As part of the Bureau of Justice Assistance-funded initiative *Using Analytics to Improve Officer Safety*, CNA's Center for Justice Research and Innovation produced this bulletin to serve as an accessible resource to support law enforcement agencies in collecting detailed and informative officer injury data. Visit CNA's Officer Safety and Wellness page to learn more about our analytics work.

Officer safety is of critical importance in an era of increased risk for law enforcement officers. According to the Federal Bureau of Investigation's (FBI's) Law Enforcement Officers Killed and Assaulted (LEOKA) Program, between 2010 and 2018, an average of 51 officers died in a felonious killing per year. LEOKA defines a *felonious killing* as an "incident type in which the willful and intentional actions of an offender result in the fatal injury of an officer who is performing his or her official duties." Regardless of how officer line-of-duty deaths, assaults, or injuries occur, the consequences are tragic and complex, affecting officers' work and home life. Just as de-escalation, defusing, and crisis intervention tactics are paramount today, so is officer safety. This bulletin provides information related to officer injury data collection. Specifically, it provides suggested practices regarding what variables to collect, when to collect data, and how to collect data to better understand and utilize officer injury data to promote officer safety.

WHY OFFICER INJURY DATA SHOULD BE COLLECTED -

Despite routine data collection regarding law enforcement calls for service, many police agencies across the country lack granular level officer injury data related to calls for service. Robust collection of officer injury-related data will expand the analytic capabilities of departments, increase officer preparedness for future calls, and promote officer safety.

Collecting officer injury data will enable departments to promote and enhance officer safety by:

- Enabling forecasts of the risk associated with call for service types;
- Informing the development of additional trainings;
- Helping to evaluate risk mitigation strategies; and
- Informing revisions to policies, procedures, and practices.

COLLECTING OFFICER INJURY DATA — WHAT, WHEN, AND HOW

This bulletin does not provide an exhaustive list of all practices related to officer injury data collection. Rather, it summarizes several recommendations and emerging practices that agencies can use to foster more robust data collection efforts to promote safety at the local level. Departments should collect additional data they feel might be relevant for analyzing and predicting officer injuries and adopt timeframes and methods that best fit officer needs and department capabilities. Note that more comprehensive data will likely increase the time officers spend on data collection but may successfully decrease negative officer safety outcomes.

WHAT

Recording the circumstances surrounding officer injuries is critical for understanding important risk factors and identifying the measures that agencies and officers can take to ensure the health and well-being of law enforcement officers. To increase accurate and consistent injury data collection, it is important that agencies define (both in policy and on their data collection platforms) what is considered an injury. Outlined below are recommended variables for departments to capture in their data collection.

WHAT VARIABLES SHOULD YOU COLLECT

DISPATCH CHARACTERISTICS -

- > Was this response initiated by a community member or law enforcement?
- > What activity prompted the community member to call 911 or the officer to respond?
- > Did the community member/officer believe that the suspect/individual had a weapon? If so, what kind?
- > Did the community member/officer believe that the suspect/individual was hostile? If so, in what manner?
- > Length of time from call receipt to dispatch to officer(s).
- > Length of time from officer(s) receipt to arrival on scene.
- > Length of time from officer(s) arrival to call closure.
- > Length of time from receipt of call to the time of officer injury.

OFFICER CHARACTERISTICS

- > Had the officer(s) previously been injured by a suspect? If so, list incident(s).
- > The types of calls the officer(s) responded to prior to this call (up to three).
- > The number of hours the officer(s) was on duty at the time of the call.
- > The officer's age, race/ethnicity, and gender.
- > The officer's body weight, sleep habits, and fitness program participation.
- > The officer's rank and years on the force.
- > Any trainings in situational control and de-escalation tactics.

SUSPECT/INDIVIDUAL CHARACTERISTICS

- > The suspect(s)/individual(s) age, race, and gender.
- > Suspect/individual experiencing a mental health crisis and/or intoxication.

INCIDENT TIME AND LOCATION -

- > The precise incident time.
- > The weather and lighting conditions during the response.
- > The precise location information including latitude, longitude, and address.
- > The incident's general location including patrol route and district.
- > The type of location (residence, business, vacant lot) and environment (inside or outside).

RESPONSE CHARACTERISITCS —

- > How many officers were at the scene?
- > How many vehicles were dispatched to the call?
- > Was the officer(s) wearing body armor or other protective equipment? If so, list.
- > The officer's uniform type. e.g., Uniform (Duty/Dress, Bicycle, K-9/CSI) or Plain Clothes (Business, Undercover, or Casual attire).
- > Was any protective or defensive equipment delivered to the scene? If so, list.
- > Was the officer(s) wearing a body worn camera? If so, was it activated?

OFFICER TACTICS

- > Did the officer(s) employ any situational control tactics? If so, list.
- > Did the officer(s) deploy any defense tactics? If so, list.
- > Did the officer(s) employ any de-escalation tactics? If so, list.
- > Did the officer(s) identify the need for any alternative methods for communication (e.g., interpreter, American sign language interpreter, augmentative and assistive communication (AAC) devices, picture exchange system). If so, list.

SUSPECT/INDIVIDUAL ACTIONS -

- > Did the suspect(s)/individual(s) display verbal or physical hostility towards the officer? If so, what kind?
- > Did the suspect(s)/individual(s) possess a weapon? If so, what kind?
- > Did the suspect(s)/individual(s) have prior involvement with the criminal justice system? If so, what kind?

INJURY SEVERITY -

- >What area of the body was injured?
- > Did the injury require medical treatment? If so, how serious?
- > Did the officer need to take medical leave? If so, for how long?

WHEN

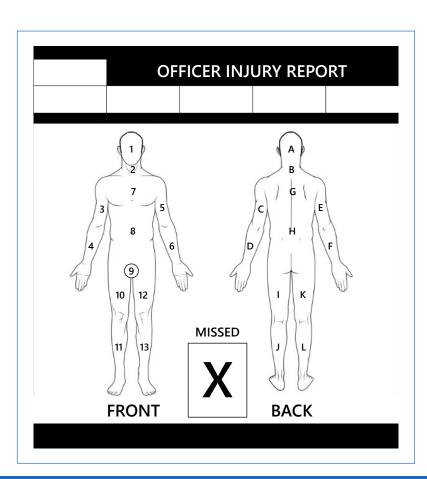
To increase officer safety, officer injury data must be collected in a timely manner. Recording data in a timely manner leads to more accurate reporting (by avoiding recall problems) and will enable officers to forecast the appropriate safety responses when responding to incidents with a high likelihood of danger or injury. However, officers rushing to report data may also result in inaccuracies; therefore, the timely collection of officer injury data will vary depending on the situation. Outlined below are recommended practices that will yield more accurate and complete officer injury data.

- Incidents with and without officer injury should be recorded.
 - Tracking low-risk and high-risk calls for service that do not result in injury are equally important.
- If the situation permits, officers should record officer injury data on the scene, after the call is closed, or after any medical attention has been rendered.
 - Otherwise, officers should record officer injury data at the end of their shifts in addition to worker's compensation reports.
 - Officers should also update injury data if initial injury characteristics end up differing from later injury descriptions.
- At the appropriate time designated by the agency, officers must enter injury data in an electronic database (e.g., records management system, electronic spreadsheet, etc.) to allow for comprehensive analysis.
 - Agencies should consider having dedicated personnel to enter injury data into their electronic database to increase the accuracy and consistency of the recorded data.

HOW

To accommodate the varying operations that are part of an officer's routine, a department should offer a variety of officer injury data collection methods. Although initial data collection should be flexible, all departments should designate a time frame (outlined in policy) for officer injury data to be entered into an electronic database. Outlined below are recommended data collection methods.

- Data collection methods as outlined by the Office of Community Oriented Policing Services (COPS Office).³
 - Mobile Data Computer
 - Handheld Mobile Device
 - Paper Form
- Data Dictionary
 - Create predefined categories for your variables of interest to increase the consistency and accuracy of the data.
 - Define the format of the data



GUIDANCE ON THE COLLECTION AND USE OF OFFICER INJURY DATA BULLETIN

- Data should be stored in relational databases that link incidents, injuries, officers, and suspects/individuals through unique ID fields. Storing data in this way is more flexible and allows multiple officers and suspects/individuals to be associated with the same incident.
 - Officer injury data should be regularly audited to ensure data integrity.
 - The reports should include body diagrams of officer injury location(s).

RELATIONAL DATABASE

OFFICER INJURY DATABASE

SUSPECT/INDIVIDUAL CHARACTERISTICS DATABASE

lı	ncident ID	Officer ID	Area Injured	Medical Treatment	Medical Leave					Suspect/ Individual Gender	Health	Under Influence of Substance
	1	77	Ankle	Yes	Yes		3	25	Asian	Male	Yes	No
	2	15	Wrist	No	No		1	31	Hispanic	Male	Yes	Yes
	3	21	Chest	Yes	No	Î	2	19	White	Female	No	Yes

Relational Database — Unique ID fields link incidents, injuries, officers, and suspects/individual

TO LEARN MORE -

Although officer safety and wellness are focal points of all law enforcement operations, officer injury data related to each call for service often fail to provide detailed information relating to dispatch characteristics, response characteristics, officer tactics, and injury severity. Comprehensive officer injury data will enable departments to forecast risks, inform trainings, evaluate risk mitigation strategies, and revise policies, procedures, and practices. Therefore, law enforcement must strive to implement robust officer injury data-collection protocols. Our hope is that departments will use the emerging practices outlined in this bulletin to develop customized data-collection strategies that may lead to a decrease in negative officer safety outcomes.

For more of CNA's work related to officer safety and wellness, please see the publications below:

- The Use of Predictive Analytics in Policing
- Predictive Analytics Bulletin
- · Law Enforcement Officer Safety: Risks, Recommendations and Examples from the Field
- Law Enforcement Officer Safety Risks and Recommendations Bulletin

ENDNOTES

- 1. For an example definition of officer injuries please see IACP's Reducing Officer Injuries Final Report.
- 2. For the purpose of this bulletin the term suspect implies potential criminal behavior while the term *individual* does not imply criminal behavior but rather an involved party that agencies would benefit from collecting data on.
- The source of this information and a comparison table for the data collection methods can be found here: https://policingequity. org/images/pdfsdoc/COPS-Guidebook_Final_Release_Version_2compressed.pdf#page=24





ABOUT CNA

CNA is a nonprofit research and analysis organization dedicated to the safety and security of the nation. It operates the Institute for Public Research — which serves civilian government agencies — and the Center for Naval Analyses, the Department of the Navy's federally funded research and development center (FFRDC). CNA develops actionable solutions to complex problems of national importance. With nearly 700 scientists, analysts and professional staff, CNA takes a real-world approach to gathering data, working side-by-side with operators and decision-makers around the world. CNA's research portfolio includes global security and strategic competition, homeland security, emergency management, criminal justice, public health, data management, systems analysis, naval operations and fleet and operational readiness.

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