organisational change and continuous improvement across the QPS.
- Several improvements can be made to bring the QPS into line with suggested best practice, including introducing policy to ensure that Taser data downloads are regularly checked against reported deployments, periodically testing the electrical output of Tasers and producing regular monitoring reports on Taser usage.

Audit of recommendations from the 2009 QPS–CMC review

This section reports on our audit of those recommendations from the QPS–CMC review report related to Taser monitoring and continuous improvement processes.

Table 5.1 shows these recommendations and their implementation status as of 31 January 2011, with additional comments as necessary. The table indicates that all but three of the recommendations (Recommendations 24 to 26) have been implemented by the QPS. Further information about the implementation of recommendations is provided where relevant throughout this chapter.

Table 5.1: Taser monitoring and continuous improvement processes recommended in the QPS–CMC review and their implementation status as of 31 January 2011

Recommendation	Status	Notes
Recommendation 19: That data from the Taser following every drive stun or probe mode deployment of a Taser is downloaded within 72 hours.	Implemented	• Related policy implemented as of 22 September 2009 • Implemented in practice, but some difficulties • See p. 91 for more information
Recommendation 20: That a Chief Superintendent assess every drive stun or probe mode deployment of a Taser within 72 hours, including data download.	Implemented	• Related policy implemented as of 22 September 2009 • Implemented in practice • See p. 91 for more information
Recommendation 21: That the QPS develop a control self assessment guide (or checklist) that can be used by Officers in Charge and the Significant Event Review Panels to review Taser deployments.	Implemented	• Checklist finalised in 2010 and now being used by the SERPs • See p. 96 for more information
Recommendation 22: That the QPS continue to examine the design of the Taser and any other CEW devices to ensure that the best and most accountable technology is used. In particular, the ability to record trigger pulls, a limit on the period of deployment and a restriction on the number of times that a CEW can be deployed during an individual incident should be the subject of continued examination.	Implemented	• Testing of two alternative CEWs (the Taser X3 and the Stinger S200-AT) completed in 2010 • Neither CEW met the QPS's requirements with respect to operational effectiveness and accountability mechanisms • QPS is continuing to monitor the CEW marketplace to identify any weapons with improved safety and accountability mechanisms • See p. 101 for more information
Recommendation 23a: That the QPS audit the use of Tasers by police.	Implemented	• Audit of all Tasers uses that occurred between 22 September 2009 and 31 July 2010 completed in 2010 • All Taser uses continue to be reviewed on a daily basis as part of an ongoing audit and moderation process • See p. 97 for more information
Recommendation 23b: That the QPS also examine testing or auditing of the electrical output of Tasers.	Implemented	• Electrical output testing of six of the QPS's Taser X26s and three each of the two alternative CEWs completed in 2010 • See p. 101 for more information
Recommendation 24: That the QPS trial the effectiveness of Tasercam or video recording in a discrete location.	Ongoing	• Initial 6-month trial of Taser Cams commenced on 1 January 2010 in Logan and Caboolture districts • Initial 6-month trial of BWV cameras commenced on 1 July 2010 in Townsville and Toowoomba districts • Both trials subsequently extended to 31 March 2011 (and Taser Cam trial extended to Ipswich and Townsville districts) because only two operational deployments were captured by the devices as at December 2010 • See p. 99 for more information

Continued next page >

Recommendation	Status	Notes
Recommendation 25: That once the outcomes of the review of the National Guidelines on the Use of Force are made known, QPS give consideration to the Situational Use of Force Model and the review report's recommendations in the context of these findings and identify any aspects for improvement or change.	Ongoing	• Review of the National Guidelines on the Use of Force not yet released by the Australia New Zealand Policing Advisory Agency (ANZPAA) • Draft was due to be considered by the ANZPAA Board in December 2010 before being circulated to the jurisdictions for consideration • Recommendation cannot be actioned until this is done and it remains an ongoing agenda item for the Taser Review Steering Committee
Recommendation 26: That the CMC and QPS continue with their collaborative efforts to review, research and evaluate Taser use in Queensland. Specifically, the QPS and CMC should develop a research plan and protocols to manage this process, with a particular focus on: a. the collection and use of data to inform assessment of the Taser and the identification of trends, such as 'mission creep' b. continual re-assessment of best practice in terms of Taser policy and procedures, training and monitoring, as informed by the latest available technological and medical evidence.	Not implemented	• Has not been progressed to date because of the CMC's receipt of the Attorney-General's reference to conduct this independent evaluation, although the CMC has gratefully received considerable assistance from the QPS in terms of obtaining data and being able to consult with officers • The QPS considers the recommendation finalised in light of the CMC's current evaluation, but the CMC believes implementation should be pursued after the completion of this evaluation • See p. 103 for more information

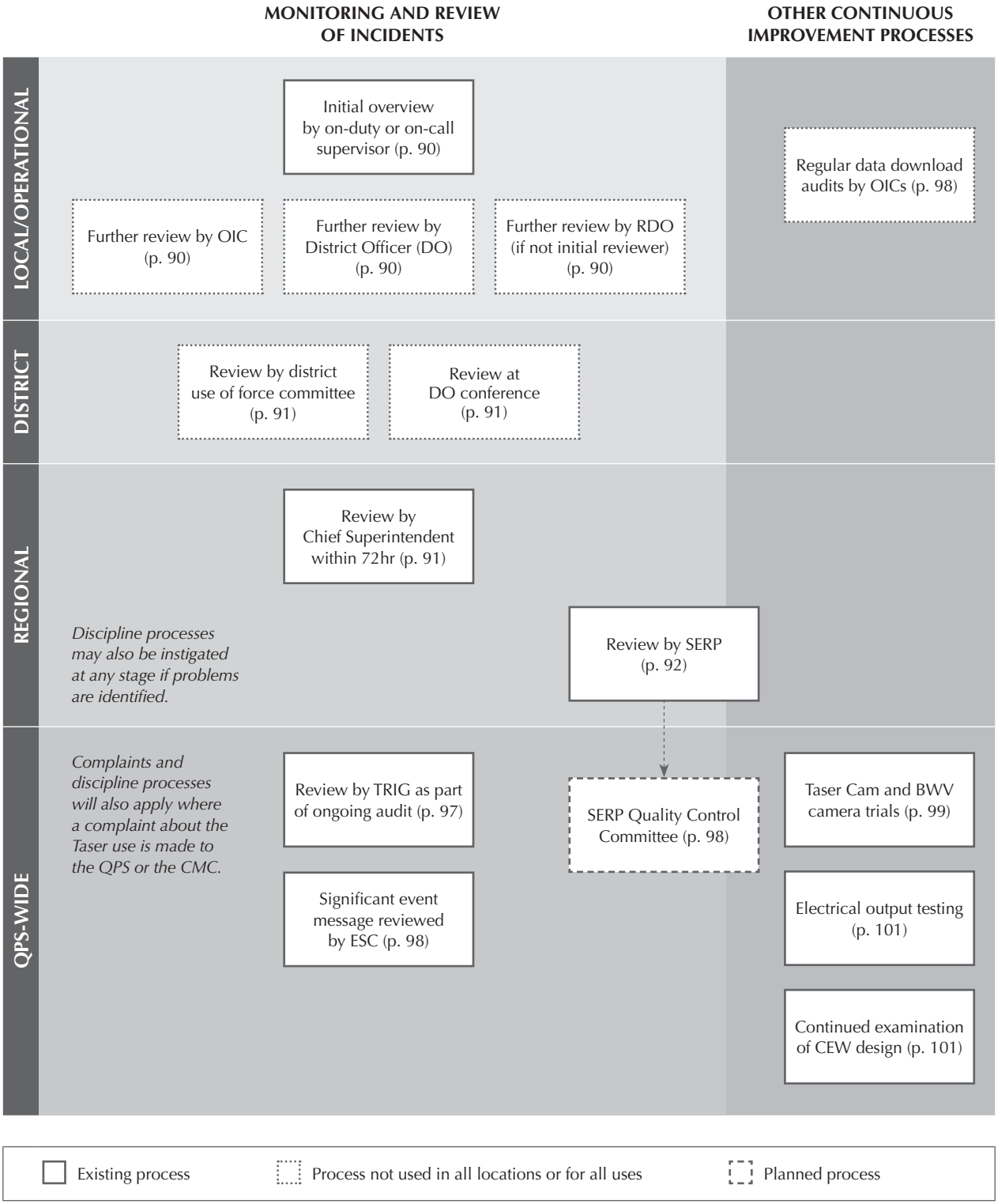
Overview of monitoring and continuous improvement processes

This section describes how individual Taser uses are monitored and reviewed in the QPS and what other continuous improvement activities are undertaken in the QPS in relation to Tasers.[43]

Figure 5.1 illustrates the monitoring and continuous improvement processes currently used in the QPS, as well as those that the QPS is planning to implement. From this figure, it is evident that monitoring and review of individual incidents occurs (a) at the local/operational and district levels, (b) at the regional level and (c) QPS-wide. In addition, a number of other continuous improvement activities, mostly performed at a more central level, feed into policy and practice.

43 Although Term of Reference 5 specifically refers to monitoring processes 'following Taser deployments', we also examined monitoring processes following Taser presentations, and continuous improvement practices that are broader in scope than individual incident reviews.

Figure 5.1: Existing and planned Taser monitoring and other continuous improvement processes in the QPS



Notes: The monitoring and review processes illustrated here do not necessarily occur in a linear fashion. All monitoring and review processes may be considered 'continuous improvement processes' (for example, where the outcomes of individual incident reviews are used to instigate wider organisational change). However, we have separated the processes here according to their primary focus.

This chapter discusses each of these processes, starting with monitoring and review processes at the most local level (such as incident reviews 'on the ground') and moving to those conducted at a broader level across the QPS.

Local/operational and district monitoring and review processes

Our discussions with senior officers in the regions indicated that there was considerable review of Taser uses at the local/operational and district levels. Specific processes used at the local and district levels varied considerably between regions, and sometimes even within regions. This is understandable and indeed necessary given the vastly different operational and geographic environments that exist in different regions and districts. Despite this it was our sense that all incidents went through a number of layers of scrutiny at the local and district levels.

Initial overviews of incidents

Generally, an on-duty or on-call supervisor — typically the shift supervisor or the District Duty Officer (DDO) or Regional Duty Officer (RDO) where they are available — conducts the initial overview of the incident as soon as possible after it occurs. The overviewing officer is typically responsible for completing the significant event message and ensuring that the TUR is submitted (in some regions, the significant event message may be authorised by the RDO). They also gather information about what occurred from the officer involved, and ensure that the matter is communicated up through the chain of command as appropriate. Further reviews tend to occur in most regions, generally conducted by the District Officer (DO) and/or the RDO.

These initial overviews feed into reviews conducted at a higher level, particularly those conducted by the Significant Event Review Panels (SERPs) (see page 92). Officers in the regions advised us that, by the time matters arrive at the SERP, problematic Taser uses have usually already been identified and addressed (for example, by the provision of managerial guidance or re-training) as a result of the lower-level reviews.

From our discussions in the regions, the question arose of who should be conducting the overviews of Taser incidents and debriefs with officers involved. The OPM states:

> The officer in charge where the police officer using a Taser is stationed, is to:
>
> i. ensure that a 'Taser Usage Report' and significant event message has been submitted in relation to the incident; and
>
> ii. overview the incident to determine whether the use of the Taser was in accordance with Service policy and procedures.
>
> Where practicable, the overview should include a face-to-face meeting between the officer in charge (or supervisor) and the officer who deployed the Taser.

As indicated above, these responsibilities tend to be fulfilled by the shift supervisor, DDO, RDO, and/or DO rather than the OIC. In some regions, we were told that the OIC may be involved in the overview of some incidents, but that their focus would be on considering whether the incident had any human resource implications (such as staffing issues or a need for employee counselling) or was linked to other events in the division. In many of the regions, the officers we spoke to indicated that shift arrangements make it simply impractical to expect OICs to overview Taser incidents. There would also be difficulties in instances where the OIC is the officer who used the Taser.

The CMC is of the view that who conducts the overview and debrief with the officer involved is not overly important, so long as it is done by an appropriate supervisor. The current processes adopted in the regions whereby shift supervisors, DDOs, RDOs and/or DOs overview incidents appear to be working well. These processes are still ensuring that incidents are overviewed by a senior officer — with the added benefit of debriefs and overviews being conducted by an officer who is on the ground, who can respond to incidents quickly, and who has a greater understanding of the incident.

The current QPS policy does seem to allow debriefs with the officer involved to be conducted by a supervisor other than the OIC, but overview and reporting responsibilities rest with the OIC. In light of the above discussion, we recommend that the relevant section of the OPM be modified so that the overview of the incident and debrief with the officer who used the Taser may be conducted by an appropriate supervisor, preferably a Commissioned Officer where available.

Recommendation 11

That Section 14.23.10 of the OPM be modified to allow any appropriate supervisor, preferably a Commissioned Officer, to fulfil the responsibilities currently allocated to OICs only.

Additional reviews at the district level

In a few regions, we were advised that additional review of Taser incidents is provided through district use of force committees, weekly DO conferences or district complaints/discipline management processes.

Regional monitoring and review processes

Taser data downloads and incident reviews by Chief Superintendents

As a result of the implementation of Recommendations 19 and 20, the QPS Taser policy now requires that, within 72 hours of a Taser being deployed, data from the Taser are downloaded and the incident is reviewed by a Chief Superintendent. In our discussions with regional Chief Superintendents and other senior officers in the regions with incident review responsibilities, we found that every attempt is being made to ensure that these policy requirements are fulfilled.

With respect to downloading Taser data, it appears that this is done within the required time in the vast majority of incidents, and often much sooner. For instance, several regions indicated that efforts are made to ensure that the data are downloaded within the same shift or within 24 hours of the incident. This is important given the requirement that the Chief Superintendent also reviews the incident, including the data download, within 72 hours.

Our discussions with senior officers in the regions suggested that there are relatively few problems in ensuring that all Taser deployments are assessed by the Chief Superintendent within 72 hours. In fact, this often occurs within a much shorter timeframe. For example, in all regions the Chief Superintendent is notified of a Taser incident within 24 hours, allowing them to initially assess it well within the required timeframe.

In terms of how incidents are assessed by the Chief Superintendent, there is some variation between regions. In three regions, for example, we were advised that all Taser uses are reviewed daily by a group of senior officers that includes the Chief Superintendent. These daily reviews are generally used to identify whether any immediate action needs to be taken for a particular incident (such as briefing the Deputy Commissioner or returning the matter to the district for further inquiries).

In other regions, the significant event messages, TURs and data downloads are initially reviewed by other officers, such as the PPM, the RETC or the Assistant to the Operations Coordinator (ATOC). These officers consider aspects such as whether the Taser use complied with QPS policy, whether the use was justified, any urgent training needs, and the adequacy of the information contained in the usage reports. The Chief Superintendent is then briefed about the incident by the ATOC, and consideration given to any problems identified and any recommendations arising from the initial review.

It is noteworthy that in all regions the Chief Superintendent reviews all Taser uses, not just drive stun or probe mode deployments as seems to be required by the policy. This may reflect a genuine concern by senior officers in the regions to scrutinise all Taser incidents; it may also reflect uncertainty about the policy requirement because of the terms 'use' and 'deployment' both being used in the relevant section of the OPM. Regardless, the practice of a Chief Superintendent assessing all Taser uses is positive, and the CMC would like to see it continue. The wording of the QPS Taser policy should be amended to ensure this occurs.

Recommendation 12

That the QPS Taser policy (Section 14.23.20 of the OPM) be modified to state: 'All incidents involving the use of a Service Taser will be reviewed by the relevant Chief Superintendent, who is to consider any *use* of a Taser within 72 hours of the event.'

Although the data download and Chief Superintendent review processes appear to be generally working well, practical factors, including a limited number of people trained to perform the data downloads and difficulties associated with locating data download cables, can make it difficult for data to be downloaded within the 72-hour timeframe. The QPS's submission to our evaluation also acknowledged these difficulties.

Our evaluation found that additional steps are being taken in the QPS to overcome these practical difficulties by:

- providing selected officers such as DDOs, RDOs and District Education and Training Officers (DETOs) with their own data download cables in some regions
- revising the QPS's 2010–11 Taser Rollout Project Plan and budget to allow for the purchase of a further 100 data download cables to ensure that enough cables are available in all areas
- incorporating data download training into the QPS's initial Taser user course and all Taser re-qualification courses. In time, all Taser-qualified officers will be able to conduct data downloads.

Significant Event Review Panels (SERPs)

Another fundamental part of the QPS's Taser monitoring and review practices is the SERP process. SERPs were introduced in each QPS region and command in January 2009 to conduct monthly reviews of various 'significant event review matters', including any Taser use.[44] The Commissioner's Circular (34/2008; QPS 2008) that established SERPs states that the purpose of SERP reviews is to:

> critically analyse the appropriateness of the police actions so that opportunities for learning improvements may be identified at the individual, work unit and whole-of-Service levels (e.g. improved practices, changes to equipment, more effective police and procedures).

The SERP process is conducted independently of the disciplinary process and other investigative processes (such as criminal and coronial investigations).

In 2010, the QPS conducted a review of SERPs that identified some problems with current processes, and proposed several recommendations to standardise SERP processes throughout the QPS and improve their effectiveness.[45] The problems identified by the QPS review generally accord with what we found from our discussions with officers in the regions, our review of

44 Other matters reviewed by SERPs include vehicle pursuits, camera-detected and other offences involving a QPS vehicle, the use of OC spray and matters involving police dogs.

45 The QPS has granted approval for these relevant recommendations to be implemented. Implementation is due to commence in early 2011.

SERP minutes and our observations of a SERP. We discuss below some key questions related to the operation of SERPs based on our research, and refer to the findings of the QPS review where relevant.

The composition of SERPs

QPS policy requires that SERPs be chaired by the relevant Chief Superintendent[46] and also include the PPM and RETC as core members. Our discussions with officers in the regions indicated that, beyond these core members, the composition of the SERP varied between regions and might include a representative of the Queensland Police Union of Employees, the Regional Traffic Coordinator, the Regional Crime Coordinator, a workplace health and safety coordinator, a senior OST instructor, and the OICs of Traffic Branch and Communications. Other officers with specialist knowledge may also attend SERPs as required from time to time.

Having external or community involvement in Taser review processes has been considered in other jurisdictions. For instance, a 2010 report by the CCC in Western Australia recommended that Taser uses by WAPOL officers be monitored and reviewed by a committee similar to the QPS's SERPs, and that the committee should include 'some level of community involvement' (CCC 2010, p. xviii). We asked the officers in the regions if they believed it would be useful for the SERPs to include an external representative or 'devil's advocate' to contribute to the panel's objectivity. Some officers agreed that there might be some value in this if there were concerns about the robustness of the process, but they felt overall that their SERPs were working well in this regard (see the further discussion in this section).

The CMC is currently of the view that objectivity and robustness in SERP processes may be ensured by higher-level central monitoring provided by the QPS's proposed SERP Quality Control Committee (see below under 'Other continuous improvement processes'). However, we believe that the question of community representation should be revisited after the SERP Quality Control Committee has been established if concerns about the robustness of SERP processes are identified.

SERP deliberations

The QPS policy relating to SERPs requires that they consider the following aspects when reviewing Taser uses:

- the threat assessment conducted by the officer
- the use of force options employed by the officer
- how the Taser was used
- whether the use of the Taser complied with policy, was justified, was reasonable and appropriate, was legally defensible, and was tactically sound and effective
- whether the officer was qualified to use a Taser
- whether an overview of the incident was conducted by the OIC as required by the Taser policy.

We examined SERP minutes from January 2009 to June 2010 to assess the extent to which these matters are considered by the SERPs. Our capacity to make this assessment was significantly hampered by the lack of relevant information contained in the minutes. In general, SERP reports tended to provide information about the nature of the Taser incident, rather than about the matters considered and discussed at the SERP.

46 The exception is if the SERP is reviewing a critical incident (an incident resulting in death or serious injury that involves a police officer, recruit or staff member acting in the course of their duties, or police service property or equipment). In these cases, the panel must be chaired by an officer at the rank of Assistant Commissioner or above.

Where information was available, we found that:

- the quality of and level of detail in the SERP minutes varied considerably across the SERPs, and sometimes over time within the same region
- the SERP reports typically included an overall conclusion or recommendation for each incident (for example, 'No issues identified' or 'No further action'), which suggests that the matters for consideration listed above may not have been considered separately, but vaguely addressed by a general discussion and overall finding.

The QPS review of SERPs noted the same problems we did with inconsistencies and a lack of information in the SERP minutes; however, when it further examined what the SERPs were doing, it found that processes were generally working well in all SERPs, though some were better than others at recording them. Overall, the QPS's review indicated that the SERP processes were reasonably robust. Officers who participated in our evaluation reinforced this view, indicating that the SERPs they participated in encouraged input from all members and were often characterised by a divergence of opinions that helped them to function effectively. The CMC was also pleased that the SERP it observed involved a lot of discussion among panel members about the Taser uses under consideration.

Notwithstanding this, many officers in the regions alluded to difficulties the SERPs faced in making retrospective judgments about officers' decisions. It was our sense that problems may especially arise when the appropriateness of the Taser use is unclear, or when the use is not necessarily inappropriate (in terms of failing to comply with policy, for instance) but when the incident could have been better dealt with in a different way. A lack of SERP representatives trained in Taser use may also be detrimental to the quality of decision making.

In this vein, we sensed that sometimes SERPs may too easily give officers the benefit of the doubt without critically examining their threat assessments and decision making. We contend that the deliberations of the SERPs would be enhanced by ensuring that:

- the SERPs receive input from someone with expertise in police tactics and use of force[47]
- all SERP members are qualified in the use of Tasers[48, 49]
- additional information from other police at the scene or possible witnesses is considered, and any available objective evidence such as closed-circuit television (CCTV) footage is reviewed.[50]

Recommendation 13

That the QPS examine the feasibility of requiring all SERPs to include a standing representative who is a qualified Operational Skills and Tactics instructor.

47 Though currently this may sometimes occur, the receipt of such input is not compulsory.

48 Currently, QPS policy only requires officers up to and including the rank of Senior Sergeant to complete yearly OST training. Many SERP representatives, including the Chief Superintendents, have therefore not received training in the use of Tasers. The QPS stated in its submission that it too recognises the benefits of SERP members having completed Taser training, and recommended that the SERP Review Implementation Team to be established in the ESC's Inspectorate and Evaluation Branch (IEB) consider the benefits of such a move.

49 It is increasingly being considered best practice for all officers with incident review responsibilities to be trained in the use and possible risks of Tasers in order for them to make properly informed decisions about the incidents they review (see Alberta Solicitor General and Public Security 2009; Office of the Maryland Attorney General 2009).

50 There is a tendency for the SERPs to rely exclusively on the reporting officer's version of events.

Recommendation 14

That the QPS examine the feasibility of requiring all SERP members to be operationally trained in the use of Tasers.

Recommendation 15

That the QPS examine the feasibility of integrating alternative perspectives into SERP deliberations.

For the SERPs to be most effective, they need to be willing to provide constructive feedback about officers' actions — both positive and negative — when it is warranted. This requires SERPs to thoroughly consider officers' threat assessments and decision making, examining whether alternative courses of action would have been more appropriate or tactically sound. Although the QPS policy on SERPs encourages this, and although some regions indicated that they were considering such matters already, greater consistency is essential. We argue that SERPs may currently place too much emphasis on determining whether the actions of officers comply with policy, without critically examining whether something could have been done more appropriately, safely and effectively, with a view to identifying opportunities for learning and improvement.

We stress that this feedback process should be treated as a positive one, and differentiated from managerial guidance given as a part of a formal police discipline process (although this may also be warranted in particular circumstances). In this context, we see SERPs as being a key process in engendering a culture of continuous improvement throughout the QPS. One region told us that feedback mechanisms of this kind (with a tactical focus) already exist in its districts, which gives us optimism that similar work could well be done by the SERPs where necessary.

We believe that how well SERPs are performing in this area should be a focus of the service-wide monitoring of SERPs (see 'Other continuous improvement processes' below).

The dissemination of SERP findings

Our discussions with officers indicated that information from the SERPs was disseminated well within individual regions. Across the regions, we were told that:

- any findings and recommendations relevant to the officer/s involved in an incident are sent back to the district for action (for example, requests to provide re-training or managerial guidance)
- letters of recognition are sent to the officer/s involved in an incident when the SERP identifies particularly good practices or exemplary actions
- any important trends or problems identified by the SERP that have region-wide implications are communicated to all districts/officers, and actions taken as necessary.

SERP findings are also reviewed by the relevant Assistant Commissioner (A/C), which provides an additional level of scrutiny of incidents.

The dissemination of SERP findings beyond individual regions or commands is discussed under 'Other continuous improvement processes'.

Administrative problems with SERPs

As mentioned above, both our evaluation and the QPS's review of SERPs found that there was much inconsistency in the way minutes and reports are prepared by different SERPs. To overcome this problem the QPS review recommended a minutes template be developed for use by the SERPs. The CMC supports this recommendation. Drawing on our understanding of possible deficiencies in SERP decision making, and given the scant information about these processes currently captured in the SERP minutes, we would also emphasise that the template needs to capture enough information about SERP processes and deliberations to allow the proposed SERP Quality Control Committee to effectively monitor SERP activities.

Recommendation 16

That the SERP minutes template being developed by the QPS capture sufficient information about SERP processes and deliberations to allow the SERP Quality Control Committee to effectively monitor the SERPs' activities and decisions. At a minimum, the minutes should note for each matter considered by the SERP:

- **the specific comments made by the Regional Education and Training Coordinator, Professional Practice Manager and Operational Skills and Tactics instructor (if applicable)**
- **any other substantive comments from individual panel members noting concerns or good work**
- **a conclusion and/or recommendation that highlights the substantive issues considered by the SERP and provides a specific assessment of the individual incident.**

Other administrative difficulties raised by officers during our evaluation related to time management. We understand that preparing information for the SERP and fulfilling reporting requirements can be labour intensive and time consuming for the responsible officer (generally the ATOC or the PPM). The two-page SERP checklist developed in response to Recommendation 21 was especially flagged as taking a long time to complete.[51] We acknowledge that this is a possible limitation of the checklist, but we are also of the view that it is the best way of ensuring that:

- all key elements of the Taser policy are complied with
- the SERPs consider all relevant issues when reviewing Taser uses
- all Taser uses are reviewed and documented in a consistent way throughout the QPS.

The SERP Quality Control Committee to be established by the QPS may further consider the utility of the current checklist once it is operational.

Another related problem raised in some regions was that, since the inception of SERPs, more and more types of incidents have come under their purview, thus increasing the workloads of both the officers who manage the SERPs and the actual SERP meetings. For example, officers in

51 The checklist highlights an array of matters that need to be considered by reviewing officers, including:
- whether the necessary reports have been submitted
- the circumstances in which the Taser was used (e.g. Was there a risk of serious injury?)
- in what mode the Taser was used
- whether the use complied with the QPS Taser policy (e.g. Was the Taser deployed against a person who was handcuffed? Was the Taser deployed against a child?)
- whether any necessary prior reviews have been conducted
- whether the use was authorised, justified, reasonable, legally defensible, and tactically sound and effective.

one region advised us that their SERP might review up to 100 matters a month. It is likely that, as more and more matters are reviewed by the SERP, less time will be spent discussing individual incidents, reducing the rigour of the process.

The QPS's review of SERPs made several recommendations to expand the scope of SERP matters to include a range of incidents not currently defined as 'significant event review matters'. It is beyond the scope of our evaluation to comment on the appropriateness of these recommendations, other than to say that the QPS needs to be mindful of the amount of work involved in the SERP process at the region or command level. In the interests of ensuring that SERPs conduct effective and thorough reviews of Taser uses, and all significant event matters, there needs to be proportionality between the amount of work conducted by SERPs and the resources available to do it.

Service-wide monitoring and review processes

Audits of Taser use

In response to Recommendation 23a, the QPS's TRIG conducted an audit in late 2010 of all Taser uses that occurred between the introduction of the revised policy (22 September 2009) and 31 July 2010. The review was conducted in three stages, focusing on:

1. All multiple and/or prolonged Taser discharges
2. Apparent deviations from QPS Taser policy, procedures or training
3. Accidental/unintentional deployments.

Drawing on the TUR, significant event message and data download where applicable, the TRIG audit found that, of the 310 incidents examined, 31 (10.0%) involved multiple and/or prolonged discharges[52] and 10 (3.2%) involved possible deviations from QPS Taser policy, procedure and/or training. Each of these 41 incidents was returned to the relevant SERP for further consideration.

Except one incident that is the subject of an ongoing internal investigation (see page 66), all incidents were re-reviewed by the relevant SERP by December 2010. A full report on the outcomes of the audit was subsequently provided to the Taser Review Steering Committee, advising that further training and/or managerial guidance had been recommended for seven incidents considered in the audit. The remaining 33 incidents were found to comply with QPS policy. Further information about the findings of the audit is provided on pages 68–9.

Encouragingly, the decision to audit all multiple and prolonged Taser discharges is a clear demonstration that extra scrutiny is provided for these sorts of incidents as required by the revised Taser policy (as a result of the implementation of Recommendation 4 from the QPS–CMC review). Anecdotally, we were told that the audit also appears to have led to the SERPs giving greater consideration in the first instance to incidents involving multiple or prolonged discharges.[53]

TRIG has continued to review all Taser uses on a daily basis. Any use that raises possible concerns is noted and subsequently examined against the findings of the SERP. Any problems identified are addressed on a case-by-case basis as part of TRIG's audit and moderation process.

52 Note that this figure (10.0%) refers to the percentage of *incidents* (including those where the Taser was merely presented) that involved multiple and/or prolonged discharges, as identified by the QPS. The figure provided on p. 68 (around 40%) refers to the percentage of *subjects who had a Taser deployed at them* who were the target of multiple and/or prolonged discharges, as identified by the CMC. This difference in the unit of analysis explains the difference in percentages.

53 Note, however, that officers in the regions who were asked whether any extra or special review processes were undertaken when Taser incidents involved particular risk factors consistently said that the same model is used to review all incidents.

Identified exceptions are moderated at the Deputy Commissioner level to identify trends in usage and overview procedures at the officer, division, district, region and QPS-wide levels. According to the QPS's submission, moderation meetings are now conducted periodically with the Deputy Commissioners, with a focus on overviewing finalised SERP reports and highlighting recent notable deployments.

The QPS has advised us that the audit and moderation processes conducted by TRIG and the Deputy Commissioners will be reassigned in early 2011 to the Inspectorate and Evaluation Branch (IEB) of the ESC.

Review of significant event messages by the ESC

All significant event messages, including those relating to Taser uses, are reviewed daily by the Internal Investigations Branch (IIB) of the ESC. Where a significant event message raises any suspicion of improper conduct by a police officer (a breach of discipline or misconduct), the IIB can generate a file on the matter in the Client Service System (CSS), the system used by the QPS to manage complaints and disciplinary matters. The IIB may also request that the relevant region or command complete a more detailed report on the incident.

Other continuous improvement processes

Audits of data downloads

One avenue for monitoring Taser use according to best practice is to periodically cross-check data downloaded from Tasers with information contained in Taser usage reports and equipment registers (see Alberta Solicitor General and Public Security 2009; Cronin & Ederheimer 2006; Office of the Maryland Attorney General 2009; PERF 2005; WAPOL 2010). Such audits are intended to increase accountability by ensuring that deployments are being reported as required by agency policy.

In January 2010, TRIG published Taser Risk and Compliance Guidelines recommending that station OICs ensure that:

a. data are downloaded from each Taser at least every six months
b. at least a one-month sample of this data is cross-checked against the Taser register (used to record spark tests) and reported deployments.

Information we received from the regions indicated that these audits were being undertaken in some stations, but not all. To ensure that Taser deployments are audited effectively and consistently throughout the QPS, the CMC recommends that the QPS Taser policy be updated to require OICs to conduct regular audits of Taser data downloads.

Recommendation 17

That the QPS Taser policy (Section 14.23 of the OPM) be modified to require station OICs to ensure that data are downloaded from all station Tasers and a sample of the data is cross-checked against the Taser register and reported Taser deployments at least every six months, with a view to identifying any unreported deployments.

Monitoring SERPs and using their findings to improve QPS practices

We received conflicting advice on whether mechanisms exist to facilitate high-level review and improvements to practice. There was a perception among the regional officers we consulted that little is occurring at a QPS-wide level with the information coming out of SERPs, particularly in terms of sharing findings, identifying trends, and instigating changes to policies and procedures.

On the other hand, we were advised that information generated by the SERPs might actually be fed back through several existing mechanisms — such as the QPS's Strategic Risk Management Committee, the Senior Executive Conference, and various operational, policy and training units — to effect change and improve practice across the service. The CMC, however, could not determine that this had in fact ever been done.

The QPS review of SERPs also identified problems in this area. The review recommended that, to deal with these and other problems (such as inconsistencies across SERPs), a SERP Quality Control Committee should be established. Approval for this has been granted by the QPS, and it is anticipated that the committee will be responsible for:

- analysing SERP minutes
- identifying issues that have service-wide implications
- identifying and addressing inconsistencies in SERP recommendations
- providing feedback to the SERPs.

It is envisioned that the committee will comprise an A/C and three Chief Superintendents, and would be supported administratively by the IEB within the ESC.

The CMC strongly supports the QPS's undertaking. We believe that central overview of SERPs will help to ensure that SERP findings are collated and examined to identify trends in Taser use, identify opportunities for organisational learning, and drive changes to policy, procedures and training. In this way, the stated aim of SERPs to promote 'a culture of continual improvement' is likely to be better achieved. We also believe that, as alluded to previously, central overview of SERPs will help to:

- improve the objectivity and robustness of SERPs
- monitor the extent to which individual SERPs critically examine officers' actions and decision making with a view to identifying opportunities for learning and improvement
- ensure consistency in SERP activities and reports.

In light of issues raised by officers in the regions, we recommend that the SERP Quality Control Committee should also ensure that SERP findings are disseminated throughout the QPS where relevant.

Recommendation 18

That the SERP Quality Control Committee to be established by the QPS disseminate findings and trends from SERPs across the service where relevant so that individual regions and commands are aware of important usage trends, innovations and activities emerging in other areas.

Trial of Taser Cams and BWV cameras

In response to Recommendation 24 from the QPS–CMC review, the Taser Review Steering Committee approved in October 2009 a six-month trial of Taser Cam, a video recording device that attaches to the base of the Taser. When the Taser is activated (by disengaging the safety switch), the Taser Cam begins recording, allowing audio and video footage of incidents involving the activation of a Taser to be captured. This footage is designed to provide a range of benefits, including an additional accountability mechanism to ensure the proper use of Tasers by police and a protection for officers against false complaints.

The key objectives of the QPS's Taser Cam trial were to:

- assess the operational effectiveness of Taser Cam–equipped weapons
- assess the benefits of using Taser Cam, particularly in terms of its evidentiary capabilities
- assess the risks or disadvantages of using Taser Cam (for example, the possibility that officers may prematurely disengage the Taser's safety switch to start recording)
- examine the costs and resources involved in introducing Taser Cams.

To achieve these objectives, the evaluation of the trial involved:

- an analysis of relevant Taser uses
- a technical analysis of the audio and video footage recorded by Taser Cams
- focus groups with relevant officers in the trial districts
- a literature review to identify any similar trials conducted in other jurisdictions.

The initial six-month trial started on 1 January 2010 in the QPS's Logan and Caboolture districts. For the first three months of the trial, each district was provided with five Taser Cams to be carried by 10 nominated officers at the rank of Sergeant or Senior Sergeant. For the final three months of the trial, the Taser Cams in each district were also carried by a further 10 officers at the rank of Constable and Senior Constable.

As of May 2010, only one operational deployment had been recorded by the Taser Cams being used in the trial districts.[54] The Steering Committee decided that the trial should therefore be extended for a further six months (that is, until 31 December 2010). The Steering Committee also extended the trial to include 10 additional Taser Cams in two additional districts (Townsville and Ipswich).

At this time, the Steering Committee also approved a six-month trial of another kind of video recording device — BWV cameras.[55] The objectives of the BWV trial were consistent with those of the Taser Cam trial, and the same evaluation methods were used. The trial of BWV began on 1 July 2010 in the Townsville and Toowoomba districts. Each district received five BWV devices to be carried by Taser-qualified General Duties officers nominated by the stations' OICs.[56]

As of December 2010, only two operational Taser deployments had been captured on the video recording devices. At this time, the Steering Committee endorsed the extension of the Taser Cam trial (including the BWV trial) to 31 March 2011.

The Taser Cam trial to date has identified 'some operational limitations and difficulties involved with the use of the Taser Cam' (QPS submission). These include relatively low-quality audio and video, and officers having difficulties carrying the Taser Cam–equipped weapons on their belts. Similar limitations have been consistently noted in other jurisdictions where the devices have been trialled or are used (see WAPOL 2010).

The QPS has advised that a final evaluation report will be provided to the Steering Committee after the completion of the field trials.

54 The trial evaluation plan had acknowledged that a key risk of the trial was that the number of incidents recorded may not be sufficient to allow meaningful conclusions to be drawn. Only 14 deployments had been reported in the two trial districts in the equivalent 6-month period of 2009.

55 BWV cameras are typically clipped to either the front of the officer's shirt or one of their epaulettes.

56 The two districts trialled different brands of BWV — Muvi in Townsville and VIEVU in Toowoomba.

Electrical output testing

In response to Recommendation 23b from the 2009 QPS–CMC review, the QPS commissioned John Southwell, a biomedical engineer from Victoria, to test the electrical output of six of the service's Taser X26s, and three each of the two alternative CEWs tested by the QPS (see the following section). The aim of the testing was to examine the electrical safety of the three CEW models in terms of the likelihood of the weapon causing ventricular fibrillation (VF), a kind of severely abnormal heart rhythm that may be fatal.

The resulting report concluded that, based on the QPS weapons tested, the current output of the Taser X26 is 'significantly below' the threshold for VF set out in the relevant Australian/New Zealand standards.[57] The report also found that the outputs of the Taser X3 and Stinger S200-AT weapons were also below the threshold for VF.

Also relevant here is advice from the QPS that a new desktop electrical testing device was demonstrated at the Australasian CEW Forum hosted by the QPS in October 2010 (QPS 2010). If satisfactory, this device would allow regular testing of the electrical output of Tasers to be conducted by suitably trained QPS officers, rather than these services having to be contracted out to a biomedical engineer as previously. The QPS submission recommended that, subject to independent testing to ensure the accuracy of the device, the QPS should purchase three of these CEW Testing Units (at a cost of around $12 000 each) for use at the police armoury and the two police academies.

In light of international best practice, the CMC agrees that the QPS should purchase these units and implement a Taser testing regime, the purpose being to ensure that its weapons are not producing too much or too little electrical output compared with the manufacturer's specifications (see, for example, CBC News 2010). This recommendation is consistent with the findings of recent international inquiries into the use of Tasers and with policies in overseas jurisdictions (see Alberta Solicitor General and Public Security 2009; CPC–RCMP 2009; Office of the Maryland Attorney General 2009; Public Safety Canada 2010; RCMP 2010).

Recommendation 19

That, subject to independent testing to ensure the accuracy of the device, the QPS purchases CEW Electrical Testing Units. Once acquired, the QPS should ensure that electrical output testing is conducted:

- **on every Taser before it is put into training or operational use**
- **annually on a sample (at least 10%) of all Tasers in the QPS's inventory (ensuring geographical representation)**
- **where a person has died or suffered serious injury after being exposed to the effects of a Taser.**

The purpose of these tests should be to ensure that the weapons are operating within the technical parameters specified by the manufacturer.

Continued search for the best available CEW

In response to Recommendation 22 of the QPS–CMC review, TRIG conducted a marketplace review in September 2009 to identify any CEWs that may have the recommended accountability mechanisms. Through internet research, consultations with other police services and a review of previous tenderers, the QPS identified two weapons as possibly being suitable — the Taser X3 (see TASER International 2010) and the Stinger S200-AT (see Stinger Systems 2010).

57 AS60479 Parts 1 and 2: *Effects of current on human beings and livestock.*

In early 2010, the two CEWs were subjected to a series of 12 test exercises that reflected the four evaluation criteria — operational effectiveness, safety, accountability and information technology components.[58] An independent probity auditor, BDO, was appointed to oversee the testing process and provide a written report on the evaluation. BDO's final report in March 2010 commented very positively on the impartiality, transparency and integrity of the evaluation process. Having reviewed the Project and Evaluation Plan and evaluation report, and having had a CMC representative observe some of the test exercises, the CMC too is satisfied that the QPS undertook a thorough and transparent evaluation of the new weapons.

After the evaluation, the QPS concluded that both of the new CEWs failed to meet its requirements with respect to operational effectiveness and accountability mechanisms. The CMC advised the QPS in July 2010 that it accepted the service's conclusions, but that it still had ongoing concerns about the Taser's capacity to continuously discharge electrical currents for prolonged periods. The CMC also reaffirmed its stance that the CEW used by the QPS should be able to record the number and duration of trigger pulls. While acknowledging that these capabilities did not appear to exist in any particular CEW available at that time, the CMC requested that the QPS continue to monitor developments in CEW design to ensure that the safest and most accountable weapon is eventually acquired.

Currently, the QPS is continuing to monitor the CEW marketplace. Relevant to this, the CMC understands that the Police Executive Research Forum (PERF) in the US wrote to TASER International in mid-2010, asking that it consider revising the Taser to suit the requests of law enforcement agencies. After the 2010 Australasian CEW Forum, it was agreed that a similar strategy will be progressed through the Australia New Zealand Policing Advisory Agency (ANZPAA) in 2011 on behalf of agencies in Australia and New Zealand (QPS submission).

A US media report in October 2010 stated that, in response to PERF's request, TASER International had agreed to offer a weapon that would deliver only one five-second discharge per trigger pull by early 2011 (McKinney 2010). If this eventuates, it would address some of the concerns the CMC raised in the QPS–CMC review report, and that still remain.

The continued monitoring of the CEW marketplace by the QPS should ensure that any improved weapons are identified. The QPS's submission to our evaluation recommended that its Operational Research and Advisory Unit (ORAU) be tasked to maintain a watching brief for future developments in CEW technology, with particular emphasis on replacing the Taser X26 at the end of the warranty period (2014–15). Consistent with this, the CMC recommends that the ORAU maintain such a watching brief to ensure that the QPS uses the most operationally effective, safe and accountable CEW available.

Recommendation 20

That the QPS's Operational Research and Advisory Unit be tasked to maintain a watching brief for future developments in CEW technology, with a particular emphasis on ensuring that the QPS uses the most operationally effective, safe and accountable technology. In particular, the QPS should continue to seek a weapon that has the ability to record trigger pulls, limits the length of cycles and restricts the number of times that the weapon can be cycled during an individual incident.

58 The results achieved by the two alternative CEWs were compared with those achieved by the Taser X26 in a 2008 QPS evaluation of CEWs and during additional testing conducted in 2010.

Ongoing analysis of Taser usage data

As noted in Table 5.1, Recommendation 26 relating to the development of a research plan and protocols to manage collaborative research between the CMC and the QPS into Taser use in Queensland has not progressed. The CMC's current evaluation has meant that other Taser-related research has had to be postponed.

The QPS submission to our evaluation suggested that this recommendation be finalised in light of the CMC's current evaluation. We do not, however, share this view and believe that the two agencies should begin work on this recommendation after the completion of this evaluation to ensure that:

- Taser usage data continue to be collected and analysed to allow assessment of Taser use in Queensland and identification of trends that may indicate a move away from the QPS policy or best practice
- developments in best practice Taser policy, procedures, training and monitoring continue to be assessed.

A related issue concerns the provision of regular monitoring reports on Taser use, an area where we identified a gap between current QPS processes and best practice.

Although no such reports have been produced by the QPS to date, many inquiry reports over the last two years have argued that police agencies should be required to regularly examine and report on trends in their officers' use of Tasers to facilitate monitoring and external accountability (for example, Federation of Community Legal Centres (Victoria) 2010; Harris 2009; Office of the Maryland Attorney General 2009; Ontario Policing Standards Advisory Committee 2009). Model policies and guidelines in several overseas jurisdictions support this practice (for example, Alberta Solicitor General and Public Security 2009; Cronin & Ederheimer 2006; Ontario Ministry of Community Safety and Correctional Services 2010; PERF 2005; Public Safety Canada 2010). Such reporting requires the collection and rigorous analysis of comprehensive data on Taser use, and allows the agency to assess the effectiveness of Tasers and identify any concerning usage patterns. This information can then be used to identify training needs or other gaps in the organisation's policies and procedures.

The CMC believes that regular monitoring reports on QPS Taser use would be highly beneficial in light of some of the emerging issues we identified in Chapter 4, such as the slight increasing trend in Taser use and an upward trend in the number of subjects with a suspected mental health condition. Regular monitoring reports would also help to identify any signs of mission creep as they arise, while also allowing problems such as accidental deployments to be addressed. Consistent with this, we recommend that the QPS (a) provide annual reports on Taser usage to the CMC and (b) publicly report on the number of Taser uses each year in the QPS Annual Statistical Review.

Recommendation 21

That the QPS:

a. provide annual monitoring reports on Taser usage by QPS officers to the CMC; the monitoring reports should at least include analysis of:

- **aspects related to mission creep:**
  - **the number of operational Taser uses, both in total and according to the nature of the use (that is, presentation, probe deployment, drive stun deployment, probe and drive stun deployment)**
  - **the percentage of Taser uses that involve a subject who reportedly posed a risk of serious injury**
  - **the kinds of situations and subject behaviours that Tasers are used in response to**
  - **the percentage of Taser uses that are judged appropriate by the SERP**
- **aspects related to the use of Tasers in ways that may increase the risk of subjects experiencing adverse health effects:**
  - **the percentage of subjects against whom a Taser is deployed who are the target of multiple and/or prolonged discharges**
  - **the percentage of Taser uses that involve a subject who was previously sprayed with OC spray**
  - **the percentage of subjects with a suspected underlying mental and/or physical health condition**
  - **the percentage of subjects suspected to be under the influence of alcohol and/or drugs**
  - **the percentage of subjects who are Indigenous**
- **the percentage of subjects against whom a Taser is deployed who sustain a possible Taser-related injury or complication**
- **the number of accidental Taser deployments.**

Each of the above areas should be examined with a view to identifying any trends over time.

b. report the number of Taser uses (in total and according to the nature of the use) each year in the QPS Annual Statistical Review.

APPENDIX 1:
Notes on information sources

How we used the information sources

Table A1.1 indicates how we used our various information sources to answer each of our seven research questions.

Table A1.1: Research questions and information sources

Question	Information sources
1. To what extent have each of the 27 recommendations from the QPS–CMC review report been implemented? (Term of Reference 1)	• QPS submission • Examination of QPS documentation • Consultations with QPS officers • Observation of QPS processes
2. What effects has the QPS's revised Taser policy had on the use of Tasers by QPS officers? (Term of Reference 2)	• Analysis of Taser usage data collected by the QPS • Examination of Taser-related complaints to the CMC • Consultations with QPS officers
3. What effects has the QPS's revised Taser training had on the use of Tasers by QPS officers? (Term of Reference 3)	• Analysis of Taser usage data collected by the QPS • Consultations with QPS officers
4. What has been the nature of Taser uses by QPS officers since the introduction of the revised policy? (Term of Reference 4)	• Analysis of Taser usage data collected by the QPS • Consultations with QPS officers
5. Is there evidence of 'mission creep' or any other emerging trends in the use of Tasers by QPS officers? (Term of Reference 6)	• Analysis of Taser usage data collected by the QPS • Consultations with QPS officers
6. What monitoring and continuous improvement processes are in place to examine the use of Tasers by QPS officers? (Term of Reference 5)	• Consultations with QPS officers • QPS submission • Observation of QPS processes
7. What recent advances have been made in international best practice with respect to Taser design, policies, procedures, training and monitoring processes, and do these indicate any gaps in QPS policy and practices that need to be rectified? (Term of Reference 7)	• Review of Taser policies and practices in other jurisdictions • Literature review

Limitations of the QPS Taser usage data

As identified in Chapter 1, there were four major limitations to the QPS Taser usage data we analysed. These limitations are explained in greater detail below, along with some ways in which we attempted to overcome them.

1. *Inaccuracies and incompleteness in the data obtained from the TURs.* The nature of the TUR, the difficulty officers may have in recalling details of high-stress incidents, the length of time it can take to enter comprehensive information and the competing demands on police officers may all adversely affect the accuracy and completeness of the data entered by reporting officers. In preparing our data for analysis, for example, we noticed that officers' narrative descriptions of the incident did not always correspond to the information they had entered in other parts of the report. Where possible, we have tried to counter these problems (for example, by considering additional information provided in the narratives). Nevertheless, it is important to recognise that there are possible inaccuracies in the data.
2. *Inaccuracies in the data obtained from the data downloads.* Although the Taser is designed to record the length and time of each activation, there are several possible problems with the accuracy of this data. It may be, for example, that the clock on the weapon is not accurate. In some cases, this meant we had difficulty determining whether two or more weapons were deployedsimultaneously against a person because the weapons recorded different times. A more common problem was that some of the Taser weapons had malfunctioned and reset themselves to an incorrect date (for example, reverting to a date in 2000 or 2001 from a date in 2009 or 2010), making it impossible for us to identify the relevant data download for a given Taser deployment. It is important to bear these possible problems in mind when considering the download data presented in Chapters 3 and 4.
3. *Incompleteness and insufficient detail in the data obtained from the SERP minutes/reports.* The QPS was not able to locate documentation from one SERP meeting held within the study period, and the minutes we received from another meeting were incomplete. We were therefore limited in our ability to fully assess the incidents reviewed by these SERPs, and the SERP processes themselves. Furthermore, the level of information contained in the SERP reports varied considerably between regions, and sometimes within regions depending on the month. Some reports provided very little detail at all, about either the incidents that were reviewed or the processes undertaken by the SERP.
4. *Inaccuracies in information about officers' Taser training.* In a small number of cases, the information provided to us by the QPS suggested that the officer who had used the Taser had not completed a Taser training course before their Taser use. In some of these cases, we were able to verify from the SERP reports that the officer was in fact Taser-qualified, indicating that any discrepancies were due to some training courses completed by the officer not being recorded in the Advance2 system. Where the Advance2 records appeared to be inaccurate for this reason, we excluded these cases from our analyses. It is possible, however, that there were other inaccuracies that we could not control for — for example, if an officer had completed the revised Taser training, but this was not recorded in Advance2. Any such inaccuracies will have adversely affected the results of our analyses in Chapter 3 and are important to bear in mind.

APPENDIX 2:
Draft Taser policy recommended by the QPS–CMC review

This is the draft policy recommended in Recommendation 27 of the 2009 QPS–CMC review. The policy was adopted in full by the QPS as of 22 September 2009 and continues to be in effect as Section 14.23 of the OPM.

ATTACHMENT 1 – DRAFT TASER POLICY

14.23 Conducted Energy Weapon (Taser)

Taser is a brand name of one of a number of weapons in the general category of 'Conducted Energy Weapons' (CEW). It is a hand held neuro-muscular disruption device capable of temporarily incapacitating a person and causing pain through the application of an electrical current.

The Taser has two main capabilities, probe mode and drive stun mode.

In the probe mode a Taser uses propelled wires/darts, to deliver short duration high voltage electrical pulses into the body which affect the sensory and motor functions of the nervous system. The electrical charge transmitted by a Taser causes the subject person to experience involuntary muscular contractions, rendering the person temporarily incapacitated or unable to perform coordinated action until the device is deactivated. Unlike batons or OC spray, probe mode does not rely on pain compliance alone and is effective regardless of the size, strength, mental condition or pain threshold of the subject person.

The drive stun mode uses direct contact of the Taser to the body or clothing of a person and causes significant discomfort in the area where the Taser is applied. The drive stun mode does not have a significant effect on the central nervous system and does not immobilise a person. As such it may not be effective on people who are highly motivated, mentally disordered or drug/alcohol affected. The drive stun mode can also be used in combination with the probe mode to complete an incapacitation circuit.

Tasers are 'Category R' weapons, as defined in s. 8(f) of the Weapons Categories Regulation 1997.

14.23.1 Issue of Tasers

Tasers will be issued to police stations and establishments for use by officers as part of the performance of their duty. The logistical distribution of Tasers within each region or command is at the discretion of the officer in charge of that region or command.

14.23.2 Taser training

POLICY

Officers are not to use or carry a Taser unless they:

(i) have successfully completed the relevant Taser training course;

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(ii) are currently qualified in Operational Skills and Tactics (OST) training (see s. 14.3.1: 'Operational Skills and Tactics (OST) training' of this chapter).

Officers who successfully complete the Taser training course will need to requalify in the use of a Taser on an annual basis. This annual re-qualification will be undertaken as part of Block 3 OST training (see s. 14.3.1 of this chapter).

The Chief OST Instructor is responsible for ensuring the necessary systems are in place to provide Taser training to nominated officers.

14.23.3 Use of Tasers

The use of a Taser's capabilities, in either the probe mode or drive stun mode, should be determined by the circumstances existing at the time, bearing in mind the 'Situational Use of Force Model' (see s. 14.3.2: 'Situational Use of Force Model - 2009' of this chapter). Officers are reminded the Service's philosophy of 'Consider all Options and Practise Safety' (COPS) should be embraced when dealing with incidents which may require the use of force.

POLICY

Officers should only use the minimum amount of force necessary to resolve an incident.

There must be a risk of serious injury to a person before an officer can deploy a Taser. The decision to apply force or use a Taser is an individual one for which every officer will be held accountable.

Every decision to use force should be the subject of a continuous assessment prior to the application of another use of force.

Officers should consider all the 'use of force' options available to them and all the circumstances of an incident when determining the most appropriate 'use of force' option(s) to be used.

Prior to using a Taser in either mode, officers should:

(i) verbally warn the subject person(s) where practicable; and
(ii) be mindful of the area in which the subject may fall. In probe mode the Taser causes temporary incapacitation which may cause the subject to fall down. Injuries may be sustained by the subject where this occurs.

A Taser should not be used in either mode:

(i) against persons offering passive resistance (e.g. refusing to move or offering little or no physical resistance and refusing to comply with police instructions. A

person acting as a dead weight or requiring an officer to lift, pull, drag or push them in order to maintain control);

(ii) against persons that are handcuffed unless exceptional circumstances exist;

(iii) as a crowd control measure (e.g. for crowd dispersal at a demonstration or industrial dispute);

(iv) against the occupants of a vehicle or the operator of machinery where there is a danger of the vehicle or machinery going out of control and injuring the occupants or other people;

(v) against juveniles or persons of particularly small body mass, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of serious injury;

(vi) against females suspected on reasonable grounds of being pregnant, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of serious injury;

(vii) near explosive materials, flammable liquids or gases due to the possibility of ignition;

(viii) punitively for purposes of coercion or as a prod to make a person move;

(ix) to rouse unconscious, impaired or intoxicated persons;

(x) on persons where there is a likelihood of significant secondary injuries (particularly concussive brain injury) from a fall (e.g. standing on a ladder or other elevated position); or

(xi) on elderly persons, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of serious injury.

Deployment of a Taser

A single deployment of a Taser is characterised by one five second cycle in either probe or drive stun mode. Any deployment of a Taser on an individual beyond this single cycle is considered a multiple or prolonged deployment.

Officers are to use the Taser on persons by application of one five second cycle.

Officers should be aware that there may be technical or physiological reasons why the device is not working as expected on a particular individual. Therefore, if the initial application of the Taser in either the probe or drive stun modes is not effective, officers should reassess the situation and consider other available use of force options.

Officers are not to use the Taser in a prolonged fashion by holding the trigger down for a period greater than five seconds unless exceptional circumstances exist.

Additional cycles (one trigger pull – five seconds) may be applied in exceptional circumstances after the officer has reassessed the situation prior to each additional cycle.

Officers are reminded that a subsequent use of the Taser or any prolonged use (greater than five seconds) will be scrutinised and will need to be justified. While all use of force is scrutinised, officers should be aware that the greater the use (multiple or prolonged) of a Taser, the greater the level of scrutiny that will be applied.

Officers should be aware that multiple or prolonged uses of a Taser have been linked to deaths, particularly where:

(i) use of the Taser was accompanied by the use of restraints or chemical incapacitant sprays (e.g. OC spray);
(ii) subjects had underlying health problems such as heart conditions or mental illness;
(iii) subjects were under the influence of drugs and/or alcohol;
(iv) subjects were struggling violently for a sustained period; or
(v) a combination of these factors existed.

There are cases where such persons exposed to the effects of Taser have died some time after being exposed. It is however, recognised that there are circumstances where the only alternative may be the use of a potentially lethal firearm or where the activation of the Taser irrespective of the additional risk is absolutely necessary to protect life.

14.23.4 Use of more than one Taser

POLICY

Officers must not use two or more Tasers on the one person at the same time.

14.23.5 Using the Taser on people who are suspected mentally ill

POLICY

Occasions will arise where it is necessary to use the Taser on a person who is exhibiting violent behaviour and who is also suspected suffering from a mental disorder or illness. When responding to a mental health incident officers are to ensure the assistance of the QAS is requested and where possible, discuss options with mental health professionals (refer to section 6.6, Mental Health Intervention of the OPM).

14.23.6 Special precautions to avoid eye and head injuries

There is a specific risk of injury to the eye through penetration of a barb. Barb penetration in the neck or head may also increase the level of injury.

POLICY

Tasers should not be aimed so as to strike the head or neck of a subject unless this is unavoidable.

The laser sight should not intentionally be aimed at the eyes of the subject.

14.23.7 Voluntary exposures to Taser

POLICY

Voluntary exposures are only to be undertaken as part of Taser training by a qualified Taser instructor.

Exposure is to be limited to one five second cycle and is not to occur unless the officer being exposed has read a QPS approved facts/information sheet and signed the appropriate waiver prior to the exposure. Members of the QPS are not to undertake voluntary exposures for members of the public. Members of the QPS are not to undertake voluntary exposures at police stations/establishments unless the exposure is part of Taser training by a qualified Taser instructor.

14.23.8 Probe removal and disposal

POLICY

Probe removal and disposal is to be conducted in accordance with the procedures outlined in the Conducted Energy Weapon - Taser Good Practice Guide.

Where probes are imbedded in sensitive tissue areas (e.g. neck/throat, face, breast or groin) medical aid should be sought to remove the probes.

Officers in charge of stations or establishments should ensure suitable probe removal and disposal equipment (i.e. protective gloves, sharps container, alcohol wipes/swabs and band aids) is available in all operational vehicles under their control.

14.23.9 Aftercare

A person who has been Tasered:

(i) should recover quickly. The incapacitating effect of the Taser ends when the trigger is released and the unit is deactivated;

(ii) may feel dazed for several seconds;

(iii) may experience tingling sensations for a short period afterwards; and

(iv) may exhibit minor skin irritation, temporary blisters or redness at the site of application.

The application of a Taser should not affect or damage a pacemaker, or cause permanent damage or long term effects to the subject person's muscles, nerves or other body functions. However, it should be recognised that the subject person may have pre-existing injuries or medical conditions and/or secondary injuries from falling down when incapacitated by the Taser.

POLICY

If required, the officer who deployed the Taser is to ensure first aid and/or medical attention is provided to the subject person, as necessary.

See s. 16.13.1: 'Assessment of prisoners' and Appendix 16.1: 'The assessment of prisoners and persons in custody' of this Manual.

PROCEDURE

When medical attention or treatment is required, the deploying officer should notify the Duty Officer, Police Communications Centre (PCC) Brisbane, or in areas outside of those covered by PCC Brisbane, the communications coordinator of the relevant PCC, and request the attendance of the Queensland Ambulance Service (QAS). Where it is impractical to obtain the attendance of the QAS, the officer should arrange to have the subject person taken to the nearest facility providing medical attention.

14.23.10 Reporting the use of a Taser

For the purpose of this section, the term 'use' includes:

(i) deploying or firing the probes against a person or animal, or in the direction of a person or animal;

(ii) pointing a Taser in the direction of a person without deploying or firing the probes;

(iii) using the drive stun mode against a person or animal; or

(iv) holding/pressing a Taser against a person without activating it.

POLICY

After an incident involving the use of a Taser, the officer who used the Taser should:

(i) notify as soon as practicable:

(a) the Duty Officer, Police Communications Centre (PCC) Brisbane to ensure the incident is recorded on the CAD system; or

(b) in areas outside those covered by PCC Brisbane, the communications coordinator of the relevant PCC to note on the CAD system or their Running Log as the case may be; or

(c) in areas where no police communications centre exists, the officer in charge for the time being of the station responsible for policing the area where the incident has occurred; and

(ii) prior to the end of the shift:

(a) complete and submit a 'Taser Usage Report', which is available on the Operations Support Command, 'Taser Implementation' webpage on the QPS Intranet (Bulletin Board); and

(b) ensure a significant event message is submitted outlining the circumstances of the deployment (see s. 1.6.10: 'Significant Event Messaging System' of this Manual). When completing the significant event message, the drop down menu in the subject field must be used and 'Taser Deployment' selected as the subject. Within the significant event message a summary of the incident should be provided including:

- the subject's behaviour and actions;
- the weapon(s) used or available to the subject;
- whether the subject was affected by alcohol and/or drugs;
- the perceived degree of threat to police and/or others;
- other persons involved;
- the officer's actions;
- whether the probes were deployed, drive stun used, or was the Taser pointed towards or held against the subject without activation;
- whether a verbal warning was given and if not, why not?; and
- whether any injuries were sustained and/or medical treatment required/provided by any person.

The Duty Officer, communications coordinator or officer in charge notified of an incident involving a Taser is to advise the appropriate regional duty officer (RDO) or district duty officer (DDO).

The officer in charge where the police officer using a Taser is stationed, is to:

(i) ensure that a 'Taser Usage Report' and significant event message has been submitted in relation to the incident; and

(ii) overview the incident to determine whether the use of the Taser was in accordance with Service policy and procedures.

Where practicable, the overview should include a face-to-face meeting between the officer in charge (or supervisor) and the officer who deployed the Taser.

If an officer deploys a Conducted Energy Weapon accidentally, or other than in accordance with OPM 14.23.8 Safety issues, the deploying officer is to:

(i) submit a Taser Usage Report outlining the circumstances of the incident;

(ii) notify the Shift Supervisor and OIC of the incident (and/or District Duty Officer /Regional Duty Officer per local SOPs);

(iii) in the case where any person was the subject of an unintentional Taser deployment in either probe or drive stun mode, or significant damage to property was caused by the deployment, a significant event message is to be generated. Data from this device will be downloaded within 72 hours per section 14.23.18 of the OPM;

(iv) the Shift Supervisor (or OIC, District Duty Officer or Regional Duty Officer) will then make inquiries with a view to establishing the cause of the incident (e.g. memory lapse, lack of proficiency of Taser user, mechanical failure, operational issues, deliberate disregard of established policies or protocols, deliberate misuse of CEW);

(v) the Shift Supervisor (or OIC, District Duty Officer or Regional Duty Officer) will make a recommendation on how the matter will be dealt with (e.g. officer not permitted to use a Taser until further training undertaken, managerial guidance, sent for formal investigation re: misuse).

If the use of the Taser was inappropriate or not in accordance with Service policy, see s. 7.2: 'Duty concerning misconduct or breaches of discipline' of the Police Service Administration Act 1990 and Chapter 18: 'Complaint Management' of the Human Resource Management Manual.

14.23.11 Carriage of a Taser

POLICY

Qualified officers performing operational duties should, where appropriate, carry a Taser, if one is available.

When removing a Taser from a gun safe or other approved safe provided by the Service at their respective station or establishment, members are to inspect and load the weapon in compliance with the procedures outlined in Chapter 6: 'Station procedures' of the Conducted Energy Weapon - Taser Good Practice Guide.

The Taser should be loaded with an air cartridge, ready for use, and carried on a utility belt in the holster provided for that purpose. A spare cartridge should be carried in the bottom of the 'extended digital power magazine' (XDPM).

Taser holsters should be carried securely fitted on a utility belt, on the side opposite the dominant hand, and worn in a 'crossdraw' manner (i.e. with the handle of the device facing forward).

Members are not to leave a Service Taser unattended in a vehicle or other place without good and sufficient reason. This may include:

(i) members having to attend a situation where the carriage of a Taser poses a risk to security or safety, e.g. riot, serious street disturbance or authorised assembly;
(ii) where the Taser restricts operational activity, e.g. members being involved in a rescue operation; or
(iii) where it is necessary for special operational situations or circumstances, e.g. hostage or suicide negotiations.

Carriage of Taser by plain clothes officers

POLICY

Qualified officers performing plain clothes duties may carry a Taser, if it is appropriate to the duties they are performing.

Tasers should only be carried by plain clothes officers:

(i) in the Service issued holster provided for that purpose; and
(ii) securely fitted on a dress belt (or utility belt if available), on the side opposite the dominant hand, and worn in a 'crossdraw' manner (i.e. with the handle of the device facing forward). Plain clothes officers are not to carry Tasers in Service issued bumbags, or in other locations or positions.

If carrying a Service Taser exposed to view, plain clothes officers should carry their identification badge in such a position that it is also visible to members of the public.

Carriage of Tasers on aircraft and at airports

POLICY

Officers who intend to carry conducted energy weapons (Tasers):

(i) on commercial passenger airlines/prescribed aircraft, are to comply with the relevant provisions of s. 14.11.1: 'Weapons and prohibited items on Commercial Passenger Airlines/Prescribed aircraft' of this chapter;
(ii) at airports, are to comply with s. 14.11.4: 'Carriage of weapons and prohibited items at airports' of this chapter; or
(iii) on Police Air Wing aircraft, are to consult with the relevant Air Wing Operations Coordinator for advice and direction regarding the carriage or storage requirements.

Carriage of Tasers in court

POLICY

Officers should not wear or carry a Service Taser, other than an exhibit, in court unless:

(i) authorised by the presiding magistrate or judge. This includes an officer performing duty as a court orderly; or

(ii) they are responding to an incident within those premises.

Carriage of Tasers in watchhouses

POLICY

Officers may carry Tasers in watchhouses. As with batons, oleoresin capsicum spray and handcuffs, there is no requirement for an officer to remove and store a Taser prior to entering a watchhouse.

Carriage of Tasers in correctional centres and detention centres

ORDER

Unless authorised or approved by the Chief Executive, Queensland Corrective Services, to take weapons into a correctional centre or detention centre, officers are to hand all Tasers to the correctional officer on duty at the entrance to a correctional centre or detention centre for safe keeping (see s. 128: 'Taking prohibited thing into corrective services facility or giving prohibited thing to prisoner' of the Corrective Services Act 2006).

Officers are to inspect all Tasers returned prior to leaving a correctional centre or detention centre to ensure they are undamaged.

See also s. 14.14.1: 'Carriage of firearms and ammunition in correctional centres and detention centres' of this chapter.

Carriage of Tasers in hospitals

POLICY

Officers should exercise their discretion in regard to the carriage of conducted energy weapons (Tasers) within the confines of an authorised mental health high security unit, or medium security unit (see s. 14.13: 'Carriage of firearms in hospitals' of this chapter). Officers should also consider the policy outlined in s. 14.6.2: 'Security of weapons' of this chapter.

14.23.12 Safety issues

POLICY

Members are to:

(i) treat every Taser as if it is armed and ready to deploy;
(ii) keep hands away from the front of the Taser at all times particularly when loading or unloading an air cartridge;
(iii) ensure the safety switch is activated and the Taser is in safe mode:
  (a) before handing it to someone else;
  (b) upon receiving it from someone else;
  (c) before loading or removing an air cartridge from a Taser;
  (d) when replacing the extended digital power magazine in the Taser; and
  (e) whenever the Taser is not intended for immediate use;
(iv) perform a static electricity earthing drill before handling live Taser air cartridges.

A build up of naturally occurring static electricity in a person's body may, in extreme cases, cause the air cartridge to malfunction when handled.

Accordingly, members should:

(i) ground themselves before handling, loading or unloading Taser air cartridges;
(ii) where practicable, load and unload Taser air cartridges in a designated safe weapon clearing area (see s. 14.2 Definitions and references to legislation in this chapter);
(iii) never aim the Taser at the eyes or face of a person;
(iv) never throw a Taser to someone else or attempt to catch a Taser;
(v) never point a Taser at any person, or in any direction where a person is likely to be, unless it is actually intended to use the Taser against that person;
(vi) observe security precautions consistent with the Weapons Act 1990 and Service policies; and:
(vii) not use, deploy or discharge a Taser unless in the performance of operational duties or Service approved training.

14.23.13 Storage

POLICY

Prior to ceasing duty, or where a Service Taser is not required for duty, members are to:

(i) unload any Service Taser in their possession in compliance with the procedures outlined in Chapter 6: 'Station procedures' of the Conducted Energy Weapon - Taser Good Practice Guide;

(ii) place the Taser in a gun safe or other approved safe provided at their respective station or establishment for the purpose (see Chapter 20: 'Minimum Storage Standards For Weapons Held in Police Facilities' of the Administration Manual);

(iii) store the Taser with the extended digital power magazine (XDPM) inserted at all times. The XDPM must not be removed from the Taser when stored. If the XDPM requires replacement it should be carried out prior to storage (see s. 14.23.12: 'Replacing the Extended Digital Power Magazine (XDPM) of this chapter); and

(iv) store any air cartridges, at their respective station or establishment, in a cool, dry and secure location, elsewhere to the Taser, with the blast doors of the air cartridges facing down.

Each member accessing a safe provided by the Service for the storage of Tasers is to ensure the safe is securely locked immediately after use.

Officers taking out or returning Taser equipment to its storage facilities are to complete the registers provided by the station or establishment for that purpose.

14.23.14 Inspection and maintenance

POLICY

When obtaining a Taser, air cartridges and holster at the commencement of a shift, officers should:

(i) inspect all equipment for visible signs of damage;

(ii) check the energy or battery level of the extended digital power magazine. If the energy level is less than 20%, see s. 14.23.12: 'Replacing the Extended Digital Power Magazine (XDPM)' of this chapter;

(iii) conduct a spark test for one second visually ensuring there is an arc between the electrodes;

(iv) check the expiration date of the air cartridges. If an air cartridge has expired see s. 14.23.11: 'Used, damaged or expired air cartridges' of this chapter; and

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(v) before loading an air cartridge in the Taser, ensure the safety is 'on', inspect and if necessary wipe out the air cartridge firing bay with a dry cloth.

Officers are to immediately report to their officer in charge any damage, defect or unsatisfactory condition relating to, or the loss of a Taser, air cartridge, XDPM or holster.

A Taser should not be exposed to significant moisture or water. If the Taser unit becomes wet, officers are to comply with the procedures outlined in Chapter 13: 'Cleaning and maintenance' of the Conducted Energy Weapon - Taser Good Practice Guide.

Officers in charge of stations and establishments are to:

(i) ensure an inspection of Tasers, air cartridges and other ancillary equipment under their control, is carried out on a monthly basis. Particulars of these inspections are to be recorded in a register kept for this purpose. (see s. 14.23.15: 'Recording of Taser equipment' of this chapter). Officers in charge of regions and commands may authorise that inspections of Tasers and ancillary equipment are undertaken at other specified time intervals in conjunction with local risk management practices; and

(ii) immediately report to the district officer or other supervising commissioned officer the loss of, any damage or defect to, or any unsatisfactory condition relating to Service Taser equipment and comply with the provisions of the Financial Management Practice Manual in relation to any losses and, where appropriate, the recovery of debts resulting from the loss or destruction or damage to property while in the care of members.

See also s. 14.23.13: 'Taser repairs and replacement' of this chapter.

14.23.15 Used, damaged or expired air cartridges

POLICY

Used or expended air cartridges may be disposed of as general refuse. However, prior to disposing of a used air cartridge, the serial number label is to be removed from the cartridge.

Air cartridges are to be forwarded to the Regional (or Command) Education and Training Coordinator, for training purposes if:

(i) they have passed their expiration date; or

(ii) the air cartridge has not been deployed but the blast doors have fallen off the cartridge. In such circumstances, although the cartridge may still fire, it may not do so reliably.

14.23.16 Replacing the Extended Digital Power Magazine (XDPM)

POLICY

When the XDPM energy level is less than 20%, a replacement should be obtained and inserted into the Taser.

The expended XDPM should then be forwarded to the Regional (or Command) Education and Training Coordinator, for training purposes.

When the XDPM energy level reads 1%, it is to be disposed of. Continued use beyond this energy level may cause potential data corruption in the Taser recording microprocessor.

To replace the XDPM in a Taser, officers are to comply with the relevant procedures outlined in the Conducted Energy Weapon - Taser Good Practice Guide.

14.23.17 Taser repairs and replacement

POLICY

Tasers which are damaged, defective or otherwise require servicing are to be forwarded to the Armoury Section, Logistics Branch.

PROCEDURE

Officers in charge of stations or establishments that require the repair or replacement of a damaged or defective Taser are to:

(i) contact the Armoury Section, Logistics Branch for advice concerning the necessary arrangements; and
(ii) where a replacement Taser is required, complete a QP413: 'Requisition for Weapons/Restricted Item' form and forward to the Armoury Section, Logistics Branch.

POLICY

If possible, the information recorded on a Taser is to be downloaded prior to forwarding the device to the Armoury Section, Logistics Branch (see s. 14.23.14: 'Downloading data from a Taser' of this chapter).

When a Taser is forwarded to the Armoury Section, Logistics Branch, any costs involved in the inspection, testing, repair or replacement of the equipment are to be met by the requesting region or command.

If a Taser is replaced or disposed of, the Manager, West End Supply Centre is to send a report outlining the description and serial number of the item and advising of its

destruction to the Officer in Charge, Weapons Licensing Branch, who is responsible for maintaining the QPS Weapons System.

14.23.18 Downloading data from a Taser

The Taser has an inbuilt system which can record the time, date, duration, battery status and the internal operating temperature at the time the Taser was used for its last 1500 activations.

POLICY

Where a Taser is deployed in either drive stun or probe mode, the relevant District Officer or Manager is to ensure that as soon as practicable but within 72 hours, the data from the Taser used is downloaded by a person qualified to do so. The data downloaded is to be provided to the Regional or Command Significant Event Review Panel as a priority.

Firearms Training Officers or Taser Training Officers will generally be the person qualified to download this data.

Where the Ethical Standards Command (ESC) or the Crime and Misconduct Commission assumes responsibility for investigation of a matter involving a Taser, the data download is not to be conducted without the approval of the Superintendent, Internal Investigations Branch, ESC.

PROCEDURE

If required for court or other purposes, or where a Taser is being returned to the Armoury Section, Logistics Branch for repair or replacement, officers in charge of stations or establishments should contact the Officer in Charge, Operational Research and Advisory Unit, and make arrangements for the information recorded on the Taser to be extracted.

POLICY

The Officer in Charge, Operational Research and Advisory Unit may arrange on a periodic basis the downloading of data from Tasers within the Service.

14.23.19 Recording of Taser equipment

POLICY

The Manager, West End Supply Centre, is responsible for ensuring that the following information is recorded on the Weapons Asset Control System:

(i) the district, or other organisational unit within the Service, each Taser and air cartridge is issued to;
(ii) the serial number of each Taser and air cartridge; and
(iii) the date of issue.

District officers or other organisational units are to maintain a local register of Taser equipment within their area of responsibility. Particulars to be recorded include:

(i) the date of receipt of each item;
(ii) the station or establishment each Taser and air cartridge is issued to;
(iii) the serial number of each Taser and air cartridge; and
(iv) the date, reason and method of disposal for each item.
(v) Officers in charge of stations or establishments are to maintain a local register of all Taser equipment issued to their station or establishment. Particulars to be recorded include:
    (a) the date of receipt of each item;
    (b) the serial number of each Taser and air cartridge;
    (c) the expiry date of each air cartridge;
    (d) the date each Taser and air cartridge was last inspected; and
    (e) the date, reason and method of disposal for each item.

Officers in charge of stations or establishments are to also maintain a local register for the purpose of recording the issue and return of Taser equipment each shift. At a minimum such registers should record:

(i) the time and date of signing the equipment in and out;
(ii) the serial number of each Taser and air cartridge taken/returned;
(iii) officer details including signature;
(iv) brief details of any 'spark tests' or activations during the shift. However, in the case of Tasers used for training purposes under the control of Taser training officers, details of spark tests or activations during the shift are not required to be recorded; and
(v) a comment section to record the condition of the Taser and air cartridges when returned and any damage, defect or unsatisfactory condition identified.

(The 'Taser Issue and Return Register' (QPB 70) has been developed for this purpose and is available from the West End Supply Centre, Logistics Branch).

All registers are to be accurately maintained and updated to reflect the acquisition, transfer or disposal of Tasers and air cartridges within the Service.

14.23.20 Review of Taser incidents

All incidents involving the use of a Service Taser will be reviewed by the relevant Chief Superintendent who is to consider any deployment in drive stun or probe mode of a Taser within 72 hours of the event. Section 14.3.18 re: data download of Tasers refers. Significant Event Review Panels may also review any Taser incident.

APPENDIX 3:
QPS Taser policy between 1 January 2009 and 21 September 2009

This policy commenced from the beginning of the statewide Taser rollout on 1 January 2009. It remained in effect until 21 September 2009, after which it was replaced by the revised policy recommended by the 2009 QPS–CMC review (Appendix 2).

CANCELLED

This circular was cancelled as from 26 June 2009.
New reference is OPM ss. 14.2: 'Definitions and references to legislation', 14.3.1: 'Operational Skills and Tactics (OST) training', 14.3.2: 'Situational Use of Force Model - 2009' and 14.23: 'Conducted Energy Devices (Tasers)'.

Circular No. 33/2008
23/12/2008
File No. Doc 09/2021

The contents of this Commissioner's Circular commence on 1 January 2009.

14.23 Conducted Energy Devices (Tasers)

Taser is a brand name of one of a number of weapons in the general category of 'Conducted Energy Devices'. It is a hand held neuro-muscular disruption device capable of temporarily incapacitating a person and causing pain through the application of an electrical current.

Tasers are a less than lethal use of force option that may assist officers resolve incidents involving violent person(s).

The Taser has two main capabilities, probe mode and drive stun mode.

In the probe mode a Taser uses propelled wires/darts, to deliver short duration high voltage electrical pulses into the body which affect the sensory and motor functions of the nervous system. The electrical charge transmitted by a Taser causes the subject person to experience involuntary muscular contractions, rendering the person incapacitated or unable to perform coordinated action until the device is deactivated. Unlike batons or OC spray, probe mode does not rely on pain compliance alone and is effective regardless of the size, strength, mental condition or pain threshold of the subject person.

The drive stun mode uses direct contact of the Taser to the body or clothing of a person and causes significant discomfort in the area where the Taser is applied. The drive stun mode does not have a significant effect on the central nervous system and does not immobilise a person. As such it may not be effective on people who are highly motivated, mentally disordered or drug/alcohol affected.

The drive stun mode can also be used in combination with the probe mode to complete an incapacitation circuit.

Tasers are 'Category R' weapons, as defined in s. 8(f) of the Weapons Categories Regulation 1997.

14.23.1 Issue of Tasers

Tasers will be issued to police stations and establishments for use by officers as part of the performance of their duty. The logistical distribution of Tasers within each region or command is at the discretion of the officer in charge of that region or command.

14.23.2 Taser training

POLICY

Officers are not to use or carry a Taser unless they:

(i) have successfully completed the relevant Taser training course; and

(ii) are currently qualified in Operational Skills and Tactics (OST) training (see s. 14.3.1: 'Operational Skills and Tactics (OST) training' of the OPM).

Officers who successfully complete the Taser training course will need to requalify in the use of a Taser on an annual basis. This annual re-qualification will be undertaken as part of Block 3 OST training (see s. 14.3.1 of the OPM).

The Chief OST Instructor is responsible for ensuring the necessary systems are in place to provide Taser training to nominated officers.

14.23.3 Use of Tasers

POLICY

Tasers can be used in either the probe mode or drive stun mode to assist officers in resolving incidents involving violent or physically aggressive persons. This includes against persons who:

(i) attempt to or apply physical force to anyone, or pose an immediate threat of assault (e.g. by punching or kicking with the intent to hurt or resist arrest); or

(ii) physically assault or actively resist an officer in a manner that may result in injuries to the officer or others, including themselves.

The use of a Taser's capabilities, in either the probe mode or drive stun mode, should be determined by the circumstances existing at the time, bearing in mind the 'Situational Use of Force Model' (see s. 14.3.2: 'Situational Use of Force Model - 2009' of this Circular). Officers are reminded the Service's philosophy of 'Consider all Options and Practise Safety' (COPS) should be embraced when dealing with incidents which may require the use of force.

Officers should consider all the 'use of force' options available to them and all the circumstances of an incident when determining the most appropriate 'use of force' option(s) to be used.

Prior to using a Taser in either mode, officers should:

(i) verbally warn the subject person(s) where practicable; and

(ii) be mindful of the area in which the subject may fall. In probe mode the Taser causes temporary incapacitation which may cause the subject to fall down. Injuries may be sustained by the subject where this occurs.

When deploying or using a Taser in either probe mode or drive stun mode, officers should comply with the methods and tactics provided in the Conducted Energy Device - Taser Good Practice Guide.

A Taser should not be used in either mode:

(i) against persons offering passive resistance (e.g. refusing to move or offering little or no physical resistance and refusing to comply with police instructions. A person acting as a dead weight or requiring an officer to lift, pull, drag or push them in order to maintain control);

(ii) as a crowd control measure (e.g. for crowd dispersal at a demonstration or industrial dispute);

(iii) against the occupants of a vehicle where there is a danger of the vehicle going out of control and injuring the occupants or other people;

(iv) against juveniles, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of injury;

(v) against females suspected on reasonable grounds of being pregnant, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of injury;

(vi) near explosive materials, flammable liquids or gases due to the possibility of ignition;

(vii) punitively for purposes of coercion or as a prod to make a person move;

(viii) to rouse unconscious, impaired or intoxicated persons;

(ix) on suspects where there is a likelihood of significant secondary injuries from a fall (e.g. standing on a ladder or other elevated position); or

(x) on elderly persons, except in extreme circumstances where there is no other reasonable option to avoid the imminent risk of injury.

If initial applications of the Taser in either the probe or drive stun modes are ineffective, officers should reassess the situation and consider other available options.

14.23.4 Probe removal and disposal

POLICY

Probe removal and disposal is to be conducted in accordance with the procedures outlined in the Conducted Energy Device - Taser Good Practice Guide.

Where probes are imbedded in sensitive tissue areas (e.g. neck/throat, face, breast or groin) medical aid should be sought to remove the probes.

Officers in charge of stations or establishments should ensure suitable probe removal and disposal equipment (i.e. protective gloves, sharps container, alcohol wipes/swabs and band aids) is available in all operational vehicles under their control.

14.23.5 Aftercare

A person who has been tasered:

(i) should recover quickly. The incapacitating effect of the Taser ends when the trigger is released and the unit is deactivated;

(ii) may feel dazed for several seconds;

(iii) may experience tingling sensations for a short period afterwards; and

(iv) may exhibit minor skin irritation, temporary blisters or redness at the site of application.

The application of a Taser should not affect or damage a pacemaker, or cause permanent damage or long term effects to the subject person's muscles, nerves or other body functions.

However, it should be recognised that the subject person may have pre-existing injuries or medical conditions and/or secondary injuries from falling down when incapacitated by the Taser.

POLICY

If required, the officer who deployed the Taser is to ensure first aid and/or medical attention is provided to the subject person, as necessary.

See s. 16.13.1: 'Assessment of prisoners' and Appendix 16.1: 'The assessment of prisoners and persons in custody' of the OPM.

PROCEDURE

When medical attention or treatment is required, the deploying officer should notify the Duty Officer, Police Communications Centre (PCC) Brisbane, or in areas outside of those covered by PCC Brisbane, the communications coordinator of the relevant PCC, and request the

attendance of the Queensland Ambulance Service (QAS). Where it is impractical to obtain the attendance of the QAS, the officer should arrange to have the subject person taken to the nearest facility providing medical attention.

14.23.6 Reporting the use of a Taser

For the purpose of this section, the term 'use' includes:

(i) deploying or firing the probes against a person or animal, or in the direction of a person or animal;

(ii) pointing a Taser in the direction of a person without deploying or firing the probes;

(iii) using the drive stun mode against a person or animal; or

(iv) holding/pressing a Taser against a person without activating it.

POLICY

After an incident involving the use of a Taser, the officer who used the Taser should:

(i) notify as soon as practicable:

(a) the Duty Officer, Police Communications Centre (PCC) Brisbane to ensure the incident is recorded on the CAD system; or

(b) in areas outside those covered by PCC Brisbane, the communications coordinator of the relevant PCC to note on the CAD system or their Running Log as the case may be; or

(c) in areas where no police communications centre exists, the officer in charge for the time being of the station responsible for policing the area where the incident has occurred; and

(ii) prior to the end of the shift:

(a) complete and submit a 'Taser Usage Report', which is available on the Operations Support Command, 'Taser Implementation' webpage on the QPS Intranet (Bulletin Board); and

(b) ensure a significant event message is submitted outlining the circumstances of the deployment. See s. 1.6.10: 'Significant Event Messaging System' of the OPM. When completing the significant event message, the drop down menu in the subject field must be used and 'Taser Deployment' selected as the subject. Within the significant event message a summary of the incident should be provided including:

- the subject's behaviour and actions;
- the weapon(s) used or available to the subject;

- whether the subject was affected by alcohol and/or drugs;
- the perceived degree of threat to police and/or others;
- other persons involved;
- the officer's actions;
- whether the probes were deployed, drive stun used, or was the Taser pointed towards or held against the subject without activation;
- whether a verbal warning was given and if not, why not?; and
- whether any injuries were sustained and/or medical treatment required/provided by any person.

The Duty Officer, communications coordinator or officer in charge notified of an incident involving a Taser is to advise the appropriate regional duty officer (RDO) or district duty officer (DDO).

The officer in charge where the police officer using a Taser is stationed, is to:

(i) ensure that a 'Taser Usage Report' and significant event message has been submitted in relation to the incident; and

(ii) overview the incident to determine whether the use of the Taser was in accordance with Service policy and procedures. If the use of the Taser was inappropriate or not in accordance with Service policy, see s. 7.2: 'Duty concerning misconduct or breaches of discipline' of the *Police Service Administration Act 1990* and Chapter 18: 'Complaint Management' of the Human Resource Management Manual.

14.23.7 Carriage of a Taser

POLICY

Qualified officers performing operational duties should, where appropriate, carry a Taser, if one is available.

When removing a Taser from a gun safe or other approved safe provided by the Service at their respective station or establishment, members are to inspect and load the weapon in compliance with the procedures outlined in Chapter 6: 'Station procedures' of the Conducted Energy Device - Taser Good Practice Guide'.

The Taser should be loaded with an air cartridge, ready for use, and carried on a utility belt in the holster provided for that purpose. A spare cartridge should be carried in the bottom of the 'extended digital power magazine' (XDPM).

Taser holsters should be carried securely fitted on a utility belt, on the side opposite the dominant hand, and worn in a 'crossdraw' manner (i.e. with the handle of the device facing forward).

Members are not to leave a Service Taser unattended in a vehicle or other place without good and sufficient reason. This may include:

(i) members having to attend a situation where the carriage of a Taser poses a risk to security or safety, e.g. riot, serious street disturbance or authorised assembly;

(ii) where the Taser restricts operational activity, e.g. members being involved in a rescue operation; or

(iii) where it is necessary for special operational situations or circumstances, e.g. hostage or suicide negotiations.

Plain clothes officers

POLICY

Qualified officers performing plain clothes duties may carry a Taser, if it is appropriate to the duties they are performing.

Tasers should only be carried by plain clothes officers:

(i) in the Service issued holster provided for that purpose; and

(ii) securely fitted on a dress belt (or utility belt if available), on the side opposite the dominant hand, and worn in a 'crossdraw' manner (i.e. with the handle of the device facing forward). Plain clothes officers are not to carry Tasers in Service issued bumbags, or in other locations or positions.

If carrying a Service Taser exposed to view, plain clothes officers should carry their identification badge in such a position that it is also visible to members of the public.

Carriage of Tasers on aircraft and at airports

POLICY

Officers who intend to carry conducted energy devices (Tasers):

(i) on commercial passenger airlines/prescribed aircraft, are to comply with the relevant provisions of s. 14.11.1: 'Weapons and prohibited items on Commercial Passenger Airlines/Prescribed aircraft' of the OPM;

(ii) at airports, are to comply with s. 14.11.4: 'Carriage of weapons and prohibited items at airports' of the OPM; or

(iii) on Police Air Wing aircraft, are to consult with the relevant Air Wing Operations Coordinator for advice and direction regarding the carriage or storage requirements.

Carriage of Tasers in court

POLICY

Officers should not wear or carry a Service Taser, other than an exhibit, in court unless:

(i) authorised by the presiding magistrate or judge. This includes an officer performing duty as a court orderly; or

(ii) they are responding to an incident within those premises.

Carriage of Tasers in watchhouses

POLICY

Officers may carry Tasers in watchhouses. As with batons, oleoresin capsicum spray and handcuffs, there is no requirement for an officer to remove and store a Taser prior to entering a watchhouse.

Carriage of Tasers in correctional centres and detention centres

ORDER

Unless authorised or approved by the Chief Executive, Queensland Corrective Services, to take weapons into a correctional centre or detention centre, officers are to hand all Tasers to the correctional officer on duty at the entrance to a correctional centre or detention centre for safe keeping (see s. 128: 'Taking prohibited thing into corrective services facility or giving prohibited thing to prisoner' of the *Corrective Services Act 2006*).

Officers are to inspect all Tasers returned prior to leaving a correctional centre or detention centre to ensure they are undamaged.

See also s. 14.14.1: 'Carriage of firearms and ammunition in correctional centres and detention centres' of the OPM.

Carriage of Tasers in hospitals

POLICY

Officers should exercise their discretion in regard to the carriage of conducted energy devices (Tasers) within the confines of an authorised mental health high security unit, or medium security unit. See s. 14.13: 'Carriage of firearms in hospitals' of the OPM.

Officers should also consider the policy outlined in s. 14.6.2: 'Security of weapons' of the OPM.

14.23.8 Safety issues

POLICY

Members are to:

(i) treat every Taser as if it is armed and ready to deploy;

(ii) keep hands away from the front of the Taser at all times particularly when loading or unloading an air cartridge;

(iii) ensure the safety switch is activated and the Taser is in safe mode:

(a) before handing it to someone else;

(b) upon receiving it from someone else;

(c) before loading or removing an air cartridge from a Taser;

(d) when replacing the extended digital power magazine in the Taser; and

(e) whenever the Taser is not intended for immediate use;

(iv) perform a static electricity earthing drill before handling live Taser air cartridges. A build up of naturally occurring static electricity in a person's body may, in extreme cases, cause the air cartridge to malfunction when handled. Accordingly, members should ground themselves before handling, loading or unloading Taser air cartridges;

(v) where practicable, load and unload Taser air cartridges in a 'designated safe weapon clearing area'. See 'Definitions' of this Circular;

(vi) never aim the Taser at the eyes or face of a person;

(vii) never throw a Taser to someone else or attempt to catch a Taser;

(viii) never point a Taser at any person, or in any direction where a person is likely to be, unless it is actually intended to use the Taser against that person;

(ix) observe security precautions consistent with the *Weapons Act 1990* and Service policies; and

(x) not use, deploy or discharge a Taser unless in the performance of operational duties or Service approved training.

14.23.9 Storage

POLICY

Prior to ceasing duty, or where a Service Taser is not required for duty, members are to:

(i) unload any Service Taser in their possession in compliance with the procedures outlined in Chapter 6: 'Station procedures' of the Conducted Energy Device - Taser Good Practice Guide';

(ii) place the Taser in a gun safe or other approved safe provided at their respective station or establishment for the purpose (see Chapter 20: 'Minimum Storage Standards For Weapons Held in Police Facilities' of the Administration Manual);

(iii) store the Taser with the extended digital power magazine (XDPM) inserted at all times. The XDPM must not be removed from the Taser when stored. If the XDPM requires replacement it should be carried out prior to storage. See s. 14.23.12: 'Replacing the Extended Digital Power Magazine (XDPM) of this Circular; and

(iv) store any air cartridges, at their respective station or establishment, in a cool, dry and secure location, elsewhere to the Taser, with the blast doors of the air cartridges facing down.

Each member accessing a safe provided by the Service for the storage of Tasers is to ensure the safe is securely locked immediately after use.

Officers taking out or returning Taser equipment to its storage facilities, are to complete the registers provided by the station or establishment for that purpose.

14.23.10 Inspection and maintenance

POLICY

When obtaining a Taser, air cartridges and holster at the commencement of a shift, officers should:

(i) inspect all equipment for visible signs of damage;

(ii) check the energy or battery level of the extended digital power magazine. If the energy level is less than 20%, see s. 14.23.12: 'Replacing the Extended Digital Power Magazine (XDPM)' of this Circular;

(iii) conduct a spark test for 1 second visually ensuring there is an arc between the electrodes;

(iv) check the expiration date of the air cartridges. If an air cartridge has expired see s. 14.23.11: 'Used, damaged or expired air cartridges' of this Circular; and

(v) before loading an air cartridge in the Taser, ensure the safety is 'on', inspect and if necessary wipe out the air cartridge firing bay with a dry cloth.

Officers are to immediately report to their officer in charge any damage, defect or unsatisfactory condition relating to, or the loss of a Taser, air cartridge, XDPM or holser.

A Taser should not be exposed to significant moisture or water. If the Taser unit becomes wet, officers are to comply with the procedures outlined in Chapter 13: 'Cleaning and maintenance' of the Conducted Energy Device - Taser Good Practice Guide.

Officers in charge of stations and establishments are to:

(i) ensure an inspection of Tasers, air cartridges and other ancillary equipment under their control, is carried out on a monthly basis. Particulars of these inspections are to be recorded in a register kept for this purpose. (see s. 14.23.15: 'Recording of Taser equipment' of this Circular). Officers in charge of regions and commands may authorise that inspections of Tasers and ancilliary equipment are undertaken at other specified time intervals in conjunction with local risk management practices; and

(ii) immediately report to the district officer or other supervising commissioned officer the loss of, any damage or defect to, or any unsatisfactory condition relating to Service Taser equipment and comply with the provisions of the Financial Management Practice Manual in relation to any losses and, where appropriate, the recovery of debts resulting from the loss or destruction or damage to property while in the care of members.

See also s. 14.23.13: 'Taser repairs and replacement' of this Circular.

14.23.11 Used, damaged or expired air cartridges

POLICY

Used or expended air cartridges may be disposed of as general refuse. However, prior to disposing of a used air cartridge, the serial number label is to be removed from the cartridge.

Air cartridges are to be forwarded to the Regional (or Command) Education and Training Coordinator, for training purposes if:

(i) they have passed their expiration date; or

(ii) the air cartridge has not been deployed but the blast doors have fallen off the cartridge. In such circumstances, although the cartridge may still fire, it may not do so reliably.

14.23.12 Replacing the Extended Digital Power Magazine (XDPM)

POLICY

When the XDPM energy level is less than 20%, a replacement should be obtained and inserted into the Taser.

The expended XDPM should then be forwarded to the Regional (or Command) Education and Training Coordinator, for training purposes.

When the XDPM energy level reads 1%, it is to be disposed of. Continued use beyond this energy level may cause potential data corruption in the Taser recording microprocessor.

To replace the XDPM in a Taser, officers are to comply the relevant procedures outlined in the Conducted Energy Device - Taser Good Practice Guide.

14.23.13 Taser repairs and replacement

POLICY

Tasers which are damaged, defective or otherwise require servicing are to be forwarded to the Armoury Section, Logistics Branch.

PROCEDURE

Officers in charge of stations or establishments that require the repair or replacement of a damaged or defective Taser are to:

(i) contact the Armoury Section, Logistics Branch for advice concerning the necessary arrangements; and

(ii) where a replacement Taser is required, complete a QP413: 'Requisition for Weapons/Restricted Item' form and forward to the Armoury Section, Logistics Branch.

POLICY

If possible, the information recorded on a Taser is to be downloaded prior to forwarding the device to the Armoury Section, Logistics Branch. See s. 14.23.14: 'Downloading data from a Taser' of this Circular.

When a Taser is forwarded to the Armoury Section, Logistics Branch, any costs involved in the inspection, testing, repair or replacement of the equipment is to be met by the requesting region or command.

If a Taser is replaced or disposed of, the Manager, West End Supply Centre is to send a report outlining the description and serial number of the item and advising of its destruction to the Officer in Charge, Weapons Licensing Branch, who is responsible for maintaining the QPS Weapons System.

14.23.14 Downloading data from a Taser

The Taser has an inbuilt system which can record the time, date, duration, battery status and the internal operating temperature at the time the Taser was used for its last 1500 activations.

PROCEDURE

If required for court or other purposes, or where a Taser is being returned to the Armoury Section, Logistics Branch for repair or replacement, officers in charge of stations or establishments should contact the Officer in Charge, Operational Research and Advisory Unit, and make arrangements for the information recorded on the Taser to be extracted.

POLICY

The Officer in Charge, Operational Research and Advisory Unit may arrange on a periodic basis the downloading of data from Tasers within the Service.

14.23.15 Recording of Taser equipment

POLICY

The Manager, West End Supply Centre, is responsible for ensuring that the following information is recorded on the Weapons Asset Control System:

(i) the district, or other organisational unit within the Service, each Taser and air cartridge is issued to;

(ii) the serial number of each Taser and air cartridge; and

(iii) the date of issue.

District officers or other organisational units are to maintain a local register of Taser equipment within their area of responsibility. Particulars to be recorded include:

(i) the date of receipt of each item;

(ii) the station or establishment each Taser and air cartridge is issued to;

(iii) the serial number of each Taser and air cartridge; and

(iv) the date, reason and method of disposal for each item.

Officers in charge of stations or establishments are to maintain a local register of all Taser equipment issued to their station or establishment. Particulars to be recorded include:

(i) the date of receipt of each item;

(ii) the serial number of each Taser and air cartridge;

(iii) the expiry date of each air cartridge;

(iv) the date each Taser and air cartridge was last inspected; and

(v) the date, reason and method of disposal for each item.

Officers in charge of stations or establishments should also maintain a local register for the purpose of recording the issue and return of Taser equipment each shift. At a minimum such registers should record:

(i) the time and date of signing the equipment in and out;

(ii) the serial number of each Taser and air cartridge taken/returned;

(iii) officer details including signature;

(iv) brief details of any 'spark tests' or activations during the shift. However, in the case of Tasers used for training purposes under the control of Taser training officers, details of spark tests or activations during the shift are not required to be recorded; and

(v) a comment section to record the condition of the Taser and air cartridges when returned and any damage, defect or unsatisfactory condition identified.

(An example of a Taser issue and return register is provided in Appendix 1 of this Circular).

All registers are to be accurately maintained and updated to reflect the acquisition, transfer or disposal of Tasers and air cartridges within the Service.

14.23.16 Review of Taser incidents

All incidents involving the use of a Service Taser will be reviewed by the relevant Significant Event Review Panel. See Commissioner's Circular 34/2008: 'Significant Event Review Panels'.

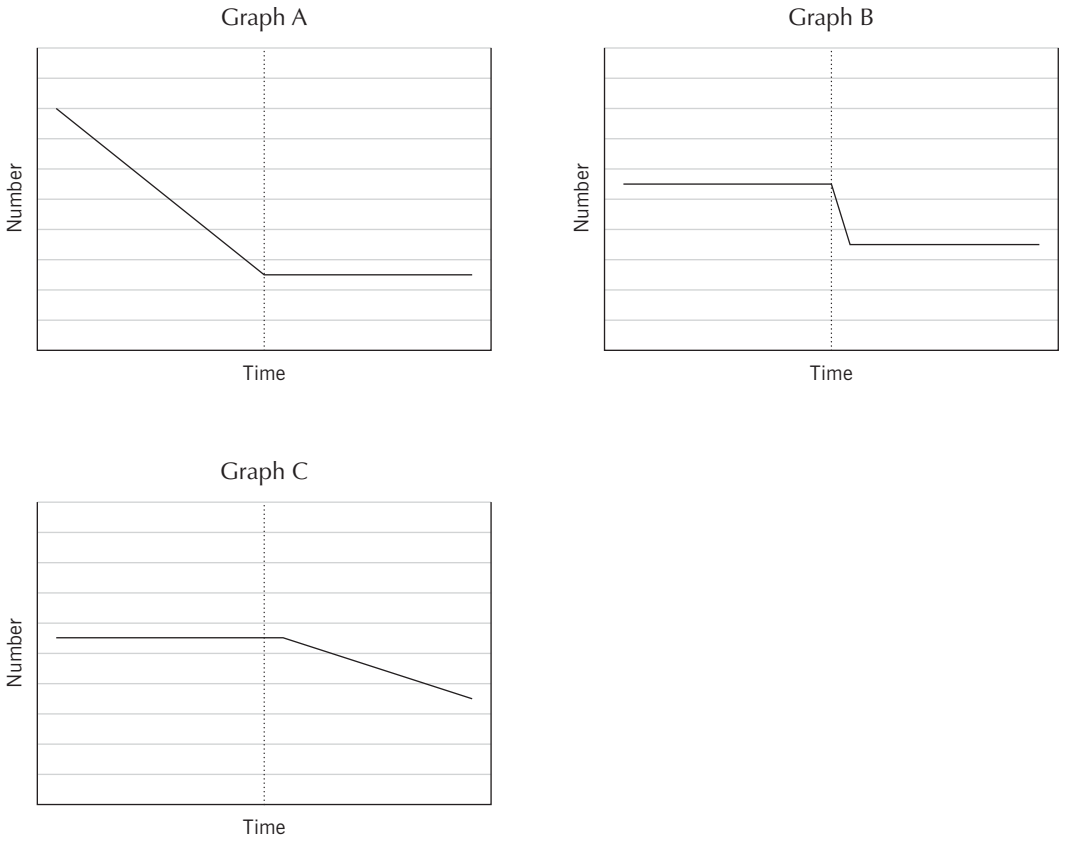
APPENDIX 4:
Data analysis notes

Examining changes over time

A simple approach to examining the effects of an intervention, such as the introduction of a new policy, is to compare total data from a period before the intervention with total data from an equivalent period after the intervention. For example, we might have compared the total number of Taser uses in the eight months before the introduction of the revised policy with the total number of Taser uses in the eight months after the introduction of the revised policy.

The problem with this approach is that it does not take into account how things might have been changing before the intervention. By plotting and examining results over time (for example, by day, week or month), we can make a better judgment about the effects of the intervention. To illustrate, consider the graphs in Figure A4.1.

Figure A4.1: Some possible patterns of findings when examining the effects of an intervention



Note: The vertical dotted line in each graph indicates the introduction of the intervention (in this case, the revised Taser policy).

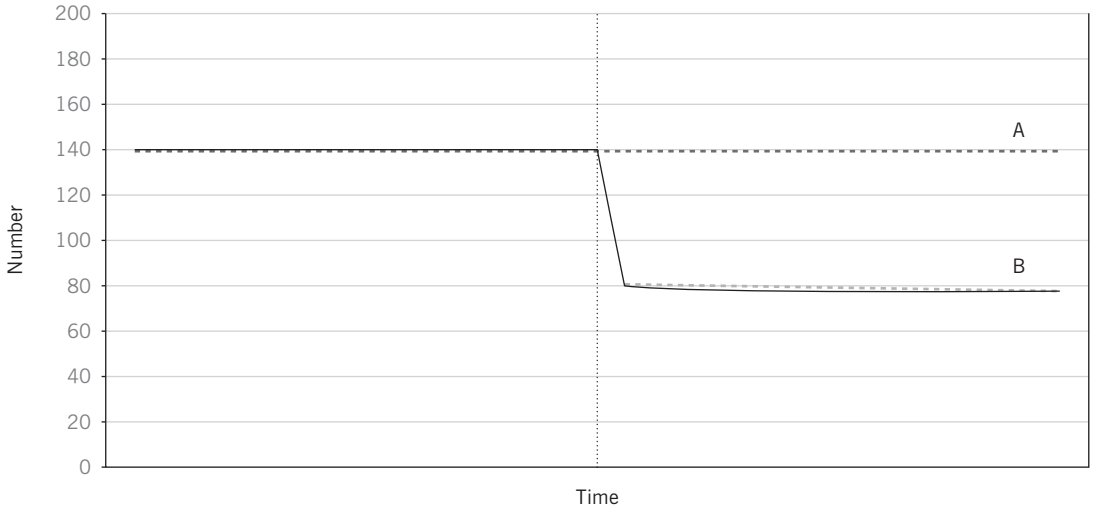
If we found the pattern of results shown in Graph A, we would conclude that the intervention had no effect in reducing the number of Taser uses (for example). It is clear that the numbers were already decreasing well before the policy was introduced and, when it was introduced, there were no further reductions. Note that if we had simply compared the total number of uses in the pre-policy period with the number in the post-policy period, we would have seen far fewer uses in the post-policy period and may have erroneously associated this with the implementation of the revised policy.

Examining results over time also allows us to more clearly see the effect of an intervention when there is one. For example, a pattern of results like that shown in Graph B would clearly suggest that the revised policy had an immediate effect in reducing the number of Taser uses. A pattern of results like that shown in Graph C also suggests an effect of the intervention, but one that appears more gradually over time.

In the first section of Chapter 3, we have focused on examining:

- the trend over the eight months before the introduction of the revised policy; this allows us to consider how things were changing before the introduction of the revised policy, to help us recognise situations like that illustrated in Graph A (previous page)
- the change immediately after the introduction of the revised policy, to help us identify any immediate effects of the policy, as illustrated in Graph B
- the trend over the 10 months after the introduction of the revised policy, and whether this differed from the trend in the previous eight months; this allows us to identify more gradual or longer-term effects of the revised policy, like those illustrated in Graph C
- whether our findings for the end of the post-policy period (Month 18) differed from what would have been predicted had the revised policy not been implemented and had pre-existing trends been maintained. We have done this by using the pre-policy trend line to predict a value for Month 18 (140 in Figure A4.2, as indicated by trend line A), and comparing this with what is predicted for Month 18 using the post-policy trend line (78 in Figure A4.2, as indicated by trend line B). This is a useful way of highlighting the possible effects of the revised policy after taking into account both immediate and longer-term changes.

Figure A4.2: Predicted values over time based on the pre-policy trend and on the post-policy trend



Note: The vertical dotted line indicates the introduction of the intervention (in this case, the revised Taser policy).

Taser uses, incidents and subjects

When we were examining the TURs, we noticed that different officers were reporting Taser 'uses' in different ways. For example, we found that one officer might report one presentation against two subjects as two uses (that is, on two TURs, one for each subject), while another officer might report the same thing as one use (that is, two subjects listed on the one TUR). Similarly, we found that one officer might report two uses against the same subject at different locations — say one use at a house and one use in a watch-house after arrest — on the one TUR, while another officer might report the two uses on two separate TURs.

Another problem we identified was that some officers would present the Taser on two very separate occasions during the one prolonged interaction with a subject, holstering the Taser between each presentation, but would report these on the one TUR. Still other officers were reporting instances where they had drawn the Taser but not presented or deployed it at a person, which is not a reportable 'use' according to the definition presented in the Taser policy.

In short, we found that one TUR did not necessarily report on just one 'use' in the way we wanted to define the term for the purposes of analysing our data. We therefore entered the data from the TURs, making some modifications along the way to capture situations where multiple uses were reported in one TUR or where multiple TURs were used to report one use. Table A4.1 lists some common examples of situations reported in TURs, and explains how we interpreted these to count 'Taser uses', 'Taser incidents' and 'Taser subjects'.

Table A4.1: Number of Taser uses, Taser incidents and Taser subjects in some commonly reported situations

Situation reported in the TUR/s	Number of Taser uses	Number of Taser incidents	Number of Taser subjects
One officer drew their Taser but did not present or deploy it at a subject, and the subject did not see the Taser.	0	0	0
One officer drew their Taser with the intention of pointing it a subject, but the subject changed their behaviour immediately upon seeing the Taser drawn.	1	1	1
One officer presented the Taser at one subject.	1	1	1
One officer presented the Taser at two subjects at exactly the same time.	1	1	2
One officer presented the Taser at one subject who was then restrained by police, and then presented the Taser at a second subject.	2 (one use against each subject)	1	2
One officer presented the Taser at one subject. For tactical reasons, the Taser was not deployed and was reholstered. Police continued to interact with the subject and a short time later, as circumstances changed, the officer presented the Taser at the subject again.	2 (two separate presentations)	1 (one incident at the same location and in the same or similar circumstances)	1
One officer deployed the Taser at one subject. The subject lashed out at police as soon as the five-second cycle was finished, so the officer immediately deployed the Taser for a second cycle.	1 (one use involving two cycles in probe mode)	1	1

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Situation reported in the TUR/s	Number of Taser uses	Number of Taser incidents	Number of Taser subjects
One officer deployed the Taser at one subject while dealing with them at a house. The subject was restrained and subsequently transported to the watch-house. The Taser was again presented at the subject while police attempted to place the subject into a cell.	2 (one use in each incident)	2 (one incident at the house, and one incident at a different location at the watch-house)	1 (but the same subject counted once per incident)
One officer deployed the Taser at one subject, but the deployment was ineffective. The subject subsequently ran down the street and was met by another officer, who then deployed their Taser at the subject.	2 (one use by each officer)	1 (one incident at a nearby location and involving the same or similar circumstances)	1
One officer presented their Taser at one subject. The situation subsequently developed into a siege and, three hours later, another officer used their Taser against the subject to end the incident.	2 (one use by each officer)	1 (one prolonged incident at the same location and involving the same or similar circumstances)	1
One officer deployed the Taser at one subject. The deployment was effective and police handcuffed the subject. While police were trying to move the subject to the police vehicle, the subject became violent and lashed out at them. The same deploying officer from before applied a drive stun to the subject.	2 (one probe deployment and one drive stun in different circumstances, i.e. subject not handcuffed in one use but handcuffed in the other)	1 (one incident at the same location)	1
One officer deployed the Taser at one subject. One probe missed and the subject started to run away from police. The officer replaced the Taser cartridge and deployed their Taser at the subject for a second time.	1 (one use involving two cycles in probe mode)	1	1
Two officers each presented their Taser at one subject at the same time.	2 (one use by each officer)	1	1

We made our counting decisions based on all the information available to us in the TURs, but generally:

- A use was considered a separate use if it was done by another officer, involved another subject at a different time, arose in considerably different circumstances or occurred after the Taser had previously been reholstered. Where we created additional uses, we added details based on what was reported in the TUR; anything we could not determine was regarded as missing data.
- An incident was considered a separate incident if it occurred at a different location and did not simply involve the natural progression or continuation of a situation.

- In incidents where more than one officer used their Taser, meaning we had more than one officer's description of the incident, we included the fullest details available to us. For example, if one officer reported that the incident involved domestic violence but the other did not, we considered the incident to have involved domestic violence. Similarly, if one officer reported that the subject was affected by alcohol and/or drugs but the other did not, we considered the subject to have been affected by alcohol and/or drugs.

In some cases, we also found that the narrative on the TUR indicated that the Taser was used against more than one subject, but demographic details were not provided for all subjects. In these cases, we added the necessary subjects, filling in what details we could from the information available on the TUR (generally only the subject's gender) and leaving all other fields blank.

Categorising the behaviour of subjects before the use of the Taser

Using the information available to us in the TURs, we attempted to categorise the behaviour of the subject/s before each Taser use. In doing so, we focused on categorising the behaviour immediately before the Taser was first drawn and presented at the subject. In quite a number of cases, a lack of detail in the TURs meant that the subject's behaviour at this time was not particularly clear. If a general sense of the subject's behaviour was clear from the TUR, we based our categorisation on this; otherwise, we regarded it as missing data.

It is also important to emphasise that, because our categorisations were based on the often limited information contained in the TURs, our categorisation of the subject's behaviour reflects their behaviour as described by the reporting officer and not necessarily the subject's actual behaviour. Furthermore, a subject's behaviour did not always fit neatly into one category. Where it seemed that the subject's behaviour could fit into more than one category, we allocated it to the more 'serious' category, as roughly indicated in Table A4.2. Where we could not make a decision about the relative seriousness of the categories, we regarded it as missing data.

We identified 19 specific categories of subject behaviour. Although there is much overlap between some categories, we felt it was important to capture the different situations faced by police officers using Tasers. The 19 categories we used are listed in Table A4.2, accompanied by a brief description of the category.

Table A4.2: Subject behaviour categories

Category	Description
Armed, actions indicated threat to person	The subject was observed by police to be armed and was behaving in a way that signalled a threat to police, another person or the subject (e.g. advancing on a person with the weapon raised, holding a knife to their wrists). Includes cases where the subject was actually assaulting a person or self-harming with a weapon.
Armed, threatening (unspecified)	The subject was observed by police to be armed and was described as threatening police, another person or self-harm, but it was not clear whether the threat was verbal or indicated by the subject's actions.
Armed, failed to comply with directions	The subject was observed by police to be armed and failed to comply with specific police instructions, usually to drop the weapon.
Armed	The subject was observed by police to be armed but none of the above three categories applied.

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Category	Description
Believed to be armed, actions indicated threat to person	The subject was reported or otherwise believed by police to be armed (e.g. based on witness reports) and was behaving in a way that signalled a threat to police, another person or the subject (e.g. advancing on a person). Includes cases where the subject was believed to be armed and actually assaulting a person.
Believed to be armed, threatening (unspecified)	The subject was reported or otherwise believed by police to be armed (e.g. based on witness reports) and was described as threatening police, another person or self-harm, but it was not clear whether the threat was verbal or indicated by the subject's actions.
Believed to be armed, failed to comply with directions	The subject was reported or otherwise believed by police to be armed (e.g. based on witness reports) and failed to comply with specific police instructions, usually to show their hands or reveal the weapon.
Believed to be armed	The subject was reported or otherwise believed by police to be armed (e.g. based on witness reports) but none of the above three categories applied.
Assaulted a person (including police)	The subject had punched, kicked, hit, head-butted, bit or spat at another person, making actual contact with the person's body.
Violent struggle with police	The subject was described as violently struggling with police, violently resisting police, being violent towards police, being extremely aggressive towards police or similar.
Struggle with police	The subject was described as struggling with police, resisting police, being involved in a scuffle with police or similar. There was no explicit indication of violence or extreme aggression as in the category above.
Attempted to assault police	The subject had attempted to punch, kick, hit, head-butt, bite or spit at an officer, but the attempt was not successful in terms of making actual contact with the officer's body.
Actions indicated threat to police	The subject was behaving in a way that signalled a threat to police (e.g. shaping up to fight, clenching their fists, gritting their teeth, aggressively advancing on police). The subject was not observed or believed by police to be armed.
Actions indicated threat to another person	The subject was behaving in a way that signalled a threat to another person (e.g. shaping up to fight, clenching their fists, gritting their teeth, aggressively advancing on a person). The subject was not observed or believed by police to be armed.
Threatening (unspecified)	The subject was threatening police or another person, but it was not clear whether the threat was verbal or indicated by the subject's actions. The subject was not observed or believed by police to be armed.
Generally aggressive, abusive, destroying property etc.	The subject was described as being generally aggressive or abusive, and may have been engaging in behaviour such as swearing, yelling or damaging property.

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Category	Description
Possibly armed, weapons available, reaching for weapon etc.	Police could not determine whether the subject was armed (most often because their hands were not visible), weapons were available to the subject (e.g. if the subject was in a kitchen where knives were kept) or the subject appeared to be reaching for a weapon. The subject was not observed or believed by police to be armed.
Failed to comply with directions	The subject failed to comply with specific police instructions, but was not observed or believed by police to be armed.
Running away	The subject was running away from police.
Other	A category for other uses where the subject's behaviour was clear but did not fit into one of the other 19 categories.

APPENDIX 5:
Data used in examining the effects of the revised Taser policy

Table A5.1: Number of Taser uses (presentations and deployments) by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	All operational uses	Presentations	Probe deployments	Drive stun deployments	Probe and drive stun deployments
1 (22 Jan 2009 to 21 Feb 2009)	49	37	8	4	0
2 (22 Feb 2009 to 21 Mar 2009)	58	50	8	0	0
3 (22 Mar 2009 to 21 Apr 2009)	61	42	18	1	0
4 (22 Apr 2009 to 21 May 2009)	47	33	12	1	1
5 (22 May 2009 to 21 Jun 2009)	59	46	10	1	2
6 (22 Jun 2009 to 21 Jul 2009)	30	26	4	0	0
7 (22 Jul 2009 to 21 Aug 2009)	32	24	5	3	0
8 (22 Aug 2009 to 21 Sep 2009)	41	28	12	1	0
Pre-policy period	**377**	**286**	**77**	**11**	**3**
9 (22 Sep 2009 to 21 Oct 2009)	32	23	9	0	0
10 (22 Oct 2009 to 21 Nov 2009)	39	33	6	0	0
11 (22 Nov 2009 to 21 Dec 2009)	22	15	6	1	0
12 (22 Dec 2009 to 21 Jan 2010)	25	18	6	0	1
13 (22 Jan 2010 to 21 Feb 2010)	36	23	12	0	1
14 (22 Feb 2010 to 21 Mar 2010)	22	17	5	0	0
15 (22 Mar 2010 to 21 Apr 2010)	23	16	7	0	0
16 (22 Apr 2010 to 21 May 2010)	33	24	8	0	1
17 (22 May 2010 to 21 Jun 2010)	41	32	7	0	2
18 (22 Jun 2010 to 21 Jul 2010)	35	30	4	0	1
Post-policy period	**308**	**231**	**70**	**1**	**6**

Table A5.2: Percentage of Taser uses that involved a subject who posed a risk of serious injury by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total uses included in analysis	Use involved a subject who posed a risk of serious injury	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	45	33	73.3
2 (22 Feb 2009 to 21 Mar 2009)	56	36	64.3
3 (22 Mar 2009 to 21 Apr 2009)	60	42	70.0
4 (22 Apr 2009 to 21 May 2009)	47	33	70.2
5 (22 May 2009 to 21 Jun 2009)	58	38	65.5
6 (22 Jun 2009 to 21 Jul 2009)	30	24	80.0
7 (22 Jul 2009 to 21 Aug 2009)	31	28	90.3
8 (22 Aug 2009 to 21 Sep 2009)	41	29	70.7
Pre-policy period	**368**	**263**	**71.5**
9 (22 Sep 2009 to 21 Oct 2009)	32	27	84.4
10 (22 Oct 2009 to 21 Nov 2009)	39	35	89.7
11 (22 Nov 2009 to 21 Dec 2009)	21	20	95.2
12 (22 Dec 2009 to 21 Jan 2010)	25	24	96.0
13 (22 Jan 2010 to 21 Feb 2010)	36	36	100.0
14 (22 Feb 2010 to 21 Mar 2010)	22	22	100.0
15 (22 Mar 2010 to 21 Apr 2010)	23	23	100.0
16 (22 Apr 2010 to 21 May 2010)	33	33	100.0
17 (22 May 2010 to 21 Jun 2010)	41	41	100.0
18 (22 Jun 2010 to 21 Jul 2010)	35	35	100.0
Post-policy period	**307**	**296**	**96.4**

Table A5.3: Percentage of Taser uses that were preceded by particular subject behaviours by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total uses included in analysis	Subject armed and actions indicated a threat to a person		Subject struggling with or resisting police	
	N	*n*	%	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	48	8	16.7	3	6.3
2 (22 Feb 2009 to 21 Mar 2009)	52	7	13.5	2	3.8
3 (22 Mar 2009 to 21 Apr 2009)	58	5	8.6	8	13.8
4 (22 Apr 2009 to 21 May 2009)	40	5	12.5	6	15.0
5 (22 May 2009 to 21 Jun 2009)	55	9	16.4	6	10.9
6 (22 Jun 2009 to 21 Jul 2009)	28	4	14.3	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	30	5	16.7	4	13.3
8 (22 Aug 2009 to 21 Sep 2009)	37	4	10.8	0	0.0
Pre-policy period	**348**	**47**	**13.5**	**29**	**8.3**
9 (22 Sep 2009 to 21 Oct 2009)	28	4	14.3	0	0.0
10 (22 Oct 2009 to 21 Nov 2009)	37	3	8.1	2	5.4
11 (22 Nov 2009 to 21 Dec 2009)	22	4	18.2	1	4.5
12 (22 Dec 2009 to 21 Jan 2010)	24	4	16.7	2	8.3
13 (22 Jan 2010 to 21 Feb 2010)	34	11	32.4	0	0.0
14 (22 Feb 2010 to 21 Mar 2010)	20	2	10.0	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	23	5	21.7	1	4.3
16 (22 Apr 2010 to 21 May 2010)	31	6	19.4	1	3.2
17 (22 May 2010 to 21 Jun 2010)	41	5	12.2	2	4.9
18 (22 Jun 2010 to 21 Jul 2010)	33	6	18.2	0	0.0
Post-policy period	**293**	**50**	**17.1**	**9**	**3.1**

Table A5.4: Percentage of Taser uses that involved a subject who was (a) observed to be armed with a weapon and (b) observed or believed to be armed with a weapon by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total uses included in analysis	Subject observed to be armed		Subject observed or believed to be armed	
	N	*n*	%	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	48	11	22.9	15	31.3
2 (22 Feb 2009 to 21 Mar 2009)	52	12	23.1	16	30.8
3 (22 Mar 2009 to 21 Apr 2009)	58	16	27.6	17	29.3
4 (22 Apr 2009 to 21 May 2009)	40	9	22.5	12	30.0
5 (22 May 2009 to 21 Jun 2009)	55	14	25.5	20	36.4
6 (22 Jun 2009 to 21 Jul 2009)	28	9	32.1	17	60.7
7 (22 Jul 2009 to 21 Aug 2009)	30	13	43.3	17	56.7
8 (22 Aug 2009 to 21 Sep 2009)	37	13	35.1	21	56.8
Pre-policy period	**348**	**97**	**27.9**	**135**	**38.8**
9 (22 Sep 2009 to 21 Oct 2009)	28	13	46.4	19	67.9
10 (22 Oct 2009 to 21 Nov 2009)	37	11	29.7	13	35.1
11 (22 Nov 2009 to 21 Dec 2009)	22	8	36.4	9	40.9
12 (22 Dec 2009 to 21 Jan 2010)	24	12	50.0	13	54.2
13 (22 Jan 2010 to 21 Feb 2010)	34	18	52.9	19	55.9
14 (22 Feb 2010 to 21 Mar 2010)	20	6	30.0	11	55.0
15 (22 Mar 2010 to 21 Apr 2010)	23	7	30.4	10	43.5
16 (22 Apr 2010 to 21 May 2010)	31	11	35.5	17	54.8
17 (22 May 2010 to 21 Jun 2010)	41	9	22.0	13	31.7
18 (22 Jun 2010 to 21 Jul 2010)	33	12	36.4	18	54.5
Post-policy period	**293**	**107**	**36.5**	**142**	**48.5**

Table A5.5: Percentage of subjects who had a Taser deployed at them who were the targets of multiple discharges by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subject was the target of multiple discharges	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	8	3	37.5
2 (22 Feb 2009 to 21 Mar 2009)	7	1	14.3
3 (22 Mar 2009 to 21 Apr 2009)	15	3	20.0
4 (22 Apr 2009 to 21 May 2009)	12	4	33.3
5 (22 May 2009 to 21 Jun 2009)	11	5	45.5
6 (22 Jun 2009 to 21 Jul 2009)	3	1	33.3
7 (22 Jul 2009 to 21 Aug 2009)	6	3	50.0
8 (22 Aug 2009 to 21 Sep 2009)	10	3	30.0
Pre-policy period	**72**	**23**	**31.9**
9 (22 Sep 2009 to 21 Oct 2009)	8	4	50.0
10 (22 Oct 2009 to 21 Nov 2009)	4	1	25.0
11 (22 Nov 2009 to 21 Dec 2009)	7	4	57.1
12 (22 Dec 2009 to 21 Jan 2010)	6	2	33.3
13 (22 Jan 2010 to 21 Feb 2010)	13	4	30.8
14 (22 Feb 2010 to 21 Mar 2010)	5	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	7	3	42.9
16 (22 Apr 2010 to 21 May 2010)	6	4	66.7
17 (22 May 2010 to 21 Jun 2010)	9	2	22.2
18 (22 Jun 2010 to 21 Jul 2010)	4	2	50.0
Post-policy period	**69**	**26**	**37.7**

Table A5.6: Percentage of subjects who had a Taser deployed at them who were the targets of one or more prolonged discharges by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subject was the target of one or more prolonged discharges	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	8	0	0.0
2 (22 Feb 2009 to 21 Mar 2009)	7	2	28.6
3 (22 Mar 2009 to 21 Apr 2009)	15	3	20.0
4 (22 Apr 2009 to 21 May 2009)	12	0	0.0
5 (22 May 2009 to 21 Jun 2009)	11	4	36.4
6 (22 Jun 2009 to 21 Jul 2009)	3	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	6	0	0.0
8 (22 Aug 2009 to 21 Sep 2009)	10	2	20.0
Pre-policy period	**72**	**11**	**15.3**
9 (22 Sep 2009 to 21 Oct 2009)	8	3	37.5
10 (22 Oct 2009 to 21 Nov 2009)	4	0	0.0
11 (22 Nov 2009 to 21 Dec 2009)	7	0	0.0
12 (22 Dec 2009 to 21 Jan 2010)	6	1	16.7
13 (22 Jan 2010 to 21 Feb 2010)	13	5	38.5
14 (22 Feb 2010 to 21 Mar 2010)	5	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	7	0	0.0
16 (22 Apr 2010 to 21 May 2010)	6	2	33.3
17 (22 May 2010 to 21 Jun 2010)	9	0	0.0
18 (22 Jun 2010 to 21 Jul 2010)	4	0	0.0
Post-policy period	**69**	**11**	**15.9**

Table A5.7: Percentage of deployments that involved a subject who was handcuffed by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total deployments included in analysis	Involved a handcuffed subject	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	1	8.3
2 (22 Feb 2009 to 21 Mar 2009)	8	0	0.0
3 (22 Mar 2009 to 21 Apr 2009)	19	2	10.5
4 (22 Apr 2009 to 21 May 2009)	14	2	14.3
5 (22 May 2009 to 21 Jun 2009)	13	1	7.7
6 (22 Jun 2009 to 21 Jul 2009)	4	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	8	2	25.0
8 (22 Aug 2009 to 21 Sep 2009)	13	0	0.0
Pre-policy period	**91**	**8**	**8.8**
9 (22 Sep 2009 to 21 Oct 2009)	9	0	0.0
10 (22 Oct 2009 to 21 Nov 2009)	6	0	0.0
11 (22 Nov 2009 to 21 Dec 2009)	7	0	0.0
12 (22 Dec 2009 to 21 Jan 2010)	7	0	0.0
13 (22 Jan 2010 to 21 Feb 2010)	13	0	0.0
14 (22 Feb 2010 to 21 Mar 2010)	5	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	7	1	14.3
16 (22 Apr 2010 to 21 May 2010)	9	0	0.0
17 (22 May 2010 to 21 Jun 2010)	9	1	11.1
18 (22 Jun 2010 to 21 Jul 2010)	5	0	0.0
Post-policy period	**77**	**2**	**2.6**

Table A5.8: Percentage of deployments that involved a subject who had been sprayed with OC spray by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total deployments included in analysis	Involved a subject who had been sprayed with OC spray	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	0	0.0
2 (22 Feb 2009 to 21 Mar 2009)	8	0	0.0
3 (22 Mar 2009 to 21 Apr 2009)	19	2	10.5
4 (22 Apr 2009 to 21 May 2009)	14	1	7.1
5 (22 May 2009 to 21 Jun 2009)	13	3	23.1
6 (22 Jun 2009 to 21 Jul 2009)	4	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	8	0	0.0
8 (22 Aug 2009 to 21 Sep 2009)	13	2	15.4
Pre-policy period	**91**	**8**	**8.8**
9 (22 Sep 2009 to 21 Oct 2009)	9	1	11.1
10 (22 Oct 2009 to 21 Nov 2009)	6	1	16.7
11 (22 Nov 2009 to 21 Dec 2009)	7	1	14.3
12 (22 Dec 2009 to 21 Jan 2010)	7	2	28.6
13 (22 Jan 2010 to 21 Feb 2010)	13	2	15.4
14 (22 Feb 2010 to 21 Mar 2010)	5	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	7	2	28.6
16 (22 Apr 2010 to 21 May 2010)	9	3	33.3
17 (22 May 2010 to 21 Jun 2010)	9	2	22.2
18 (22 Jun 2010 to 21 Jul 2010)	5	0	0.0
Post-policy period	**77**	**14**	**18.2**

Table A5.9: Percentage of subjects who had a Taser deployed at them who were suspected to have a mental health condition by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subject suspected to have a mental health condition	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	3	25.0
2 (22 Feb 2009 to 21 Mar 2009)	7	1	14.3
3 (22 Mar 2009 to 21 Apr 2009)	18	2	11.1
4 (22 Apr 2009 to 21 May 2009)	14	2	14.3
5 (22 May 2009 to 21 Jun 2009)	13	2	15.4
6 (22 Jun 2009 to 21 Jul 2009)	3	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	7	1	14.3
8 (22 Aug 2009 to 21 Sep 2009)	12	0	0.0
Pre-policy period	**86**	**11**	**12.8**
9 (22 Sep 2009 to 21 Oct 2009)	8	2	25.0
10 (22 Oct 2009 to 21 Nov 2009)	6	0	0.0
11 (22 Nov 2009 to 21 Dec 2009)	7	1	14.3
12 (22 Dec 2009 to 21 Jan 2010)	7	2	28.6
13 (22 Jan 2010 to 21 Feb 2010)	13	5	38.5
14 (22 Feb 2010 to 21 Mar 2010)	5	1	20.0
15 (22 Mar 2010 to 21 Apr 2010)	7	1	14.3
16 (22 Apr 2010 to 21 May 2010)	7	3	42.9
17 (22 May 2010 to 21 Jun 2010)	9	2	22.2
18 (22 Jun 2010 to 21 Jul 2010)	4	1	25.0
Post-policy period	**73**	**18**	**24.7**

Table A5.10: Percentage of subjects who had a Taser deployed at them who were suspected to have a physical health condition by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subjects with a suspected physical health condition	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	2	16.7
2 (22 Feb 2009 to 21 Mar 2009)	7	0	0.0
3 (22 Mar 2009 to 21 Apr 2009)	18	1	5.6
4 (22 Apr 2009 to 21 May 2009)	14	0	0.0
5 (22 May 2009 to 21 Jun 2009)	13	0	0.0
6 (22 Jun 2009 to 21 Jul 2009)	3	0	0.0
7 (22 Jul 2009 to 21 Aug 2009)	7	0	0.0
8 (22 Aug 2009 to 21 Sep 2009)	12	1	8.3
Pre-policy period	**86**	**4**	**4.7**
9 (22 Sep 2009 to 21 Oct 2009)	8	0	0.0
10 (22 Oct 2009 to 21 Nov 2009)	6	0	0.0
11 (22 Nov 2009 to 21 Dec 2009)	7	0	0.0
12 (22 Dec 2009 to 21 Jan 2010)	7	1	14.3
13 (22 Jan 2010 to 21 Feb 2010)	13	2	15.4
14 (22 Feb 2010 to 21 Mar 2010)	5	0	0.0
15 (22 Mar 2010 to 21 Apr 2010)	7	0	0.0
16 (22 Apr 2010 to 21 May 2010)	7	2	28.6
17 (22 May 2010 to 21 Jun 2010)	9	0	0.0
18 (22 Jun 2010 to 21 Jul 2010)	4	0	0.0
Post-policy period	**73**	**5**	**6.8**

Table A5.11: Percentage of subjects who had a Taser deployed at them who were believed to be under the influence of alcohol and/or drugs by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subject believed to be under the influence of alcohol and/or drugs	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	9	75.0
2 (22 Feb 2009 to 21 Mar 2009)	7	7	100.0
3 (22 Mar 2009 to 21 Apr 2009)	18	16	88.9
4 (22 Apr 2009 to 21 May 2009)	14	9	64.3
5 (22 May 2009 to 21 Jun 2009)	13	12	92.3
6 (22 Jun 2009 to 21 Jul 2009)	3	2	66.7
7 (22 Jul 2009 to 21 Aug 2009)	7	7	100.0
8 (22 Aug 2009 to 21 Sep 2009)	12	8	66.7
Pre-policy period	**86**	**70**	**81.4**
9 (22 Sep 2009 to 21 Oct 2009)	8	5	62.5
10 (22 Oct 2009 to 21 Nov 2009)	6	4	66.7
11 (22 Nov 2009 to 21 Dec 2009)	7	6	85.7
12 (22 Dec 2009 to 21 Jan 2010)	7	6	85.7
13 (22 Jan 2010 to 21 Feb 2010)	12	11	91.7
14 (22 Feb 2010 to 21 Mar 2010)	5	2	40.0
15 (22 Mar 2010 to 21 Apr 2010)	6	5	83.3
16 (22 Apr 2010 to 21 May 2010)	7	6	85.7
17 (22 May 2010 to 21 Jun 2010)	9	8	88.9
18 (22 Jun 2010 to 21 Jul 2010)	4	3	75.0
Post-policy period	**71**	**56**	**78.9**

Table A5.12: Percentage of Taser uses that were judged effective by the reporting officer by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total uses included in analysis	Use judged effective	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	48	44	91.7
2 (22 Feb 2009 to 21 Mar 2009)	56	52	92.9
3 (22 Mar 2009 to 21 Apr 2009)	60	56	93.3
4 (22 Apr 2009 to 21 May 2009)	46	37	80.4
5 (22 May 2009 to 21 Jun 2009)	59	50	84.7
6 (22 Jun 2009 to 21 Jul 2009)	28	25	89.3
7 (22 Jul 2009 to 21 Aug 2009)	32	27	84.4
8 (22 Aug 2009 to 21 Sep 2009)	41	32	78.0
Pre-policy period	**370**	**323**	**87.3**
9 (22 Sep 2009 to 21 Oct 2009)	30	27	90.0
10 (22 Oct 2009 to 21 Nov 2009)	38	31	81.6
11 (22 Nov 2009 to 21 Dec 2009)	22	21	95.5
12 (22 Dec 2009 to 21 Jan 2010)	25	22	88.0
13 (22 Jan 2010 to 21 Feb 2010)	36	34	94.4
14 (22 Feb 2010 to 21 Mar 2010)	21	17	81.0
15 (22 Mar 2010 to 21 Apr 2010)	22	17	77.3
16 (22 Apr 2010 to 21 May 2010)	33	27	81.8
17 (22 May 2010 to 21 Jun 2010)	40	39	97.5
18 (22 Jun 2010 to 21 Jul 2010)	33	27	81.8
Post-policy period	**300**	**262**	**87.3**

Table A5.13: Percentage of subjects who had a Taser deployed at them who sustained a possible Taser-related injury or complication by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Total subjects included in analysis	Subject sustained a possible Taser-related injury or complication	
	N	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	12	0	0.0
2 (22 Feb 2009 to 21 Mar 2009)	7	0	0.0
3 (22 Mar 2009 to 21 Apr 2009)	18	2	11.1
4 (22 Apr 2009 to 21 May 2009)	14	3	21.4
5 (22 May 2009 to 21 Jun 2009)	12	1	8.3
6 (22 Jun 2009 to 21 Jul 2009)	3	1	33.3
7 (22 Jul 2009 to 21 Aug 2009)	7	1	14.3
8 (22 Aug 2009 to 21 Sep 2009)	12	1	8.3
Pre-policy period	**85**	**9**	**10.6**
9 (22 Sep 2009 to 21 Oct 2009)	8	0	0.0
10 (22 Oct 2009 to 21 Nov 2009)	6	0	0.0
11 (22 Nov 2009 to 21 Dec 2009)	7	0	0.0
12 (22 Dec 2009 to 21 Jan 2010)	7	1	14.3
13 (22 Jan 2010 to 21 Feb 2010)	13	1	7.7
14 (22 Feb 2010 to 21 Mar 2010)	5	2	40.0
15 (22 Mar 2010 to 21 Apr 2010)	7	1	14.3
16 (22 Apr 2010 to 21 May 2010)	7	2	28.6
17 (22 May 2010 to 21 Jun 2010)	9	0	0.0
18 (22 Jun 2010 to 21 Jul 2010)	4	1	25.0
Post-policy period	**73**	**8**	**11.0**

Table A5.14: Percentage of Taser incidents that involved an injury to a police officer by month, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

	Total incidents included in analysis	Incidents that involved an injury to a police officer	
Month	*N*	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	47	4	8.5
2 (22 Feb 2009 to 21 Mar 2009)	55	3	5.5
3 (22 Mar 2009 to 21 Apr 2009)	57	8	14.0
4 (22 Apr 2009 to 21 May 2009)	44	6	13.6
5 (22 May 2009 to 21 Jun 2009)	53	5	9.4
6 (22 Jun 2009 to 21 Jul 2009)	29	1	3.4
7 (22 Jul 2009 to 21 Aug 2009)	27	3	11.1
8 (22 Aug 2009 to 21 Sep 2009)	38	6	15.8
Pre-policy period	**350**	**36**	**10.3**
9 (22 Sep 2009 to 21 Oct 2009)	31	2	6.5
10 (22 Oct 2009 to 21 Nov 2009)	38	6	15.8
11 (22 Nov 2009 to 21 Dec 2009)	21	2	9.5
12 (22 Dec 2009 to 21 Jan 2010)	25	3	12.0
13 (22 Jan 2010 to 21 Feb 2010)	36	5	13.9
14 (22 Feb 2010 to 21 Mar 2010)	21	1	4.8
15 (22 Mar 2010 to 21 Apr 2010)	21	2	9.5
16 (22 Apr 2010 to 21 May 2010)	27	1	3.7
17 (22 May 2010 to 21 Jun 2010)	39	3	7.7
18 (22 Jun 2010 to 21 Jul 2010)	30	4	13.3
Post-policy period	**289**	**29**	**10.0**

Table A5.15: Percentage of Taser uses that were judged appropriate by the SERP by month, 22 January 2009 (start of Month 1) to 21 May 2010 (end of Month 16)

	Total uses included in analysis	Uses judged appropriate by the SERP	
Month	*N*	*n*	%
1 (22 Jan 2009 to 21 Feb 2009)	45	44	97.8
2 (22 Feb 2009 to 21 Mar 2009)	53	53	100.0
3 (22 Mar 2009 to 21 Apr 2009)	58	57	98.3
4 (22 Apr 2009 to 21 May 2009)	43	42	97.7
5 (22 May 2009 to 21 Jun 2009)	45	42	93.3
6 (22 Jun 2009 to 21 Jul 2009)	25	23	92.0
7 (22 Jul 2009 to 21 Aug 2009)	29	29	100.0
8 (22 Aug 2009 to 21 Sep 2009)	33	29	87.9
Pre-policy period	**331**	**319**	**96.4**
9 (22 Sep 2009 to 21 Oct 2009)	22	21	95.5
10 (22 Oct 2009 to 21 Nov 2009)	22	21	95.5
11 (22 Nov 2009 to 21 Dec 2009)	14	13	92.9
12 (22 Dec 2009 to 21 Jan 2010)	21	21	100.0
13 (22 Jan 2010 to 21 Feb 2010)	33	32	97.0
14 (22 Feb 2010 to 21 Mar 2010)	22	21	95.5
15 (22 Mar 2010 to 21 Apr 2010)	20	20	100.0
16 (22 Apr 2010 to 21 May 2010)	19	19	100.0
Post-policy period	**173**	**168**	**97.1**

Table A5.16: Number and rate of Taser-related complaints to the CMC, 22 January 2009 (start of Month 1) to 21 July 2010 (end of Month 18)

Month	Number of Taser-related complaints	Rate of Taser-related complaints per 100 reported Taser uses
1 (22 Jan 2009 to 21 Feb 2009)	1	2.0
2 (22 Feb 2009 to 21 Mar 2009)	1	1.7
3 (22 Mar 2009 to 21 Apr 2009)	2	3.3
4 (22 Apr 2009 to 21 May 2009)	1	2.1
5 (22 May 2009 to 21 Jun 2009)	2	3.4
6 (22 Jun 2009 to 21 Jul 2009)	2	6.7
7 (22 Jul 2009 to 21 Aug 2009)	1	3.1
8 (22 Aug 2009 to 21 Sep 2009)	1	2.4
Pre-policy period	**11**	**2.9**
9 (22 Sep 2009 to 21 Oct 2009)	2	6.3
10 (22 Oct 2009 to 21 Nov 2009)	1	2.6
11 (22 Nov 2009 to 21 Dec 2009)	1	4.5
12 (22 Dec 2009 to 21 Jan 2010)	4	16.0
13 (22 Jan 2010 to 21 Feb 2010)	1	2.8
14 (22 Feb 2010 to 21 Mar 2010)	1	4.5
15 (22 Mar 2010 to 21 Apr 2010)	0	0.0
16 (22 Apr 2010 to 21 May 2010)	0	0.0
17 (22 May 2010 to 21 Jun 2010)	1	2.4
18 (22 Jun 2010 to 21 Jul 2010)	0	0.0
Post-policy period	**11**	**3.6**

APPENDIX 6:
Effects of the revised Taser training — data analysis

Table A6.1: Percentage of presentations and deployments among Taser uses, with chi-square results for significance of differences (revised training groups versus old training groups)

Nature of use	% of revised training group	% of old training group
Presentation	77.9	74.0
Deployment	22.1	26.0
– probe deployment	17.4	24.4
– drive stun deployment	0.0	0.8
– probe and drive stun deployment	4.7	0.8

Notes: 7 uses (3.2%) with missing data were excluded from this analysis.
For presentations versus all deployments: X^2 (N = 213) = 0.236, p = .627^{ns}.

Table A6.2: Percentage of Taser uses that involved a subject who posed a risk of serious injury, with chi-square results for significance of differences (revised training group versus old training group)

Use involved a subject who posed a risk of serious injury	% of revised training group	% of old training group
Yes	100.0	95.3
No	0.0	4.7

Notes: 7 uses (3.2%) with missing data excluded from these analyses.
Fisher's Exact Test (N = 213), p = .083^{ns}. Note that 50.0% of cells had an expected count less than 5.

Table A6.3: Percentage of Taser uses that involved a subject whose actions indicated a threat to police, with chi-square results for significance of differences (revised training group versus old training group)

Use involved a subject whose actions indicated a threat to police	% of revised training group	% of old training group
Yes	23.2	23.3
No	76.8	76.7

Notes: 18 uses (8.2%) with missing data were excluded from this analysis.
X^2 (N = 202) = 0.000, p = 1.000^{ns}.

Table A6.4: Percentage of Taser uses that involved a subject who was armed and whose actions indicated a threat to a person, with chi-square results for significance of differences (revised training group versus old training group)

Use involved a subject who was armed and whose actions indicated a threat to a person	% of revised training group	% of old training group
Yes	15.9	20.0
No	84.1	80.0

Notes: 18 uses (8.2%) with missing data were excluded from this analysis.
X^2 (N = 202) = 0.317, p = .573^{ns}.

Table A6.5: Percentage of Taser uses that involved a subject observed to be armed with a weapon, with chi-square results for significance of differences (revised training group versus old training group)

Use involved a subject observed to be armed with a weapon	% of revised training group	% of old training group
Yes	29.3	40.8
No	70.7	59.2

Notes: 18 uses (8.2%) with missing data excluded from these analyses.
X^2 (N = 202) = 2.344, p = .126^{ns}.

Table A6.6: Percentage of Taser uses that involved a subject observed or believed to be armed with a weapon, with chi-square results for significance of differences (revised training group versus old training group)

Use involved a subject observed or believed to be armed with a weapon	% of revised training group	% of old training group
Yes	39.0	55.0
No	61.0	45.0

Notes: 18 uses (8.2%) with missing data excluded from these analyses.
X^2 (N = 202) = 4.358, p = .037*, phi = –.16. According to Cohen's (1988) guidelines for interpreting effect size, a phi coefficient value of .10 is a small effect, a value of .30 is a medium effect, and a value of .50 is a large effect.

Table A6.7: Percentage of subjects who had a Taser deployed at them who were the targets of multiple discharges, with chi-square results for significance of differences (revised training group versus old training group)

Number of discharges	% of revised training group	% of old training group
Single discharge	77.8	63.0
Multiple discharges	22.2	37.0

Notes: 8 subjects (15.1%) with missing data were excluded from this analysis.
X^2 (N = 45) = 0.523, p = .470^{ns}.

Table A6.8: Percentage of subjects who had a Taser deployed at them who were the targets of a prolonged discharge, with chi-square results for significance of differences (revised training group versus old training group)

Length of discharge/s	% of revised training group	% of old training group
Standard 5-second discharge/s only	88.9	81.5
One or more prolonged discharges	11.1	18.5

Notes: 8 subjects (15.1%) with missing data were excluded from this analysis.
Fisher's Exact Test (N = 45), p = .684^{ns}. Note that 50.0% of cells had an expected count less than 5.

Table A6.9: Percentage of Taser deployments that involved a subject who was handcuffed, with chi-square results for significance of differences (revised training group versus old training group)

Deployment involved a subject who was handcuffed	% of revised training group	% of old training group
Yes	0.0	3.0
No	100.0	97.0

Notes: 2 deployments (3.7%) with missing data were excluded from this analysis.
Fisher's Exact Test (N = 52), p = 1.000^{ns}. Note that 50.0% of cells had an expected count less than 5.

Table A6.10: Percentage of Taser deployments that involved a subject who had been sprayed with OC spray, with chi-square results for significance of differences (revised training group versus old training group)

Deployment involved a subject who had been sprayed with OC spray	% of revised training group	% of old training group
Yes	26.3	18.2
No	73.7	81.8

Notes: 2 deployments (3.7%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 52$), $p = .503^{ns}$. Note that 25.0% of cells had an expected count less than 5.

Table A6.11: Percentage of subjects who had a Taser deployed at them who were suspected to have a mental health condition, with chi-square results for significance of differences (revised training group versus old training group)

Subject suspected to have a mental health condition	% of revised training group	% of old training group
Yes	27.8	12.9
No	72.2	87.1

Notes: 4 subjects (7.5%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 49$), $p = .259^{ns}$. Note that 25.0% of cells had an expected count less than 5.

Table A6.12: Percentage of subjects who had a Taser deployed at them who were suspected to have a physical health condition, with chi-square results for significance of differences (revised training group versus old training group)

Subject suspected to have a physical health condition	% of revised training group	% of old training group
Yes	5.6	0.0
No	94.4	100.0

Notes: 4 subjects (7.5%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 49$), $p = .367^{ns}$. Note that 50.0% of cells had an expected count less than 5.

Table A6.13: Percentage of subjects who had a Taser deployed at them who were suspected to be under the influence of alcohol and/or drugs, with chi-square results for significance of differences (revised training group versus old training group)

Subject suspected to be under the influence of alcohol and/or drugs	% of revised training group	% of old training group
Yes	82.4	70.0
No	17.6	30.0

Notes: 6 subjects (11.3%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 47$), $p = .492^{ns}$. Note that 25.0% of cells had an expected count less than 5.

Table A6.14: Percentage of Taser uses judged effective by the reporting officer, with chi-square results for significance of differences (revised training group versus old training group)

Judgment of effectiveness	% of revised training group	% of old training group
Effective	88.0	87.7
Not effective	12.0	12.3

Notes: 15 uses (6.8%) with missing data were excluded from this analysis.
X^2 ($N = 205$) = 0.000, $p = 1.000^{ns}$.

Table A6.15: Percentage of subjects who had a Taser deployed at them who sustained a possible Taser-related injury or complication, with chi-square results for significance of differences (revised training group versus old training group)

Subject sustained a possible Taser-related injury or complication	% of revised training group	% of old training group
Yes	11.1	12.9
No	88.9	87.1

Notes: 4 subjects (7.5%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 49$), $p = 1.000^{ns}$. Note that 50.0% of cells had an expected count less than 5.

Table A6.16: Percentage of Taser incidents that involved an injury to a police officer, with chi-square results for significance of differences (revised training group versus old training group)

Incident involved an injury to a police officer	% of revised training group	% of old training group
Yes	10.3	8.3
No	89.7	91.7

Notes: 13 incidents (6.1%) with missing data were excluded from this analysis.
X^2 ($N = 199$) = 0.051, $p = .822^{ns}$.

Table A6.17: Percentage of Taser uses judged appropriate by the SERP, with chi-square results for significance of differences (revised training group versus old training group)

SERP judgment	% of revised training group	% of old training group
Appropriate/no concerns raised	97.9	97.8
Concerns raised	2.1	2.2

Notes: 79 uses (35.9%) with missing data were excluded from this analysis.
Fisher's Exact Test ($N = 141$), $p = 1.000^{ns}$. Note that 50.0% of cells had an expected count less than 5.

REFERENCES

ACPO — *see* Association of Chief Police Officers.

Alberta Solicitor General and Public Security 2009, *Provincial guidelines for the use of conducted energy weapons*, British Columbia Civil Liberties Association, Vancouver, viewed 22 July 2010, <http://rightscity.org/wp-content/policy/PolicyABTaser.pdf>.

Alpert, GP & Dunham, RG 2010, 'Policy and training recommendations related to police use of CEDs: overview of findings from a comprehensive national study', *Police Quarterly*, vol. 13, no. 3, pp. 235–59.

Association of Chief Police Officers 2008, *Operational use of Taser by authorised firearms officers: policy*, viewed 8 March 2011, ACPO, London, <www.acpo.police.uk/documents/uniformed/2008/200812UNTAS01.pdf>.

Australian Bureau of Statistics 2010, *Australia demographic statistics: June quarter 2010*, ABS, Canberra, viewed 24 February 2011, <www.ausstats.abs.gov.au/Ausstats/subscriber.nsf/0/40946B5F0164658CCA2577FF0011CB14/$File/31010_jun%202010.pdf>.

Australian Bureau of Statistics and Australian Institute of Health and Welfare 2008, *The health and welfare of Australia's Aboriginal and Torres Strait Islander peoples*, ABS and AIHW, Canberra, viewed 8 December 2010, <www.aihw.gov.au/publications/ihw/hwaatsip08/hwaatsip08.pdf>.

Australian Institute of Criminology 2009, *Indigenous imprisonment rates*, Crime Facts Info No. 195, AIC, Canberra, viewed 8 December 2010, <www.aic.gov.au/documents/B/C/7/%7BBC7021AA-93BF-4CCA-B15E-789C01D1A76C%7Dcfi195.pdf>.

Australian Institute of Criminology 2010, *Indigenous perpetrators of violence: prevalence and risk factors for offending*, Research and Public Policy Series No. 105, AIC, Canberra, viewed 8 December 2010, <www.aic.gov.au/documents/2/A/4/%7B2A48440C-E61B-41E4 AD8D-28F536F8B586%7Drpp105.pdf>.

Australian Institute of Health and Welfare 2008, *2007 National Drug Strategy Household Survey: detailed findings*, AIHW, Canberra, viewed 18 February 2011, <www.aihw.gov.au/publications/phe/ndshs07-df/ndshs07-df.pdf>.

CBC News 2010, 'Taser tests find variation in weapon charge', 20 August 2010, viewed 30 August 2010, <www.cbc.ca/canada/ottawa/story/2010/08/20/ottawa-taser-study.html>.

CCC — *see* Corruption and Crime Commission.

Cohen, J 1988, *Statistical power analysis for the behavioral sciences*, 2nd edn, Lawrence Erlbaum Associates, Inc., Hillsdale, NJ.

CMC — *see* Crime and Misconduct Commission.

Commission for Public Complaints Against the Royal Canadian Mounted Police 2008, *RCMP use of the conducted energy weapon (CEW): final report*, CPC–RCMP, Surrey, BC, viewed 27 May 2010, <www.cpc-cpp.gc.ca/af-fr/PDF/FinalCEWReport_e.pdf>.

—— 2009, *Report following a public interest investigation into a Chair-initiated complaint respecting the death in RCMP custody of Mr Robert Dziekanski*, CPC–RCMP, Surrey, BC, viewed 20 July 2010, <www.cpc-cpp.gc.ca/prr/rep/rev/chair-pre/dziekanski/yvr-inter-eng.pdf>.

Corruption and Crime Commission 2010, *The use of Taser weapons by Western Australia Police*, CCC, Perth, viewed 11 October 2010, <www.ccc.wa.gov.au/Publications/Reports/Documents/Published%20Reports/2010/20101004%20Use%20of%20Taser%20Weapons%20Complete.pdf>.

CPC–RCMP — *see* Commission for Public Complaints Against the Royal Canadian Mounted Police.

Crime and Misconduct Commission 2008a, *Tasers: a brief overview of the research literature*, Research & Issues Paper No. 8, CMC, Brisbane, viewed 7 May 2010, <www.cmc.qld.gov.au/data/portal/00000005/content/07918001228435001660.pdf>.

—— 2008b, *Policing public order: a review of the public nuisance offence*, CMC, Brisbane, viewed 1 February 2011, <www.cmc.qld.gov.au/data/portal/00000005/content/36703001211161906459.pdf>.

—— 2010, *Police move-on powers: a CMC review of their use*, CMC, Brisbane, viewed 1 February 2011, <www.cmc.qld.gov.au/data/portal/00000005/content/80468001292819166771.pdf>.

Cronin, JM & Ederheimer, JA 2006, *Conducted energy devices: development of standards for consistency and guidance*, US Department of Justice and Police Executive Research Forum, Washington, DC, viewed 22 July 2010, <www.ojp.usdoj.gov/BJA/pdf/CED_Standards.pdf>.

Department of Health and Ageing 2006, *Your weight: calculate your (for adults only) Body Mass Index (BMI)*, Department of Health and Ageing, Canberra, viewed 7 December 2010, <www.health.gov.au/internet/healthyactive/publishing.nsf/Content/your-bmi>.

Duignan, P 2009, *What is 'best practice'?*, Outcomes Theory Knowledge Base (Electronic Version), no. 237, viewed 20 July 2010, <http://knol.google.com/k/what-is-best-practice>.

Federation of Community Legal Centres (Victoria) 2010, *Taser trap: is Victoria falling for it?*, Federation of Community Legal Centres (Victoria), Melbourne, viewed 1 November 2010, <www.communitylaw.org.au/intranet/public_resource_details.php?resource_id=1668>.

Guest, D 2010a, 'Aborigine Tasered in custody', *Australian*, 5 October 2010, p. 1.

—— 2010b, 'Police to forgo Tasers in lock-ups', *Australian*, 13 October 2010, p. 5.

Harris, DA 2009, *Report of the Use of Force Working Group of Allegheny County, Pennsylvania*, viewed 23 July 2010, <www.law.pitt.edu/files/harris/Taser-Working-Group.pdf>.

Mckean, B 2010, 'Tasered driver fell, knocking out three teeth', *Daily Mercury*, 2 October 2010, p. 5.

McKinney, M 2010, 'Tasers no longer "nonlethal"', *Star Tribune*, 3 October 2010, viewed 7 January 2011, <www.startribune.com/local/104214288.html>.

Moscati, RM, Ho, JD, Dawes, DM & Miner, JR 2010, 'Physiologic effects of prolonged conducted electrical weapon discharge in ethanol-intoxicated adults', *American Journal of Emergency Medicine*, vol. 28, pp. 582–7.

news.com.au 2009, 'Man dies after Taser used in Brandon, Queensland', 12 June 2009, viewed 7 May 2010, <www.news.com.au/man-dies-after-taser-used-in-brandon-queensland/story-0-1225733859046>.

New Zealand Police 2008, *Operational evaluation of the New Zealand Taser trial*, NZ Police, Wellington, viewed 18 February 2011, <https://admin.police.govt.nz/resources/2008/operational-evaluation-of-nz-taser-trial/operational-evaluation-of-nz-taser-trial-2008.pdf>.

NZ Police — *see* New Zealand Police.

Office of the Maryland Attorney General 2009, *Report of the Maryland Attorney General's Task Force on Electronic Weapons*, Office of the Maryland Attorney General, Baltimore, viewed 3 June 2010, <www.oag.state.md.us/Reports/ECWReport.pdf>.

Ontario Ministry of Community Safety and Correctional Services 2010, *Conducted energy weapons — guidelines*, Ontario Ministry of Community Safety and Correctional Services, Toronto, viewed 23 July 2010, <www.mcscs.jus.gov.on.ca/stellent/groups/public/@mcscs/@www/@com/documents/webasset/ec081153.pdf>.

Ontario Policing Standards Advisory Committee 2009, *Review of conducted energy weapon use in Ontario: report of the Policing Standards Advisory Committee*, Ontario Ministry of Community Safety and Correctional Services, Toronto, viewed 23 July 2010, <www.mcscs.jus.gov.on.ca/stellent/groups/public/@mcscs/@www/@com/documents/webasset/ec081155.pdf>.

PERF — *see* Police Executive Research Forum.

Police Executive Research Forum 2005, *PERF conducted energy device policy and training guidelines for consideration*, PERF, Washington, DC, viewed 22 July 2010, <www.policeforum.org/upload/PERF-CED-Guidelines-Updated-10-25-05%5B1%5D_715866088_1230200514040.pdf>.

Public Safety Canada 2010, *Guidelines for the use of conducted energy weapons*, Public Safety Canada, Ottawa, viewed 31 January 2011, <www.publicsafety.gc.ca/prg/le/gucew-ldrai-eng.aspx>.

QPS — *see* Queensland Police Service.

Queensland Police Service 2008, 'Commissioner's Circular 34/2008: Significant Event Review Panels', QPS, Brisbane.

—— 2009a, *Review of the Queensland Police Service Taser trial*, QPS, Brisbane, viewed 7 May 2010, <www.police.qld.gov.au/Resources/Internet/news%20and%20alerts/campaigns/taser/documents/ReviewoftheQPSTasertrial.pdf>.

—— 2009b, *Death of man at Brandon*, media release, 12 June 2009, QPS, Brisbane, viewed 7 May 2010, <www.police.qld.gov.au/News+and+Alerts/Media+Releases/2009/06Death+of+man+at+Brandon.htm>.

—— 2009c, *Update to investigation into death of man at Brandon*, media release, 18 June 2009, QPS, Brisbane, viewed 7 May 2010, <www.police.qld.gov.au/News+and+Alerts/Media+Releases/2009/06/18brandonupdate.htm>.

—— 2009d, 'Operational Procedures Manual (Issue 36 – December 2009)', QPS, Brisbane.

—— 2009e, 'Commissioner's Circular 15/2009: Taser policy', QPS, Brisbane.

—— 2009f, *Tasers*, QPS, Brisbane, viewed 25 February 2011, <www.police.qld.gov.au/News+and+Alerts/campaigns/taser/default.htm>.

—— 2010, *QPS hosts Taser forum*, media release, 7 October 2010, QPS, Brisbane, viewed 7 October 2010, <www.police.qld.gov.au/News+and+AlertsMedia+Releases/2010/10/>.

Queensland Police Service and Crime and Misconduct Commission 2009, *QPS–CMC review of Taser policy, training, and monitoring and review practices*, QPS and CMC, Brisbane, viewed 7 May 2010, <www.police.qld.gov.au/Resources/Internet/news%20and%20alerts/campaigns/taser/documents/QPSCMC%20Taser%20Review%20Report.pdf>.

RCMP — *see* Royal Canadian Mounted Police.

Robb, M, Close, B, Furyk, J & Aitken, P 2009, 'Emergency department implications of the TASER', *Emergency Medicine Australasia*, vol. 21, no. 4, pp. 250–8.

Roberts, N (Minister for Police, Corrective Services and Emergency Services) 2009, *Statement by Minister Roberts re: tasers*, ministerial media statement, 15 June 2009, Department of Premier and Cabinet, Brisbane, viewed 7 May 2010, <www.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=64389>.

Royal Canadian Mounted Police 2010, *Operational manual — Conducted energy weapon*, RCMP, Ottawa, viewed 8 June 2010, <www.rcmp-grc.gc.ca/ccaps-spcca/cew-ai/operations-17-7-eng.htm>.

Sanford, JM, Jacobs, GJ, Roe, EJ & Terndrup, TE in press, 'Two patients subdued with a TASER device: cases and review of complications', *Journal of Emergency Medicine*.

Smith, MR, Kaminski, RJ, Alpert, GP, Fridell, LA, MacDonald, J & Kubu, B 2010, *A multi-method evaluation of police use of force outcomes: final report to the National Institute of Justice*, viewed 1 November 2010, <www.ncjrs.gov/pdffiles1/nij/grants/231176.pdf>.

Spence, J (Minister for Police and Corrective Services) 2007, *Queensland police to trial tasers*, ministerial media statement, 29 March 2007, Department of the Premier and Cabinet, Brisbane, viewed 7 May 2010, <www.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=51175>.

—— (Minister for Police, Corrective Services and Sport) 2008a, *Spence commits to state wide roll out of tasers*, ministerial media statement, 29 January 2008, Department of the Premier and Cabinet, Brisbane, viewed 7 May 2010, <www.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=56270>.

—— (Minister for Police, Corrective Services and Sport) 2008b, *Tasers to all frontline officers at Dutton Park*, ministerial media statement, 23 March 2008, Department of the Premier and Cabinet, Brisbane, viewed 7 May 2010, <www.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=57210>.

—— (Minister for Police, Corrective Services and Sport) 2008c, *$14 million committed for taser roll out and training*, ministerial media statement, 16 July 2008, Department of the Premier and Cabinet, Brisbane, viewed 7 May 2010, <www.cabinet.qld.gov.au/MMS/StatementDisplaySingle.aspx?id=59223>.

Stinger Systems 2010, *S-200 AT EID*, Stinger Systems, Tampa, viewed 13 July 2010, <www.stingersystems.com/content/s-200ateid>.

Sydney Morning Herald 2009, 'Taser set petrol sniffer ablaze: police', 21 July 2009, viewed 6 January 2011, <www.smh.com.au/national/taser-set-petrol-sniffer-ablaze-police-20090721-drf0.html>.

TASER International 2010, *TASER X3*, viewed 13 July 2010, TASER International, Scottsdale, AZ, <www.taser.com/products/law/Pages/TASERX3.aspx>.

WAPOL — *see* Western Australia Police.

Western Australia Police 2010, *Post implementation review of Taser*, WAPOL, Perth, viewed 6 August 2010, <www.police.wa.gov.au/LinkClick.aspx?fileticket=pcnaB%2B6IznE%3D&tabid=1068>.

White, MD & Ready, J 2009, 'Examining fatal and nonfatal incidents involving the TASER: identifying predictors of suspect death reported in the media', *Criminology & Public Policy*, vol. 8, no. 4, pp. 865–91.

Legal authorities

Legislation

Criminal Code Act 1899 (Qld)

Inquests

Inquest into the death of Gottlieb Rubuntja [2010] NTMC 048