

CLINICAL SIGNIFICANCE™



Welcome to this Issue



Clinical Significance™ is a quarterly newsletter published by the Institute for the Prevention of In-Custody Deaths, Inc. (IPICD), with goals of providing timely information about arrest-related deaths, in-custody deaths, legal, scientific, medical, and practical updates, in addition to other timely and relevant topics.

Topics reviewed in this issue include a summary of: research findings on two studies; updates on two IPICD research studies; legal decision on restraint techniques used by officers; injuries from force used by law enforcement officers; 2013 IPICD Conference; plus more.

As Editor for *Clinical Significance*™ I encourage you to submit a short article or story. It will be appreciated by everyone who reads the newsletter. Send your feedback, too. Enjoy this issue.

Dr. Peters

2013 IPICD 8th ExDS Conference

Make plans to attend the 8th annual IPICD international conference on November 18-20, 2013. It will be held at The Orleans Hotel, Tropicana Boulevard, Las Vegas, NV. The theme of this year's conference is on investigating arrest-related deaths. Updates about excited delirium research and other arrest-related death research will also be presented. As more information becomes available it will be uploaded to the IPICD Website: www.ipicd.com.

Prone Maximal Restraint Study

A seminal scientific study funded by a grant from the IPICD was recently completed, with results presented at the Society for Academic Medicine, Atlanta, GA, on May 15, 2013. "The Ventilatory Effects of the Prone Maximal Restraint Position on Obese Human Subjects" was the title of the poster presentation made by Sloane, Chan, Vilke, Castillo, Kolkhorst, and Neuman. The researchers are associated with University of California, San Diego School of Medicine and San Diego State University, San Diego, CA. The randomized, cross-over trial focused on 10 --->

human subjects (pilot study) who had a Body Mass Index (BMI) of greater than 30. Following a period of heavy exertion on a cycling ergometer to 85% of maximum heart rate, the subjects were then placed in one of 3 positions for 15 minutes: seated with hands behind the back; prone with arms to the sides; or prone maximal restraint (PMR) position.

The researchers' found "no clinically significant differences in the cardiovascular and respiratory measures comparing seated, prone, and PMR position following heavy exertion" (Sloane, Chan, Vilke, Castillo, Kolkhorst, & Neuman, 2013, Poster).

The WRAP Restraint Study

Another seminal study funded by the IPICD focused upon The WRAP Restraint. The retrospective, case-series review identified why and on whom The WRAP was applied during a 5-year period in a variety of police field settings, including how well it worked and if it caused additional injuries. Content analysis of the 128 voluntarily-submitted use-of-force and incident reports were used to develop descriptive data on 24 variables. The 100-plus page report has more than 20 tables of easy-to-read data including a thorough literature review of restraint-based research and key legal standards.

A key finding was officers reported The WRAP to be 100% effective (n = 128). Based upon the study's findings, more than 15 recommendations are offered to law enforcement leaders, managers, and trainers who have adopted, use, or teach The WRAP, or who are considering its adoption. An abstract of the study and how to obtain a copy of the research report will soon be available at www.ipicd.com.

Sixth Circuit Restraint Case

On April 9, 2013 the United States Court of Appeals, Sixth Circuit, ruled in Tanya A. Martin v. City of Broadview Heights, et al. that the:

- Officers' alleged conduct in physically restraining 19-year-old William Parker Martin amounted to using excessive force,
- Officers were not entitled to qualified immunity, and --->



- Court of Appeals lacked pendent appellate jurisdiction to consider the City of Broadview Heights' appeal.

According to the Court's opinion, Mr. Parker was an unarmed and mentally unstable individual who was reported to be naked by a resident. One officer who responded saw the naked Mr. Parker running toward the officer's patrol car, speaking quickly and nonsensically.

Asking the officer for help, Mr. Martin calmed down, placed his hands behind his back, and insisted the officer take him to jail. When the officer went to grab Mr. Martin's hands for handcuffing, Mr. Martin "jogged away" but the officer caught him in less than 20 feet, and then fell on top of Mr. Martin.

Other officers arrived at the scene and when Mr. Martin attempted to push up from the ground, an officer dropped his knee into Mr. Martin's side, and also fell on top of him. One officer punched Mr. Martin using "hammer punches" (closed-fist punches) after Mr. Hammer bit the officer's knuckle. The officer used all of his force to strike Mr. Martin in the face, back, and ribs at least 5 times. Evidence suggested one officer had his arm wrapped around Mr. Martin's neck area, while folding his legs around Mr. Martin's hips and upper thighs. Officers attempted to get Mr. Martin's hands behind his back. One officer knelt on Mr. Martin's calves to prevent him from kicking. Mr. Martin was face down upon the ground. Shortly after handcuffing, officers heard Mr. Martin make a "gurgling sound" and after rolling him onto his side found him non-responsive. Mr. Martin was pronounced dead that morning.

The first autopsy of Mr. Martin concluded that Mr. Martin had died from an acute psychotic episode with "excited delirium due to intoxication by lysergic acid diethylamide (LSD), and that his death was not the result of force used by the officers.

After the autopsy findings were disputed, another forensic pathologist conducted another autopsy and ruled the officers "compressive events" could have caused Mr. Martin to asphyxiate. Based upon the evidence, the forensic pathologist concluded that asphyxia was the likely cause of death.

The Court's opinion noted that the officers said they never considered the agency's "Positional Asphyxia Policy" when struggling with Mr. Martin, or thought Mr. Martin was a "high-risk" subject under the policy.

For more information, see *Martin v. City of Broadview Heights*, 712 F.3d 951 (2013).

Use-of-Force Frequency: 2008

The United States Bureau of Justice Statistics reported 40,015,000 people had contact with the police in 2008. Approximately 1.9% of these U.S. residents (estimated 776,000) experienced use of force or threat of force by police in 2008, --->

a drop from 2.3% in 2005. According to the authors, Ms. Christine Eith and Mr. Matthew R. Durose, "males, blacks, and younger persons were more likely to have a contact with police in 2008 that resulted in use of force" (p. 11). For more information about police contacts and force, please visit www.bjs.gov, and review the special report, *Contact between Police and the Public, 2008*.

Children and Mental Disorders

The Centers for Disease Control and Prevention conducted a mental health surveillance of children from 2005-2011. Data collected and published in its *Mental Health Surveillance Among Children—United States, 2005-2011*. MMWR 2013; 62 (Suppl. 2) showed up to 1 in every 5 children experienced a mental health disorder in a given year. Other findings and disorders included, but are not limited to:

Children ages 3-17 years of age currently had:

- ADHD (6.8%),
- Behavioral or conduct problems (3.5%),
- Anxiety (3.0%),
- Depression (2.1%),
- Autism spectrum disorders (1.1%), and
- Tourette syndrome (0.2%) (among children aged 6-17 years) -->

Adolescents aged 12-17 years of age had:

- Illicit drug use disorder in the past year (4.7%),
- Alcohol use disorder in the past year (4.2%), and
- Cigarette dependence in the past month (2.8%).

Suicide rates for persons ages 10-19 were 4.5 suicides per 100,000 persons in 2010.

For more information, please visit:

<http://www.cdc.gov/features/childrensmentalhealth/> . [Thanks to LAAW International for providing this information.]

Don't Miss . . .

Make sure you read the Americans for Effective Law Enforcement (AELE) legal article, "Public Protection: Part Two—The Mentally Ill or Deranged". This article contains several legal cases and many good recommendations. Topics include, but are not limited to:

- Acute Psychotic Episodes and Delirium,
- Other Mental Health Factors,
- Recommendations, and
- Resources

The "Resources" section of this article is worth keeping. Don't forget to download and read Part I, too. You can obtain the article at <http://www.aele.org/law/2013all06/2013-06MLJ101.pdf> --->



Get Well, Wayne Schmidt

AELE Executive Director, Wayne Schmidt, L.L.M., recently had knee replacement surgery. The IPICD staff, AELE instructors, and AELE graduates wish him a speedy recovery. Check out upcoming AELE programs at www.aele.org.

Lesson Plan Study Update

Thanks to the many people who sent lesson plans for the IPICD lesson plan study. "We needed at least 50 lesson plans so the findings can be generalized," said Project Manager, Dr. John G. Peters, Jr. The primary focus of the study is to determine if law enforcement lesson plans include competency-based criteria for evaluating trainees. Agencies and/or officers who participate in the lesson plan study will receive a complimentary copy of the study's findings. If you want to have your agency included, please email a lesson plan that was or is being used to train officers (nothing older than 2 years) to: docs4peters@gmail.com

Upcoming IPICD Programs

Here is a partial list of upcoming IPICD programs that are coming to an area near you:

Use-of-Force by the Numbers Train-the-Trainer

- Maryland: June 19-20
- Indiana: July 18-19
- Texas: October 3-4

Excited Delirium and ACE Instructor

- Virginia: July 22-23
- Washington: August 12-13
- Iowa: August 20-21
- Tennessee: September 11-12
- Nevada: October 14-15
- Utah: November 6-7

ECD Forensic Analyst™

- Virginia: July 24-25

Arrest-Related Death Investigative Specialist™

- Washington: August 14-16
- Illinois: October 23-25

Developing Defendable Psychomotor Learning Domain Assessments

- Nevada: October 16

Congratulations to Dr. Peters

IPICD president, Dr. John G. Peters, Jr., Ph.D. graduated from the California State University, San Bernardino—Palm Desert Campus in June with a post-doctoral Master of Arts degree in Career and Technical Education. Dr. Peters had earned a California designated teaching credential from CSUSB in June 2012. - A. David Berman

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