Personal management skills

Personal Safety
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Introduction

Personal management is an officer’s individual responsibility to understand and control themselves, often in stressful situations, in order for them to be able to control other subjects, with reasonable, necessary, proportionate and justifiable force, which also considers the likely injury to other persons. This subject is devoid of equipment such as handcuffs, batons, sprays and other items, and therefore looks at the operating potential and some of the physiological and psychological aspects of a lone officer either on or off duty. In essence, personal management can be best associated with another indefinable term, ‘human nature’.

It is appreciated that any clinically written text may appear far removed from the actual realities of subject confrontation. This is totally appreciated to a point in that there is only one set of laws that is precise, ‘Murphy’s Laws’. These are a set of semi-humorous laws which, alas, are often true.

- Anything that can possibly go wrong will go wrong
- Anything that does go wrong will do so at the worst possible time
- Anything you plan will cost more and take longer.

Anyone with the slightest familiarity with probability theory, or even a touch of fatalism about the outcome of the most carefully planned research, will appreciate the truth of these ‘laws’.
Operating ranges

It is the responsibility of those persons involved with training, and the officers themselves, to ensure that they are competent in operating in the following ranges. To exclude and potentially compromise the operational officer in any environment may be negligent. This is considered from the profiled subject behaviour and reasonable officer response, coupled with the impact factors. It is important to realise, as in all personal safety matters, that broad concepts and strategies are more likely to be successful than specific approaches that may not match the circumstance.

- Communication range
- Long range, deflection kicking/extended arm, slaps, punches
- Trapping range
- Close range, head (butting and biting), knees and elbows
- Vertical grappling range
- Groundwork and elevation (working below the subject on the floor or on a staircase) range
- Weapons/personal protective equipment/intermediary (items of opportunity) which may cover all the ranges.
Positioning

With regard to the relative position of the officers in relation to the subjects and the subjects in relation to the officers, it is vital to understand the following positioning diagram.

This plan view illustrates a subject or an officer, and shows what is described as the ‘conventional fighting arc’ or ‘inside position’.

This is the area in which some subjects and officers will have a degree of natural fighting skill. The officer who is likely to expose too many body targets should avoid this area. The remaining area is known as the ‘unconventional fighting arc’ or ‘outside position’, and it is this area that may provide the greatest protection for the officers. Approaches concerning physical restraint should, if possible, be initiated from this position, while the inside position is normally reserved for communication. However, exceptions may occur.

In essence, this diagram illustrates the potential 360-degree operating position and threat to both a subject and an officer.
IMPORTANT.
From a multiple officer tasking point of view, when a subject changes direction, individual officers will be required to take on a different role from their initial one (ie contact to control officer) (see Communication and Unarmed Skills Module).
Clock positioning system

If the individual positioning diagram is now included within a clock face, then it opens up the possibilities of positioning officers to tactical advantage, not only for individual officer safety but also for the introduction of multiple officers, because it adds clarity to instructions and plans, and subjects may not know the system.

The concept of such a system is simple.

♦ The contacting (communication) officer will stand at the 12 o’clock position

♦ The primary cover (physical intervention) officer will stand at the 4 o’clock position. (This is preferable, if possible, depending on the environment, due to 85-90% of the world’s population being right-handed. Clearly, the early sighting of a weapon from the subject would need to be communicated to others)

♦ The secondary cover (physical intervention) officer will stand at the 8 o’clock position if possible

♦ In certain circumstances an officer at the 6 o’clock position may be advantageous from a stealth aspect (out of sight).

The only basic rule with this system is that the subject always faces 12 o’clock; no matter if they move, the clock moves with them, and all positions are therefore taken from that.

Officers should if possible stay on the edge of a two metre (six foot) reactionary gap (the distance between the extremity of the officers’ reach to the extremity of the subjects’ reach including any weapon or item of equipment contained in their hands) to aid their reaction time. Closing this down allows them to enter the danger area, where reaction time is reduced, but at some stage this will obviously be necessary to make physical contact with the subject.

Officers should also bear in mind that they may also be victims of this principle, when surrounded by subjects.

Utilising the environment, such as placing their back against a wall or car, structure or corner, prevents approaches from the unconventional fighting arc and may assist the officer. This is because, under conditions of stress, an officer and subject may suffer from tunnel vision which is a condition in which peripheral vision (wide vision) is severely reduced or lacking altogether and the individual can see only that which is projected onto the central area of the eye. Based on this physiology it is easy to see why officers stood at the 6 o’clock position in relation to a subject can literally become invisible, and therefore penetrate the danger area far more quickly and safely.
Attentional control (concentration)

Performance under stress is a critical concept for police officers. Clearly, there are some officers who are okay performers under normal circumstances, but collapse when the ‘pressure’ is on. In professional policing terms, however, what matters most is how an officer will perform when decisions have to be made and action taken.

Dr Robert Nideffer developed the theory of attentional and interpersonal style in his work with elite athletes at Olympic and professional level. Basically, concentration varies along two dimensions.

- **Breadth**: At any given moment an officer’s attention is either **broad** (focused on multiple things simultaneously) or **narrow** (focused on one thing)
- **Direction**: An officer’s focus is also external (focused outside the officer’s head) or internal (focused inside the officer’s head).

Concentration is involved in driving a vehicle, and while making a decision under stressful circumstances, as data is collected, organised and delivered. In personal safety terms, whether an officer is introverted or extroverted has very little relevance to the ability to make good decisions or take appropriate action. At the moment of truth, relevant stimuli are all that matter.
**Broad external focus**

This is where an officer is simultaneously attending to many different things which are in the surroundings. This focus could best be described as ‘street sense’ style, or general awareness of what is going on.

This is the correct focus for crossing a busy main street, and it is the focus that is used by top athletes such as football players. It is the ability to sense and read where the other team members are and what the defence is doing that allows successful choices. It is also the focus of a high productivity salesperson as they assess whether or not a client is ready to buy. In fact, in most situations where an officer has to react to other people, the broad external awareness or ability to read the situation may determine success or failure.

**Broad internal focus**

Inside the officer’s head, when they are focusing on many things at once, is described as an attentive or analytical type of attention. Generally, broad internal focus is the ‘big picture’ focus used by leaders to develop strategies, and determine plans.

**Narrow internal focus**

This is a ‘here and now’ problem solving focus, where the relevant information is in the present. If an officer were to be asked to complete a complicated mathematical equation in their head, it would be calculated using narrow-internal. Equally, if an officer were asked to imagine lying on a beach, for example in Hawaii, then this focus would generate to that mental image.

**Narrow external focus**

This is the attentional style used as the officer is about to take action. It is the focus frequently used by some highly disciplined officers who become subject matter experts. There appears to be a single-mindedness to this style which dictates that everything is shut out and complete focus is apparent, such as when preparing to strike a subject on a final target area in a way which is likely to cause massive injury, even death. In an experiential way, this may be what some schooleachers of yesterday were referring to when they screamed ‘pay attention!’.
Colour code system

The colour code system known as ‘Cooper’s Colour Codes’ was developed many years ago when a pistol instructor developed it to give law enforcement officers an immediate and visual system of reflecting the changes of threat in their environment. It was realised that officers being skilled in particular areas were of little use if the officers were still trying to make decisions about what level the threat had reached, and what the correct response should be.

Cooper called the colours ‘Conditions’ and, rather like the ‘Bikini Alert’ system which informs officers about various states of security, they sought to ‘visually trigger’ and condition the officers to a particular state of mind. In this case, similar to a traffic light system.

- **Condition White.** This is where the officer is switched off and this is likely to happen naturally. ‘Transition’ periods, such as when the officer is sleeping, in the ‘safety’ of their own environment (ie police vehicle, their own home), walking down the street ‘looking but not seeing’, and failing to believe that a knife attack could happen on a sunny Sunday afternoon, are classic examples of situations in which an offcer may be unable to recover from a surprise incident. This may send them into a ‘denial response’. This is a defence mechanism that simply denies thoughts, feelings, wishes or needs that cause anxiety. In other words, the officer may experience that ‘I can’t believe that this is happening to me!’ feeling. In effect, using incompatible, unnecessary or a complete lack of techniques and tactics!

- **Condition Yellow.** This is the condition that officers should be in 100% of the time. It is not a state of paranoia, but merely seeks to get their radar switched on, and effectively gain good ‘situational 360 degree awareness’, such as subject watching. Police officers may do this naturally, but may need to enhance this by not only looking but also by being curious and seeing as well.

- **Condition Orange.** This is the condition that means an officer must evaluate and make a decision. Being switched on effectively buys the officer time to stay in control; however, an officer should not and probably would not be able to stay in this condition all the time.

- **Condition Red.** The condition is now very simple, theoretically. Engage the situation or disengage the situation. This is colloquially known as the fight or flight response.
Fright, flight, fight, posturing, submission

Fright

Fright may be substituted for the denial response, the initial response of officers who are in Condition White. The recovery time needed to adjust to normality will determine how the officers survive.

Flight

Flight or the effectiveness of evasion of a situation or the lack of commitment to it may very well depend on the situation in which the officers find themselves. Although an open environment such as the road or street area may be easy to manoeuvre around, the closed environment such as the subject’s home, a pub, club, room or vehicle may be alien to the officers, but familiar to the subject. Also, furniture within a room may inhibit the officers’ safe and injury free exit. When an officer’s safety and the control of a subject is at stake, time, speed and distance are mathematically crucial factors. All tactical calculations can be achieved with an equation. An easy way to remember time speed and distance is to put the letters into a triangle as illustrated below. To know one aspect simply cover it up.

S

T

D
**Fight**

This will depend on the operating range and might also depend not only on ethical issues, such as reasonable, necessary, justification, proportionality, injury and use of force, but it may also prey on the officer’s lack of confidence. Additionally, the officer may have personal moral issues to contend with such as value of life, and the belief that the risks involved outweigh the benefits. This may cause hesitation, ultimately affecting the officer’s survival. In this regard an officer may reflect on and decide what type of personality they are for operational effectiveness.

- Martyristic officer is an officer who tends to regard the rights and feelings of other subjects and officers often at their own expense. This officer might allow others to get the upper hand, simply because they are afraid of what they might do to them while using the skills.
- Nihilistic officer is an officer who has little regard for themselves or others. This officer might be able to inflict pain on others, but would certainly care about being hurt themselves.
- Aggressive officer is an officer who places high regard for themselves with little or no regard for others. This officer might be one to use the skills learnt for the purpose of hurting others while building a reputation for themselves.
- Assertive officer is an officer who regards both themselves and others. This officer tends to stand their ground and may occasionally give way, but usually strives to seek a mutually beneficial solution to the problem. An assertive officer is one who will not use the skills unless absolutely necessary.

Subject types may be simply defined in the following ways.

- Co-operative subject (yes type) would be a subject who an officer considers would comply by their demeanour and communication.
- Potentially unco-operative subject (maybe type) would be a subject who may resist upon being touched, is unstable due to alcohol, drugs, mental illness, euphoria, or a combination of these. Additionally, this type of subject may have criminal tendencies and relish the approach of an officer within their danger area because they have ‘nothing to lose’! This subject may be generally regarded as the most tactically dangerous to deal with, because officers may be uncertain of the actions and reactions of the subject.
- Totally unco-operative subject (no type) would be a subject who is already physically resisting. This subject may need to be controlled.

**Posturing**

Posturing is a common trait associated with conflict. From a police officer’s perspective, this may be any type of gesture or warning or danger sign (see Communication Module).

These actions may be designed to convince an officer, through both sight and sound, that the subject is a dangerous and frightening adversary. This may also be the case from the subject’s point of view when an officer is seen in an offensive or defensive stance using loud, repetitive, verbal commands, complemented with handcuffs, incapacitant spray, baton, shield, dog or firearm. The drawing of an item of equipment, which is dependent upon the officer’s holsting skills, is a use of force and may need justification. Some officers and subjects are really interested in ‘status, display, profit and damage limitation’.

When the posturer has failed to dissuade the other persons, officers or subjects, then the options become fight, flight or submission.

**Submission**

Submission is a surprisingly common response and it usually takes the form of cringing and exposing some vulnerable portion of the anatomy to the subject or officer once the person has surrendered. This may be one of many reasons why footballers ‘in a wall’ shy away from the penalty kicker shooting the ball towards them, while they protect themselves and the goal area, or when people rapidly lower themselves when a gunshot or explosion is heard. Submission is a period of inactivity.
Pre-incident indicators

Pre-incident indicators may be best described as factors other than individual warning and danger signs (see Communication Module) which affect the situation that the officers are dealing with. Certain subjects may be described as amateur psychologists who can quickly weigh up officers without conscious attention or reasoning. Officers, however, need to develop their intuition or gut feeling by objectively representing the facts without reference to feeling or opinions. The following list may assist with that process.

- Unnatural hindering of the officers’ movement
- Mutual third party subject movement towards the officers
- Sudden changes of status of subjects near to the officers. These may include predatory movements such as circling and two or more subjects moving into towards the officers from opposite directions (clock system)
- A verbal exchange with the officers initiated by a stranger
- Targeting (officers’ body areas) or escape glancing by the subjects
- Subjects approaching the officers at an angle (clock system)
- Subjects hiding their hands causing an unnatural walking posture (presence of property/weapons)
- Bumps, pushes, shoves or grabs towards the officers
- Vehicles stopping alongside, or slightly to the front of or behind the officers
- Any obviously intoxicated subjects
- A second pass by a vehicle or subjects (very important).
- Attempts at ‘baiting’ the officers
- Glances between apparent strangers as they approach, impede, call or otherwise interact with the officers
- Undue attention towards the officers or police vehicle presence.

The decisive cycle

Everything that we do in life is based on a simple yet unavoidable cycle. Whether it is buying a car, choosing a partner, or even something mundane such as making a small purchase, whatever the requirement, we always follow the same thought process. We assess the available information, decide what to do and then take some form of action or no action at all.

- Assess the situation, based on judgement, experience and training
- Decide whether there is any urgency, using the conflict management model (see Conflict Management Module), and the application of use of force in law and training
- Act with a conditioned reflex action, judgmental use of force levels, training and justification.

Although we perform this cycle many times each day, we seldom do it well. There may be many factors that impede or interrupt this cycle. The most serious of these interruptions are those associated with extreme stress and danger or the sheer speed of events as they occur.

Startle or reflex actions

The first distraction is the ‘startle reaction’. This response is 100% predictable in all animals. For instance, if a shotgun were fired unexpectedly, then all people nearby would exhibit the same initial reaction or involuntary reflex action.

Certain reflex actions are automatic and, in many cases, predictable in response to a specific stimulus, e.g. shivering in response to cold. Simple reflex actions are often controlled by the autonomic nervous system. They are a very important part of the reflex or involuntary action.

The officers and subjects may exhibit the following physical and mental actions:

- Shoulders hunch
- Head moves forward or ducks
- Neck cranes forwards
- Hands come up around the chest or head
- Muscles tighten (shoulders and stomach most noticeably)
These startle responses are unavoidable, and there are no magic cures that will negate the reflex action. However, realistic training may improve this by progressive and instinctive training, which may be conditioned (see Simulation and Judgmental Training Module).

A conditioned response to a given set of circumstances is induced by repetitive drills until it becomes a motor memory function, or conditioned reflex action (see Unarmed Skills Module). It is important to realise that a ‘conditioned reflex’ action to a given situation may well be the answer (although there must always be a thought process involved whatever the speed of the incident or occurrence). There is no such animal as an ‘automatic response’.

Only by recognising the early pre-incident indicators can we sometimes negate the startled response. Some officers have developed a sixth sense (see Use of Force Report Writing Module) and others may have been specially trained to react to a dangerous situation (instinctive conditioned reflex and motor memory training).

The chemical cocktail

The chemicals adrenaline, dopamine, endorphins and cortisol exist in the human body. Powerful emotions such as excitement, apprehension, fear and severe stress may trigger the chemical cocktail and officers and subjects may then be boosted with an increased adrenal dose. These chemicals act faster than alcohol and the effects may be instantaneous and overwhelming.

Adrenaline

This chemical increases heart rate, oxygen supply to the lungs, and blood supply to the muscles. It also promotes the supply of glucose into the blood for immediate energy, thereby preparing the mind and body for immediate action, helping it to cope with fear, stress or violent exercise.

Endorphins

These chemicals may be described as natural painkillers, which are produced by the body. Endorphins are released at times of stress such as trauma and also during strenuous exercise, eg physical confrontation.

Dopamine

This chemical is formed from an amino acid called tyrosine that in turn helps to manufacture brain neurotransmitters called norephrine and dopamine. These are natural ‘uppers’ to bring the brain to full attention, thereby helping the officer or subject to perform mental activities such as concentration while under stress. The chemical also speeds up nerve impulses in the part of the brain that controls muscle contractions.

Nor Adrenaline

This chemical is a hormone which causes vasoconstriction (where blood will retreat from the appendages such as the hands, fingers, feet and toes towards the major muscle groups to add strength) and will raise both systolic (ventricles emptying) and diastolic (ventricles filling) blood pressure, although not stimulating an officer’s or subject’s general metabolism. The main function of this chemical is to mediate the transmission of impulses in the sympathetic nervous system (which operates whenever the body’s activities increase, including emergency situations such as flight or fight).

NOTE:
Cocaine and other drugs may also act as a catalyst to release the same adrenaline and dopamine chemicals (see Positional Asphyxia, Excitable Delirium, and Sickle Cell Anaemia - Unarmed Skills)
Cortisol

This is a naturally occurring hormone, which is thought to reduce the effects of shock.

The advantages and disadvantages of the chemical cocktail

Like most things in life there are advantages and disadvantages to the effects the chemical cocktail may produce.

Advantages

- additional strength
- increased pain threshold
- increased awareness and detailed focus on the immediate threat.

Disadvantages

General muscle tightening

It is the almost immediate mixture of chemicals, and the sodium content in muscle groups, which cause them to tighten. This means that fine motor movements (see Unarmed Skills Module) are difficult. Some deft manipulation skills, such as unholstering and holstersing skills, which are additionally dependant upon equipment (see Handcuffing, Incapacitant and Baton Modules) may also be difficult, if not impossible, under stressful conditions.

The inability to operate an incapacitant spray in short, sharp bursts with the index finger or thumb may become apparent with inexperienced officers. This condition is known as ‘convulsive or gorilla gripping’ and may be associated with the freeze factor and loss of fine and complex motor functions (see Unarmed Skills Module).

It may also manifest itself when conventionally gripping a side-handled baton and attempting to transfer the energy of the baton to a body target during a rotating spinning type technique. With such gripping, the strong hand may act as a brake and prevent the baton from rotating, hence lack of energy transference. The phenomenon of increased hand shakes may also be apparent; therefore officers should be aware that holding a handcuffed subject with the handcuffs and inadvertently shaking them might be likely to initiate pain and possible injury to the subject.

Visual slow down

This may also be known as tachypsychia (speed of the mind), the distortion of perceived time. A classic example of this would be a ‘near miss road traffic accident’. The incident seems to take place in slow motion. Although the actual incident may be over in less than a second, it feels like forever. Anyone who has experienced this may feel a ‘hot flush’ afterwards and is immediately ‘woken up’ (adrenal rush).

Tunnel vision

This phenomenon is where the mind focuses on the threat to the exclusion of the officer’s and subject’s ordinary peripheral or all-round vision. It may appear as though the officer is looking at the threat through a tube or tunnel and it requires conscious effort (head turning and side glancing) in order to see more than a few degrees to the left, right, up or down. This could obviously be a problem if the officers were dealing with multiple subjects (see Unarmed Skills Module).

Auditory exclusion

This may be defined in a number of ways, and may be known as ‘tunnel hearing’. The first way may be described as a high pitched ringing in the ears at the moment of crisis. Other sounds such as gunshots, tyres screeching and people screaming seem to fade into the background. The high pitched sound is predominant. This is partly due to physical reasons, as the adrenaline and dopamine in the officer’s and subject’s system may dilate the blood vessels in and around the ears, making it physically difficult to hear. Another reason for the hearing loss is mental. Cognitive dissonance prevents the mind from prioritising sounds. As a result of this the officer may be able to hear a colleague a long distance away as opposed to a subject nearby.

Cognitive dissonance

Basically, the threatened officer may not remember large details of the situation or event, but they may remember small, minute details. This is apparent from the many eyewitness accounts of violent situations. The victim may recount exactly what happened in minute detail, but is unable to recount the gross events taking place at the peripheries of the incident. Witnesses, on the other hand, can remember few intricate details, but may remember the general or large occurrences of the event. Associated with this phenomenon is remembering things out of sequence, where trivial things seem to loom large.
in the mind immediately after the incident, and important things tend to become lost to short-term memory.

**Psychological splitting**

Also commonly known as *excorporation* or ‘having an out of body experience’. This may manifest itself either as being so well trained that the body moves so fast and efficiently that the conscious mind cannot keep up, or where the threatened officer or subject sees themselves outside of their body dealing with the situation. Conceptually, instead of the officer acting on the stage, the officer is sat in the audience watching themselves on the stage. This is fairly common with sportsmen and women in the stress of competition.

**Precognition**

This is commonly referred to as having a ‘sixth sense’, and results from the officer having seen something so many times that they can see it coming before the unthreatened observer or a witness does. A classic example of this occurs while driving a car. Although, when driving, you may only be able to see the back of another driver’s head and shoulders and no words are spoken, you can predict what is likely to happen before it does because of subtle movements of both driver and vehicle. Many people drive regularly, and they have seen it before. In the personal safety field, how an officer is conditioned (be it repetition or simulation training) may dictate how they react in the future to stimuli. The connection with the flight or fight reflex is that, in a deadly threat situation, the mind draws upon memory resources that are typically used. Clearly, the best memory that an officer can have is a successful real-life incident.

**Post incident fatigue**

One of the least considered, but still important, effects of the chemical cocktail is what is known as ‘post incident fatigue’. This may be anything that causes a massive adrenaline dump. A parachute jump, a bungee jump, and for police officers a high speed pursuit and violent confrontation may be likely to be equated to a full day’s physical work. In response to this there must be a ‘climb down’ period after the incident, in order to establish reality, such as simply having a cup of tea and a chat. (Diffusing techniques are discussed in the Post Traumatic Stress element of this module and Edged Weapons Skills Module.)

With regard to subjects, officers could expect to see or experience the following types of behaviour, as a result of the chemical cocktail.

**Fear behaviour**

Fear-based violence has been described as being caused by an officer’s and subject’s perception that they are being threatened by an officer, subject, group or situation. This reaction could therefore be based upon neurosis (a disease of the nerves), chemicals or actual stimuli. In this situation a person may panic and attempt to fight their way out of a situation.

**Criminal behaviour**

Criminal violence is basically coercion, where the officer is told either verbally or non-verbally that they have two choices, either to submit or to face the consequences. Whenever an officer is placed in a situation where refusing to surrender to another’s wishes may result in physical injury, then the subject may be inclined towards a criminal frame of mind and ultimate action.

**Tantrum behaviour**

This form is described as the most confusing of all types of violence and is the most difficult to handle. Based upon internal anger, which is outwardly directed, it can be best compared to an explosion looking for an excuse to happen.

**Frenzied behaviour**

It has been suggested that a subject in a frenzied state does not perceive limits or balances. The brakes have been taken off the situation and it is spinning out of control.

**Belt, body armour management and equipment retention**

Any item of equipment that could injure an officer if taken by a determined subject, or if the officer should fall or be pushed against an object, should be forwardly positioned on the belt or body armour between the officer’s arms. This to some degree protects the officer’s frontal 180 degrees. Less vital equipment that is unlikely to cause harm to the officer, such as medical, writing and ancillary items, may be carried elsewhere.
Glossary of Generic Terms

Strong foot side and hand
This refers equally to the officer’s and subject’s dominant foot, side and hand, which would largely be the right foot, side or hand, as 85-90% of the world’s population is right-handed.

Weak foot side and hand
This refers to the officer’s and subject’s non-dominant foot, side or hand, although the National Personal Safety Training Programme deals equally with both left and right-handed officers and subjects.

Stance (see Unarmed Skills Module)
Statically, the officer should have a balanced stance with the dominant leg to the rear, and the non-dominant leg to the front. The legs should be placed slightly apart, with the knees slightly bent. The hips may be slightly angled or ‘bladed’ away from the potential threat. However, be aware that any stance clinically taught in a training environment might very likely fail in an operational situation, when an officer is under conditions of stress, or when walking. Therefore, the officer must be able to operate without dependency upon a certain stance or position such as the hips squaring naturally to meet a potential threat.

The holstered carry
Even though the officer’s handcuffs, baton, incapacitant spray and other equipment may be holstered, the officer should not become complacent in the presence of any subjects, especially while in close proximity, such as a football crowd where an item might be taken.

COMPETENCES
- Officers’ elbows should be tucked into their side to prevent equipment being taken (see Ready Stance - Unarmed Skills Module).
- Officers should shield equipment with their weak hand while in close proximity to any potential threat.
- Officers should force the equipment into the holster, if able to do so.

IMPORTANT.
If an officer’s equipment holster becomes faulty or allows the officer’s equipment to fall out, thereby compromising the officer and any third party, it is the responsibility of both officer and trainer to report and resolve the matter.

Fully enclosed equipment holsters or a purposely tailored trouser or skirt pocket may enhance retention, but may interfere with the drawing and application process.
The low carry
(see Open and Closed Position in Straight and Side-Handled Baton Module).

COMPETENCES

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The mid carry

PERSONAL MANAGEMENT SKILLS

COMPETENCES

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© CENTREX (Central Police Training and Development Authority) June 2004 - REVISED MAY 2005
The covert carry

COMPETENCES

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MANAGEMENT SKILLS
The high carry

COMPETENCES

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♦

© CENTREX (Central Police Training and Development Authority) June 2004 - REVISED MAY 2005
How to recover the equipment if taken completely

COMPETENCES

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Breath control

When an officer or subject is in a frightened state, they tend to breathe quickly and with shallow breath. This physiologically makes it difficult to think clearly and methodically. The following two breathing exercises may, with practice, help officers to maintain a clear and pragmatic mind.

Full breathing.

This is the foundation of proper breathing. Start by taking a full and complete breath. Imagine a glass being filled with water to its brim. Then exhale this breath completely, imaging this glass being emptied of every drop of water. Place the palm of your hands on your abdomen. Feel your breath filling your lungs.

Cycle breathing.

This is an effective method of consciously controlling our breath rate.

- Inhale to the count of four
- Hold your breath to the count of two
- Exhale to the count of four
- Hold your breath to the count of two.

It is imperative to practice cycle breathing prior to an incident so that this breathing rate can be evoked without counting. This in turn may bring the officer to a state of calm, hence to operating effectiveness.

Post traumatic stress referral and the leadership, support and supervisory role (see Edged Weapons Module)

It is incumbent upon not only supervisory, but also individual officers to appreciate and recognise some of the symptoms associated with post traumatic stress disorder.

Post traumatic stress disorder diagnosis

The following observational and identifying signs may assist with officers supporting each other, irrespective of rank or position.

Post traumatic stress disorder is where an officer has experienced an event that is outside the range of usual human experience, and which would be markedly distressing to almost anyone.

The traumatic event is persistently re-experienced in at least one of the following ways:

- recurrent, intrusive and distressing recollections of the event
- recurrent distressing dreams of the event
- sudden acting or feeling as if the traumatic event were recurring
- intense psychological distress at exposure to events that symbolise or resemble an aspect of the traumatic event, including anniversaries.

There is persistent avoidance of stimuli associated with the trauma or numbing of general responsiveness, which may be indicated by at least three of the following:

- efforts to avoid thoughts or feelings associated with the trauma
- efforts to avoid activities or situations that arouse recollections of the trauma
- inability to recall an important aspect of the trauma
- markedly diminished interest in significant skills
- feeling of detachment or estrangement from others
- restricted range of effect
- sense of foreshortened future.

There are persistent symptoms of increased arousal, as indicated by at least two of the following:

- difficulty falling or staying asleep
- irritability or outbursts of anger
- difficulty concentrating
- hypervigilance
- exaggerated startle response
- physiological activity upon exposure to events that symbolise or resemble an aspect of the traumatic event
- duration of disturbance if at least one month.
After a traumatic event has occurred, it is important to take some positive steps to deal with the aftermath. This is called ‘diffusing’, which is an informal method of bringing officers back to reality. This should not be confused with ‘critical incident debriefing’, which has a more official status. (Both Diffusing and Critical Incident Amnesia and Debriefing will be more thoroughly discussed in the Edged Weapon Module.)

Below is an individual test developed by the British Medical Journal, October 1998 which deals with recognising and managing stress problems in their early stages.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
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<tbody>
<tr>
<td>1. Have you felt keyed up, on edge?</td>
<td></td>
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<tr>
<td>2. Have you been worrying a lot?</td>
<td></td>
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<td>3. Have you been irritable?</td>
<td></td>
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<td>4. Have you had difficulty in relaxing?</td>
<td></td>
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<tr>
<td>5. Have you been sleeping poorly?</td>
<td></td>
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<tr>
<td>6. Have you had headaches or neckaches?</td>
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<tr>
<td>7. Have you had any of the following:</td>
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<tr>
<td>trembling?</td>
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<tr>
<td>dizzy spells?</td>
<td></td>
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<tr>
<td>sweating?</td>
<td></td>
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<tr>
<td>frequency of urination?</td>
<td></td>
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<tr>
<td>8. Have you been worried about your health?</td>
<td></td>
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<tr>
<td>9. Have you had difficulty in falling asleep?</td>
<td></td>
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<tr>
<td>10. Have you had low energy?</td>
<td></td>
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<tr>
<td>11. Have you had loss of interests?</td>
<td></td>
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<tr>
<td>12. Have you lost confidence in yourself?</td>
<td></td>
</tr>
<tr>
<td>13. Have you felt hopeless?</td>
<td></td>
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<tr>
<td>14. Have you had difficulty in concentrating?</td>
<td></td>
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<tr>
<td>15. Have you lost weight?</td>
<td></td>
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<tr>
<td>16. Have you been waking up early?</td>
<td></td>
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<tr>
<td>17. Have you felt slowed up?</td>
<td></td>
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<tr>
<td>18. Have you tended to feel worse in the morning?</td>
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</tbody>
</table>

Scoring: Add up the number of ‘Yes’ answers.

0-4 Healthy  5-9 Beginning to struggle  9-18 Seriously struggling
The best item of equipment a police officer has is their mind. Develop it and reap the benefits of professionalism, operating effectiveness and confidence.

Further reading

- ACPO/NPT Personal Safety Programme 1996
- PPCT Defensive Tactics Instructor Manual. PPCT Management Systems Inc
- Applegate, Col. R., Recognised Authority CQC Techniques. Infantry Journal, March 1943
- Simunition Advanced Instructor Manual
- Physio-Psychological Effects of Violent Encounters. Internet publication by Patrick Casey. pcasey@interart.com
- Attentional Control in Canoeing. British Canoe Union Psychological Support. Internet publication. www.brunel.ac.uk
- Nideffer’s Model of Attentional Focus. Internet publication. www.coe.unt.edu/martin/KINE5170/5170E-lite/sld009.html
## Searching Skills

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The aim therefore of this module is:

- to understand the legislation which is relevant to subject searches
- to practically apply a safe search, which disadvantages the subject, yet enhances the safety of the officers and
- to link where appropriate to other modules contained within this manual.

Introduction

Searching for stolen property, drugs and weapons is a routine part of the duties of most police officers, and yet officers daily expose themselves to unnecessary risks while searching. This often arises out of confusion over police powers and, often due to poor practice is either by over-familiarity with the task, or, in some cases, with no approach to the task at all. A periodic check of police vehicles may well serve as a reminder that this is the case. It must be considered that the subject the officer is dealing with:

- knows what they are carrying (remember the 100% rule - everybody carries an edged weapon)
- can choose when to react to prevent the officer from being successful (remember action vs reaction)
- may have entered the danger area within the reactionary gap
- may have been motivated by the officer’s physical contact to react.

Legislation

There are numerous Acts of Parliament giving police officers powers to search subjects under a wide variety of circumstances. Under the Police and Criminal Evidence (PACE) Act 1984, the Codes of Practice relating to stop and search does not attempt to list them all, but merely limit themselves to the provision of an annexe (A) which lists the main stop and search powers, with a short guide to their provisions. This module is limited to understanding those powers which are relevant to everyday policing.

**Human Rights Act 1998** (see Use of Force Module)

**Section 1 Police and Criminal Evidence Act 1984**
(see Use of Force Module)

**Code of Practice A for the exercise by police officers of statutory powers of stop and search**

It is the responsibility of all trainers and officers to read and understand the contents of this Code of Practice. A knowledgeable officer is likely to be a confident officer, and this can demonstrate assertiveness towards, and ultimate control of, the subject. The officer should strive never to be compromised.
**Practical searching**

When searching subjects it is important to adopt an appreciation of the main elements involved in safely completing the task. The following constitute the critical elements. Additional elements may be added. However, from a personal safety priority, the officer will need to consider, in view of numbers, environment and circumstances, whether a search should be conducted at all!

**Communication**

In any process, clear and concise verbal commands are important. Use open questions (5WH - Who, What, Why, Where, When, How) where appropriate to elicit information, such as, “What weapons or drugs have you got on you, and where are they?”, as opposed to closed questions, such as, “Have you any weapons or drugs on you?” which provide yes/no answers. Also, communication can be used to misdirect the subject. Asking a question and engaging the subject in conversation may (although nothing is certain) restrict the subject’s ability to launch a physical attack on the officer. Once a subject has been physically searched, it is then always useful to verbally search the subject by asking, “What weapons or drugs have I missed? It would be better if you told me now.”

Also, be aware that any questions asked might constitute an interview, and may need to be recorded, in accordance with Code C of the PACE 1984 Codes of Practice.

**Positioning (approach to contact)**

Although it is always desirable to maintain a reactionary gap of six feet or more, for many reasons this may not always be possible. Also, searching a subject should be conducted by two or more officers, where possible. This searching method however assumes the worst case scenario in that the officer is on their own; where they would adopt both a communicative and physical searching role. Where more than one officer is present, each officer adopts a role, either talking to the subject and observing the second officer, or searching the subject.

---

**WARNING.**

There is no such thing as a safe search with an unco-operative subject and a lone officer, unless some form of control is used (see Unarmed Skills Module).

It is always desirable to search the subject from the outside position, which would place the officer outside the conventional fighting arc (or inside position), yet still having due consideration for that percentage of subjects who are able to operate from the unconventional fighting arc. 360-degree awareness of, and alertness to, the subject is just as important as 360-degree awareness of, and alertness to, the officer’s surroundings (see Personal Management Module).
If the subject refuses, the officer may consider that the subject is being non-compliant and ask again, or become alerted to a reason for the refusal and therefore pose the question, “Why?”.
Control

Controlling a subject prior to, during and after a search may be achieved by the following methods:

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NOTE:

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This causes the subject’s hips to be out of line with their feet and unbalance them; this may place the subject slightly on their toes. Additionally, this makes kicking the officer difficult without some prior warning to the officer, such as a shift of body position.
IMPORTANT.

Any search should be conducted with proper regard to the culture, sensitivity and vulnerability of the subject, and embarrassment should be minimised.

Search technique

Search pattern

ur quadrants. A quadrant
SEARCHING SKILLS

- Subject's undergarments.
- Hat may have been taped on, as this may pre
Searching below the belt line (lower quadrants)

In the event that the subject decides to resist:

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Searching of a co-operative subject

Different types of search

Kneeling search

© CENTREX (Central Police Training and Development Authority) June 2004 - REVISED MAY 2005
0% of the world’s population is right!
Seated search

Competences

- Competence 1
- Competence 2
- Competence 3
**Prone search**

The prone search may be construed as a derivative of the seated search, and may be more commonly associated with a handcuffed subject. The subject’s physical well-being is of paramount importance, especially concerning positional asphyxia, excited delirium, sickle cell anaemia and other physiological phenomena (see Medical Implications Module).

**COMPETENCES**

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Be aware at this point of the subject either rolling into the officer to attack or away from the officer to escape.

If the subject refuses to bend their knees and cooperate with the officer’s request, either:

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Having a subject sitting on the floor restricts them from being able to forcefully kick the officers. If the subject is sat in a chair or similar seating arrangement, the back and sides of the chair may provide protection for the officers. Regarding standing the subject up, see the Handcuffing Skills Module.

**Disabled subjects**

Occasionally, officers are placed into a situation involving a subject who has some form of disability. In an effort to establish a professional rapport, in this capacity it may be advisable to seek the opinion of a medical practitioner. However, in conjunction with this, the following fundamentals will be examined.

**Devices used by disabled subjects**

**Prosthetics**

A prosthetic device is an artificial replacement for a missing body part. Generally, three types of prosthetic devices are currently in use.

**Upper extremity prostheses**

Mechanical prostheses are moved by the use of cables and straps attached to the opposite side of the body. Myo-electric prostheses are moved by muscle contractions within the prosthetic socket. One form of arm or hand prosthesis is the hook or terminal device. The hook may be open or may be housed in a plastic anatomically correct mould of the hand. Lower arm amputees will be able to swing the limb outward and extend the arm.
Above elbow prostheses

Above elbow prosthetic devices are usually attached by means of a harnessing system. This system significantly limits the subject’s arm movements. The subject may be able to elevate the arm, but not have the range of movement to swing the arm.

Lower extremity prostheses

Lower extremity prosthetic devices fall into the categories of endoskeletal (soft with metal internal components) or exoskeletal (hard shell which is often hollow). Exoskeletal below knee devices usually have an insert for the residual limb and are held on the limb by straps or other binding devices. Suction devices may also be used. A medial wall insert prosthetic device is attached to the limb by an insert on the medial or outside wall of the knee.

Searching of prosthetic devices

The decision to remove a prosthetic device should be determined by the possibility and/or probability that the device might be used as a weapon or implement for escape. Also, the knowledge and expertise of the officer removing the device needs to be considered, as legal issues may arise if a limb is injured due to the removal of the prosthesis.

Relevant legislation, the circumstances and medical issues may determine whether the prosthesis should be removed or not, or whether a medical practitioner should be contacted.

The hook or ‘terminal’ device may be removed by unstrapping the harnessing system and detaching the prosthesis.

Lower extremity prostheses, depending on the type, are large enough to hold prohibited articles and weapons in their hollow cavities.

Exoskeletal below knee devices have an insert for the residual limb. To remove such devices, release the binding or break the suction seal between the prosthesis and the residual limb.

A medial wall prosthesis is attached to a limb by an insert on the wall of the knee. This metal insert can be sharpened to form a sharply pointed and/or edged weapon, or may house a weapon.

Wheelchairs

A wheelchair provides mobility to those subjects who, because of a disability, are unable to stand and walk on their own. Officers need to understand the possible limitations of a subject in a wheelchair for successfully conducting a search, and the need to reduce the risk of injury to a subject. The subject in a wheelchair may be paraplegic (paralysis of the lower part of the body, including both legs) or quadriplegic (paralysis of the four limbs and usually the trunk).

Low paraplegics may have abdominal muscle usage, and most quadriplegics lacking abdominal muscle usage are not able to balance themselves while being searched.
Generally, two officers are required to search a wheelchair subject, and should be positioned at the 4 and 8 o’clock positions. If the wheelchair has brakes then the officer should set them; otherwise an officer may place their baton through the back wheel and step on it. Alternatively, the officer’s handcuffs may be secured around the tyre rim and frame of the wheelchair in order to prevent excessive movement and possible escape of the subject.

Due to constant usage of the upper body muscles and arms to push the wheelchair, many paraplegics have tremendous strength and are able to manoeuvre themselves rapidly. If a strong subject grabs an article or fixed object, then officers may have difficulty in removing the subject from the object (see Unarmed Skills Module).

Searching of the subject is exactly the same as for an able-bodied subject, with the exception that upon completion of the search, the subject should be asked to do an ischial shift. The ischial shift (lift) is taught in all physiotherapy units to people using a wheelchair. This is a means of taking pressure off the ischials (bone on which one sits), in order to prevent an ulcer or bedsore from forming. Basically, the subject pushes themselves off the seat.

If the subject is unable to perform the ischial shift, then each officer will have to assist in lifting the person. This can be achieved by each officer sliding their nearest arm under the subject’s armpits (ensuring that the officers’ personal protective equipment is out of reach of the subject).

Both officers then, with a mutually acceptable signal, lift the subject enough so that one officer can search the subject’s buttock and groin area.
Moving and handling subjects

When moving or handling subjects (if possible):

**When lifting:**

- keep the back straight do not stoop
- bend your knees and hips
- lead with the head and keep it in line with the neck and back
- make sure that your grip is no wider than the width of your shoulders
- stand with your feet apart (one foot should be close to the subject to take the strain at the beginning of the lift)
- stand close to the subject being lifted
- hold the subject as close to the body as possible
- tuck your elbows well in
- when lifting with another officer, use rhythm and timing such as ‘1, 2, 3, lift’.

Once the subject has been searched, the seat cushion of the wheelchair can be removed and searched. During this procedure the subject should be lowered back down and seated on a soft surface such as a pillow, piece of foam or clothing, to prevent decubitis ulcers (bed sores).

**Colostomy bags**

A colostomy is a permanent or temporary opening in the abdominal wall through which solid wastes may pass when it is impossible for the faeces to pass through the colon and out of the anus due to a pathological condition. The attachment device is fitted to the stoma or mouth opening, then a waste bag with a wide opening is snapped onto the attachment to allow waste products to be collected from the body.

**Urinary devices**

Unlike a waist bag, a urinary collection bag has a stopcock. This collection bag may be worn on the upper or lower leg, or near the pubic/groin area. Internal tubing (penis in the male, meatus in the female) is indicative of an indwelling catheter or urinary device. Catheters are maintained in the bladder by inflating a balloon type device and/or by sutures.

If a pouch or tubing is felt when conducting a search, then the officer must visually inspect it and confirm that it is some type of colostomy or urinary collection device or catheter. Be aware that these devices are fragile and ensure that the subject is not needlessly harmed.
Vision, hearing and mobility impaired

In the case of searching subjects who have impaired vision, the officer will need to:

- inform the subject that they are a police officer
- inform them that they are going to search them and the reasons why
- adopt the same procedure as for a non-impaired subject.

In the case of searching subjects who have a hearing impairment, the officer will need to:

- depending on the environment in which the search is taking place, use the services of an interpreter
- in the absence of an interpreter, convey requests by written information.

In the case of searching subjects who can stand, but whose mobility is impaired by age, illness or injury, yet aided by a walking stick, crutches or other device, the officer will need to:

- ask the subject if they can walk or balance without the use of the aid
- be responsible for the subject’s balance if the aid is removed
- sit the subject down if possible to complete the search.

Additional information

In conclusion, the cause(s) of an ineffective search may be included in the following list which is not exhaustive.

- There is no such thing as a fast and thorough search.
- The officer should ask themselves, “Did I search this subject thoroughly?”.
- The officer should ask the person from whom they are receiving the subject, “Has this subject been searched thoroughly?”.
- The officer should not believe that another officer’s search has been done thoroughly. Do it yourself. This should not be taken as an insult to the other officer’s competence, but merely to safeguard all persons involved with the policing process.
The subject’s demeanour (disorderly, resistive, physically or verbally abusive, or covered with bodily fluids) will have a marked effect on how thoroughly the subject was searched.

The environment (dimly lit, dark area, rain, a rapidly forming hostile crowd, multiple and disorderly suspects) will be likely to increase the anxiety and tension of the officers, and increase the likelihood of a fast and vague search.

Ask the question, “Did anything interfere with my search of this subject?” If it did, search again thoroughly, in a different environment from the original one if possible. A well-lit garage forecourt, for example, may provide good light, shelter and CCTV evidence.

No officer relishes searching a subject with the presence of bodily fluids such as blood, urine or others that can give rise to transmittable diseases. Always use gloves.

Be aware of inappropriate comments regarding sexuality, especially when searching the subject’s groin area, which may divert the officer’s attention from that area.

Search children, young persons and the elderly with the same thoroughness as other subjects.

Familiarity with the subject (relative, friend) may compromise a thorough search.

Having previously arrested the subject without incident may compromise a thorough search.

Cross-gender searching may prohibit a thorough search because of uncertainty with such an irregular situation. Local force policy may clear ambiguity.

Subjects who are ‘too nice’.

Subjects with ‘professional’ occupations; VIPs and celebrities may resent being searched, and/or the officer perceives that the subject may resent being searched.

Subjects who are drunk.

Subjects who are obese.

Officers who are distracted by other officers.

At the end of a foot pursuit when the pursuing officer becomes the searching officer.

When the officer is unwell, eg hay fever, bad cold.

Subject having physical contact with a third party (accomplice, loved one) after having been searched and prior to transportation, when items may be slipped from one to another.

Further reading


*The Pickpocketing Secrets of Mark Raffles*.


*The Health and Safety Moving and Handling Course Trainers’ Course Notes*.

