Serious Incident Database Report

Community Corrections

1. Facility:
2. Date of Incident:
3. Offender Offense History:
4. Area of Incident:
5. Narrative:

6. Who was the first responder to the incident?
7. If PREA, was the incident referred to Internal Affairs?
8. If Use of Force was used, was it?
9. If planned, was Medical contacted prior to Use of Force?
10. Was the incident video recorded?
11. If electronic technology was used, was the offender medically cleared?
12. What type of non-deadly force equipment was used?

☐ Inflammatory
- ☐ OC
- ☐ CS (Private Prisons ONLY)

☐ Electronic Technology
- ☐ Electronic Shield
- ☐ Radio Active Custody Control
- ☐ Taser

☐ Physical Restraint Device
- ☐ Belly Chains
- ☐ Four or Five point restraints
- ☐ Handcuffs
- ☐ Leg Irons
- ☐ Restraint Chair
- ☐ Other

13. What level of force was used?

☐ Inflammatory Agent

☐ OC
Weight prior to use:

☐ CS (Private Prisons ONLY)
Weight prior to use:

☐ Deadly Force

☐ Hand Gun

☐ Rifle- Sniper

☐ Rifle- Tower

☐ Shot Gun

☐ Impact Weapons

☐ Baton

☐ Collapsible Baton

☐ Physical Contact

☐ Defensive Tactics- hold

☐ Offensive Tactics- Striking

14. Was more than one camera used to record incident?

15. Were there injuries during the Use of Force?

16. Where was the injury treated?

17. Injuries Sustained:

☐ Staff ☐ Offender ☐ Both

18. What was the mental health levels of the offenders involved?

19. Was the offender taking prescribed medications?

20. Was the incident racially motivated?

21. Race(s) involved?

☐ Black ☐ White

☐ Hispanic ☐ Native American

☐ Other