



Arrest-Related Deaths, 2009 CJ-11A Reporting Instructions

PLEASE NOTE: The structure of the form has changed from previous editions – the form is no longer separated into two sections for the back page items (one for deaths prior to booking, the other for deaths in police lockups or booking centers). Items 1-18 should be completed for all deaths, with items 19-22 to be completed for deaths that occur at police lockups or booking centers.

Item 1. What was the name of the deceased?

While BJS policy prohibits releasing the names associated with any of these death records, the collection of this item was required by the *Death in Custody Reporting Act of 2000* (DICRA) statute. Names are used to sort and identify these records internally, and when discussing them with the State reporters involved.

Item 2. What was the time and date of death?

If an exact time of death is not available, please provide the nearest hour estimate.

Item 3. Where did the event causing the death occur?

Please note that this item does not ask for where the deceased was pronounced dead, which is often different from the scene of the fatal event. If the deceased was injured or developed a medical problem in the course of arrest, but died later at a medical facility, please list the location of the arrest scene (not the medical facility) here in item 3. If the fatal event occurred while in transit, please give the best approximate location (intersection, part of town, neighborhood).

Item 4. What law enforcement agency was involved?

Please list the name and ORI Number (ORiginating agency Identification) of the law enforcement agency involved. (If officers from multiple law enforcement agencies are directly involved in the fatal event, please list all relevant ORI numbers and names here in this item.) The ORI number is a 9-character alpha-numeric identification code used by law enforcement agencies when reporting crime statistics to the FBI's Uniform Crime Reporting program. If you do not have an ORI number for the relevant law enforcement agency, then leave it blank and enter only the agency name.

Item 5. What was the deceased's date of birth?

If the date of birth is not known, please give the age of the deceased (estimate, if necessary). If filling the form out manually, the age estimate can be written next to item 5. If filling the form

out electronically, please estimate the DOB year by subtracting the known age from the collection year (e.g., a 35 year-old in 2009 decedent should have the year of birth entered as 1974).

Item 6. What was the deceased's gender?

If the inmate's gender is not known, please leave blank.

Item 7. What was the deceased's race/ethnic origin?

Any Hispanic persons should be recorded as "3-Hispanic or Latino", regardless of whether their race is white, African-American, Asian, American Indian, or Native Hawaiian. If the deceased's ethnic origin had any combination of non-Hispanic categories, please record them as "7-Two or more races (not of Hispanic origin)". These categories comply with guidance set forth by the White House Office of Management and Budget (OMB).

Item 8. Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

BJS understands that a final determination of death causes and other circumstantial data can sometimes take months, due to delays in processing forensic evidence or producing autopsy reports. As a result, if you are currently waiting for such an evaluation to take place (or awaiting the results), indicate the status of these records here in item 8. If you are completing this form prior to receipt of these results, check either "2=Yes, results pending" if the autopsy results are pending. Mark "3=No, evaluation pending" if an autopsy is planned, but has yet to be conducted. At that point, you could leave blank any items that are dependent upon the final results. BJS will follow up on these records later in order to get complete information.

Item 9. What was the manner of death?

This item asks for a description of the circumstances of the death, rather than the strict medical cause of death. For instance, a medical cause of death of "gunshot wound" could be the result of many different circumstances. The "manner" of such a death could be any of the following:

- \$ *Homicide by law enforcement officer(s):* police return fire on a suspect, shooting and killing him
- \$ *Other homicide:* police respond to robbery call, find a suspect already shot by a store owner, he later dies
- \$ *Suicide:* the suspect is surrounded by police and takes his own life to avoid capture
- \$ *Accidental injury caused by others:* police officers attempt to manually restrain an armed suspect, and the gun accidentally discharges, killing the suspect

While there is a separate category "6= Accidental alcohol/drug intoxication", please record any

deaths attributed to intentional overdoses as "3=Suicide." In cases where an arrest subject swallowed packets of illegal drugs for the purposes of concealment (as opposed to recreational use), and these packets ruptured and killed the subject, please check "4=Accidental injury to self". Lastly, if the death is recorded as "6=Accidental alcohol/drug intoxication", please record the type of drug taken.

Item 10. What was the cause of death?

This item requests the medical cause of death, regardless of how it occurred. In the case of the example given above in item 9, the medical cause "gunshot wound-massive blood loss" would suffice, regardless of the circumstances surrounding the death.

Item 11. Had charges been filed against the deceased at the time of death?

Because this collection covers the deaths of persons "in the process of arrest", nearly all death records will involve persons against who charges were either filed or intended. However, law enforcement officers are sometimes tasked with transporting persons to medical or mental health facilities, because these persons present a danger to themselves or others. If these individuals die in the custody of an officer, or due to officer use of force, the death is reportable. In such cases, check "4=No—medical/mental health assistance call".

If the arrest process did not stem from any new charges, but only involved a technical violation of community supervision (e.g., the failure to meet with a probation officer, failure to complete a court-ordered drug abuse program), then please check "3=No, probation/parole revocation".

Item 12. What were the most serious offenses with which the deceased was being charged at the time of death?

If the deceased was formally booked prior to death, please select the three most serious charges entered at booking, and rank them according to the seriousness of the charges. If the deceased was not formally booked, these charges should reflect both the offenses which brought the arrestee into contact with the police, as well as those with which the deceased *would have been charged* had he/she lived. For example, law enforcement officers respond to the scene of an assault and chase a suspect on foot. Before the officers can detain and question the suspect, he fires a gun at the pursuing officer, who returns fire and kills the suspect. While the deceased had not been formally charged, the offenses listed in item 12 should include both the initial assault incident, as well as resisting arrest and the attempted murder of a law enforcement officer (due to the shots he fired at police during pursuit).

Item 13: Did the deceased die from a medical condition or from injuries sustained during the arrest process?

For the purposes of this item, how the fatal injuries were sustained (accidental self-injuries, inflicted by law enforcement officers, inflicted by others at the scene) is not important.

Regardless of how they occurred, if any injuries contributed to the death, then please check either "2=injuries only" or "3=both medical condition and injuries".

Item 14: If the deceased died from arrest-related injuries, how were these injuries sustained?

Please note that multiple responses can be checked on this item to allow for cases where the deceased may have been injured by multiple parties. If the deceased suffered no injuries, and died solely from medical problems, check "9=Not applicable." The responses to this item allow for responses covering events in the field, as well as post-booking.

Item 15: Were any of the following used during the arrest process...handcuff...leg shackles...pepper spray, mace...conducted energy device..other?

Any use of restraint devices, even if they were not a cause or contributing factor in the death, should be reported here. If multiple types of restraints were used on the deceased, please mark all that apply.

Item 16: At any time during the arrest/incident, did the deceased....appear intoxicated?...exhibit any mental health problems? ...verbally threaten the officer(s) involved? ...resist being handcuffed or arrested? ...attempt to escape/flee from custody?...attempt to grab, hit or fight with the officer(s) involved? ...use a weapon to threaten or assault the officer(s)?

This item measures the deceased's behavior during the course of the arrest process to better describe the full range of circumstances surrounding the fatal events. Please note that multiple responses can be provided to this item, and that some new responses have been added for 2009. Mental health problems displayed by the arrest subject can be recorded now, as can force or threats directed at other persons than the arresting officers. In "9=Other", please describe any other actions or behavior on the part of the deceased that played a role in the fatal events.

Item 17: During the arrest process, did the deceased do any of the following?...carry or possess a weapon?...use a weapon to threaten the officer(s)?...use a weapon to threaten other persons?...use a weapon to assault the officer(s)?...use a weapon to assault other persons?

This item measures the use of weapons by the arrest subject, against both arresting officers as well as other persons at the arrest scene (e.g., hostages, victims). These measures have been refined to better distinguish between those arrest subjects who only possessed the weapon(s) and those who actively used it in an attempt to threaten or assault others. Please note that any weapon (knife, firearm) or object used as a weapon (e.g. vehicle, chair, pipe, table) can be reported here. Please mark all categories that apply. For example, an individual who discharged a firearm at arresting officers and bystanders/victims at the scene would have all five categories checked.

Item 18: What type of weapon(s) caused the death?

Please complete this item regardless of the manner of death (see item 9); if weapons played no

role in causing the death, please check "7=None." If a weapon involved in causing the death does not appear in item 18, enter it in "6=Other weapon - specify". BJS has added the category "3=Firearm, unspecified" to allow for cases where the type of firearm is unknown.

Item 19: Where did the deceased die?

As opposed to item 3, this item asks where the deceased officially expired. While this may sometimes be the same response as in item 3, they will differ in many cases, such as a hospital pronouncing a suspect dead following a fatal event at a crime scene. If the response is anything other than "1=At booking center/police lockup", the form is complete. If the death occurred at a booking center or police lockup, please proceed with items 20-23.

Item 20: What was the time and date of the deceased's entry into the law enforcement facility where the death occurred?

If an exact time of entry is not available, please provide the nearest hour estimate.

Item 21: At the time of entry into the facility, did the deceased ...appear intoxicated? ...exhibit any mental health problems? ...exhibit any medical problems?

As with item 16, this item attempts to describe the arrestee's behavior and health status within the context of the fatal events. Please note that multiple responses can be provided to this item.

Item 22: If the death was an accident or homicide, who caused the death?

In cases of suicide or intoxication, and illness/natural causes, the party causing the death is already known, so please check "9=Not applicable" in such cases.

Item 23: If the death was an accident, homicide or suicide, what was the means of death?

This item is not related to the manner (item 9) or medical cause of death (item 10), but rather to the physical means by which the death was caused.

At this point, the form is complete for all deaths.

Notes:

This is an open text area, where you can include any other information that you feel is relevant regarding the circumstances of the death.