ILLINOIS UNIFORM CRIME REPORTING PROGRAM OFFICER NON-FATAL SHOOTING INCIDENT FORM

21 Drug Offense 22 Traffic Offense

24 No Offense

23 Wanted on Warrant

40 ATM Separate from Bank 41 Auto Dealership New/Used 42 Camp/Campground

45 Dock/Wharf/Freight/Modal terminal

44 Day Care

46 Farm Facility

Agency Name:										NCIC: IL								Please check box below and include reporting month and year.				
Month/Year of Occurrence:											Case #:							(MM/YY)				
DATE	E TIME (military)	REASON FOR CONTACT	LOCATION	OFFENSE	THREATEN AND/OR RESIST	OFFENDER WEAPON			OFFE	ENDER			OFFICER					YEARS	DUTY	OFFICER		
							#	AGE	SEX	RACE	ETHNICITY	#	AGE	SEX	RACE	ETHN	ICITY	OF SERVICE	STATUS	FIREARM		
REASON FOR CONTACT CODES LOCATION CODES (Contin							ontinued)		THREATEN AND/OR RESIST						RACE CODES							
A Call for service (suspicious/criminal activity) B Call for service (medical) C Self-initiated (suspicious/criminal activity) D Self-initiated (medical) E Self-initiated (other)					47 Gambling Facility/Casino 48 Industrial Site 49 Military Installation 50 Park/Playground 51 Rest Area 52 School-College/University					A B C D	Offender resisted officer(s) Offender threatened and resisted officer(s) Offender did not threaten or resist officer(s)					A B I P W	A Asian Black or African American American Indian or Alaska Native Native Hawaiian or Other Pacific Islander					
LOCATION CODES Air/Bus/Train Terminal Bank/Savings & Loan Barr/Night Club Church/Synagogue/Temple/Mosque Commercial/Office Building Construction Site			 53 School-Elementary/Secondary 54 Shelter-Mission/Homeless 55 Shopping Mall 57 Community Center 70 Squad Car 71 Police/Sheriff's Department 72 Court House 					12 13 14 15 20 30	OFFENDER WEAPON Handgun Rifle Shotgun Other Firearm Knife/Cutting Instrument Blunt Object						ETHNICITY CODES H Hispanic or Latino N Not Hispanic or Latino							
07 Convenience Store 08 Department/Discount Store 09 Drug Store/Doctor's Office/Hospital 10 Field/Woods					01 Homicide			55 60 65 99	Hands/Fist/Feet Explosives Fire/Incendiary Device None 0						YEARS OF SERVICE 01-XX Enter Years of Service (two digits)							
11 Government/Public Building 12 Grocery/Supermarket 13 Highway/Road/Alley/Street 14 Hotel/Motel/Place of Lodging					03 Robbery 04 Aggrava 05 Aggrava	Criminal Sexual Assault Robbery Aggravated Battery Aggravated Assault Kidnapping					AGE CODES						DUTY STATUS					
 15 Jail 16 Lake/Waterway 17 Liquor Store 18 Parking Lot/Garage 19 Rental Storage Facility 					07 Battery 08 Assault	Battery Assault Burglary				01-9 99							On Du Off Du					
20 Residence/Home 21 Restaurant 23 Service/Gas Station 24 Specialty Store (TV, fur, etc) 25 Other 37 Abandoned/Condemned Structure 38 Amusement Park 39 Arena/Stadium/Fairgrounds/Coliseum 40 ATM Separate from Bank 41 Auto Dealership New/Used					11 Motor Ve 12 Arson 13 Human 1 14 Human 1 15 Criminal 16 Criminal 17 Resist, C 18 Other W 19 Other Fe	Motor Vehicle Theft Arson Human Trafficking (Commercial Sex Acts) Human Trafficking (Involuntary Servitude) Criminal Trespass to Property Criminal Damage to Property Resist, Obstruct, Disarm an Officer Other Weapon Offense Other Felony Offense Other Misdemeanor Offense					Female SG					HG SG RI	OFFICER FIREARM Handgun Shotgun Rifle					

ISP 9-089 (02/17)

To Report NO INCIDENTS

OFFICER NON -FATAL SHOOTING REPORTING GUIDELINES

Chapter 50 of the Illinois Compiled Statutes, 709/5, mandates law enforcement agencies report to the Illinois Uniform Crime Reporting (I-UCR) Program, incidents when a law enforcement officer discharges his or her firearm causing a non-fatal injury to a person during the performance of his or her official duties or in the line of duty. Firearm is defined as hand gun, shot gun, or rifle. The injury incurred by the person shot does not need to be significant in order to report the incident. A slight grazing from the projectile is sufficient cause to report. Incidents when a by-stander is an unintended victim of the shooting are reported. Report multiple injured persons/offenders and multiple officers involved in a singular incident on one form.

If only one law enforcement agency is involved in the officer non-fatal shooting incident, the agency where the officer is employed is responsible for reporting the incident. Follow the guidelines below for other scenarios.

- Multi-agency: the agency of the officer whose actions resulted in the injury must report the incident.
- Multi-agency (unable to determine which officer's actions resulted in the injury): The primary jurisdictional agency must report the incident. Examples:

Local police department – Sheriff's Department: local police department reports Local police department – State agency: local police department reports Sheriff's Department - State agency: Sheriff's Department reports

- Off Duty Officer: The agency with whom the officer is employed must report the incident.
- MEG/Task Force Member: The agency with whom the officer is employed must report the incident.
- Federal Agency: Incident is NOT reported.

DO NOT REPORT

- Incidents when an officer discharges his firearm, but it does not result in an injury to the intended target are not reported.
- Incidents when an officer accidentally discharges his firearm resulting in injury to an individual are not reported.
- Incidents involved using what is considered to be a non-lethal weapon with rubber bullets or sand bags as projectiles are not reported.

If an agency has no officer non-fatal shooting incidents to submit for a reporting month, a "No Incident" record must be submitted.

The following are the data fields to be reported for each officer non-fatal shooting incident: case number; date and time of occurrence; reason for contact; location; offense; threat or resist; offender(s) weapon; age, sex, race, and ethnicity; officer(s) age, sex, race, ethnicity, number of years of service, duty status, and firearm. All data fields are required.

Reporting Month and Year

Report the month and year the incident occurred.

Case Number

• Agency-assigned case number.

Date

• Report the date the incident occurred.

Time

• Denote in four-digit military time.

Reason for Contact

- Call for service (suspicious/criminal activity)
- Call for service (medical)
- Self-initiated (suspicious/criminal activity)
- Self-initiated (medical)
- If the reason for contact was both suspicious/criminal activity **and** medical, report suspicious/criminal activity.

Location (refer to the data collection form for location codes)

- Report the <u>location where the firearm was discharged</u>, which may differ from the initial location of the incident.
- If a structure is used for multiple purposes, report the location the structure is being used as when the incident occurred. Example: Day care located in a private residence. If the incident occurs in the day care area when operational, report day care rather than residence/home.

Offense

- Only one offense per offender may be submitted.
- If multiple offenses were involved in the incident, submit the offense that appears first on the list on the data collection form.
- Submit the offense specific to each offender in a multi-offender incident.

Threaten and/or Resist

• Report if the offender threatened the officer(s), resisted arrest, both threatened officer(s) and resisted arrest, or neither threatened nor resisted the officer(s).

Offender Weapon

- Only one weapon per offender may be submitted.
- If the offender possessed more than one weapon, report the weapon that appears first on the data collection form.

Offender/Officer Number (#)

- Assign a numeric identifier to identify the offender and officer beginning with the number one (1) for the first offender or officer.
- Enter 2, 3, etc. to identify a second, third, or fourth offender or officer.

Offender/Officer Identifiers

Age

- 'Unknown' is NOT an option.
- 01-98 enter the numeric age of the victim.
- Enter 99 for years 99 and older.

Sex

- Report male or female; unknown is NOT an option.
- If the sex of the offender is in question, submit the sex denoted on the offender's driver's license or other available identification.

Race

- 'Unknown' is NOT an option.
- Hispanic is an ethnicity, not a race, and will not be accepted.

Ethnicity

- Report Hispanic or Latino, or not Hispanic or Latino.
- 'Unknown' is NOT an option.

Years of Service

- Total number of years as an officer.
- If an officer has served with multiple entities, report the combined years of service.
- Less than 6 months, round number of years down. 6 months or more, round number of years up.

Duty Status

• Report if the officer was on or off duty.

Age

• Report the type of firearm used by the officer that resulted in the injury.

The number of lines submitted for each officer non-fatal shooting incident will depend on the number of offenders/victims and officer involved in the incident. Similar to domestic offense and supplemental homicide reporting, one line must be submitted for each offender/victim and officer. An incident with one offender/victim and one officer requires one line of data. An incident with one offender/victim and two officers requires two lines of data. The first line contains data reference the offender/victim and officer number 1. The second line contains data reference the offender/victim and officer number 2.

ADJUSTMENTS

Adjustments are to be made if further investigation of the incident changes or adds to the data initially reported. Examples of adjustments include, but are not limited to, additional victims or officers, change in the type of offense related to the offender/victim, or new-found knowledge on the personal identifiers of the offender/victim.

DELETIONS

Delete a previously entered incident if the offender/victim succumbs to his/her injuries in subsequent months. If 'no incidents' was submitted in Arrest Related Death reporting, adjust the record to reflect an incident occurred and submit the Arrest Related Death data collection form per instructions in the reporting guidelines.