

# **Excessive Speed**

#### **BACKGROUND**

On March 31st two police officers were processing evidence at the police department. At 8:30 pm they were dispatched for a call for service, a motor vehicle-pedestrian accident. Based on the nature of the call, they assumed there would be serious injuries. According to the Chief, the dispatched call was a Code 3, lights and siren.

The video shows both officers running out the back door of the police department to the parking lot where their cars were parked. The first officer enters her cruiser and puts on her lights and siren before exiting the parking lot. It appears on video that she is traveling at a fast rate of speed – up to approximately 70 miles per hour. The second officer had previously received a suspension before the incident for engaging in a pursuit, which may have caused him to be more cautious. He entered his cruiser and began to proceed to the scene at a lower rate of speed. Approximately two miles from police station, the first officer entered a red-light controlled intersection at approximately 35 miles per hour and struck a vehicle driven by the claimant.

Seconds before the collision, the Sergeant called out on the radio that the pedestrian was only struck by the mirror of the car. These communications would inform the officers that the nature of the accident was less serious than previously believed. The first officer reached for her radio to ask whether the Sergeant wanted her to speak with the complainant or keep heading to the location where the accident occurred. It is at this moment that she enters the intersection at approximately 35 mph and the accident occurs. What is clear is that she slowed down well prior to entering the intersection.

The claimant in the vehicle was found to be unconscious and unresponsive due to head trauma caused by the accident. Emergency Medical Services (EMS) was called to the scene of the accident and transported the claimant to a local trauma center, where he was treated for bilateral hemorrhagic contusions. He was released from the hospital, and transported to a rehabilitation hospital for brain injuries, speech therapy, and memory deficits. In April, the claimant was released from the rehabilitation facility and continued to receive treatment at home. He continues to have residual effects of the accidents, such as blepharospasm (involuntary eyelid movement/twitching) that his neurologists attributes to the accident. He missed thirteen weeks of work.

#### LIABILITY INVESTIGATION

Part of the investigation focused on the sequencing of the light and the motor vehicle operations of both the claimant and the first officer. Based on the observing the light sequence, it appears that approximately three seconds had elapsed from the time the lights change from green to red. During the three second period, the claimant would have had the yellow light, and may have accelerated to beat the yellow light, which is a violation of Connecticut motor vehicle law. However, there is little question that the responding officer should have stopped or slowed down for the safe operation of the vehicle prior to entering the intersection. Their failure to do this may amount to a violation of CGS 14-283 and department policy.

## **OUTCOME**

The claimant's initial demand was \$750,000. However, a mediation settlement agreement was reached and subsequently approved for \$350,000.

### RECOMMENDED BEST PRACTICES

Based on the information presented in this scenario, CIRMA Risk Management recommends the following:

- Ongoing training and communication regarding C.G.S. 14-283 for all officers
- Ongoing training and communication of departmental policies and procedures
- Participation in CIRMA's Defensive Driving Training for Law Enforcement training course

Questions? Ask your Supervisor or contact your CIRMA Risk Management Consultant at (203) 946-3700.

