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Police Executive Research Forum
RETURN 1120 Connecticut Ave., NW
TO: Suite 930
Washington, DC 20036

FORM CJ-44L
2007 SURVEY OF STATE AND LOCAL LAW
ENFORCEMENT AGENCIES
Law Enforcement Management and Administrative Statistics
U.S. Department of Justice, Bureau of Justice Statistics

IMPORTANT: Please read the instructions below prior to completing this questionnaire.

■ There are three ways to submit this survey:

- 1) Complete the survey online at <http://survey.policeforum.org/LEMASCI44L.pdf>
If you choose to complete the survey via the Internet, you will be prompted to enter your USER NAME and PASSWORD, which are included on the cover letter accompanying this questionnaire. You will also have to enter your ID NUMBER on the first page of the survey, which is located at the top right of this page. Without entering your agency's USER NAME, PASSWORD, and ID NUMBER, you will not be able to complete the survey online. The USER NAME and PASSWORD provide a secure location to submit your survey.
- 2) Mail the survey to PERF using the enclosed postage-paid envelope.
- 3) Fax the survey to PERF at 202-466-7826.

PLEASE SUBMIT

■ Please retain a copy of the completed survey for your records.

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■ Please use either blue or black ink and print as neatly as possible using only CAPITAL letters.

THE SURVEY BY

■ Do not leave any items blank.

- If the answer to a question is not available or is unknown, write "DK" (don't know) in the space provided.
- If the question is not applicable, write "NA" in the space provided.
- If the answer to a question is none or zero, write "0" in the space provided.
- When exact numeric answers are not available, provide estimates.

COMPLETED

■ Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

■ If you have any questions or need assistance in completing the questionnaire, please contact Bruce Kubu of the Police Executive Research Forum (PERF) by phone at 202-454-8308 or by email at bkubu@policeforum.org. If you have general comments or suggestions for improving the survey, please contact Brian Reaves of the Bureau of Justice Statistics by phone at 202-616-3287 or by email at Brian.Reaves@usdoj.gov.

Burden Statement

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average three hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 USC 3732), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

INFORMATION SUPPLIED BY:

NAME	[REDACTED]																								
TITLE	L I E U T E N A N T , E X E C U T I V E O F F I C E R																								
AGENCY	A R I Z O N A D E P A R T M E N T O F P U B L I C S A F E T Y 2 0 4 4																								
TELEPHONE	(6 0 2) 2 2 3 - 2 4 2 2										EXT. [REDACTED]														
FAX NUMBER	(6 0 2) 2 2 3 - 2 9 1 7																								
EMAIL	[REDACTED]@A.Z.D.P.S.GOV																								

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SECTION I - DESCRIPTIVE INFORMATION

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

1. Enter the number of **AUTHORIZED** full-time paid agency positions and **ACTUAL** full-time and part-time paid agency employees as of September 30, 2007. Full-time employees are those regularly scheduled for 35 or more hours per week. If none, enter '0.'

	AUTHORIZED full-time paid positions	ACTUAL paid agency employees	
		Full-time	Part-time
a. Sworn personnel with general arrest powers	1398	1257	0
b. Officers/deputies with limited or no arrest powers (e.g., jail or court officers in some agencies)		0	0
c. Non-sworn employees		965	0
d. TOTAL (sum of lines 'a' through 'c')		2222	0

2. As of September 30, 2007, how many reserve/auxiliary officers did your agency have? If none, enter '0.'

Reserve/auxiliary officers	Sworn	Full-time	Part-time
	Non-sworn	0	30

3. As of September 30, 2007, how many **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2) did your agency have assigned to the following multi-agency task forces? Personnel may be counted more than once. If none, enter '0.'

Multi-agency task force	Assigned full-time	Assigned part-time
a. Gangs.....	60	0
b. Drugs.....	31	0
c. Anti-terrorism.....	12	0
d. Human trafficking.....	18	0

4. Of the total number of **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2), enter the number of each of the following: (Personnel may be counted more than once. If none, enter '0'.)

a. Uniformed officers with REGULARLY ASSIGNED DUTIES that include responding to citizen calls/requests for service	899
b. Community Policing Officers, Community Relations Officers, or other sworn personnel specifically designated to engage in community policing activities	0
c. School Resource Officers, School Liaison Officers, or other sworn personnel whose primary duties are related to school safety (exclude crossing guards)	0

5. Enter the total number of **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2) who performed the following duties as their **PRIMARY** job responsibility. Count each officer only once. If none, enter '0.'

	Number
a. Patrol duties	899
b. Investigative duties (e.g., detectives).....	302
c. Jail-related duties	0
d. Court security duties	0
e. Process serving duties	0

6. Enter your agency's total operating budget for the 12-month period that includes September 30, 2007. If data are not available, provide an estimate and mark (■) the box below. Include jails administered by your agency. Do NOT include building construction costs or major equipment purchases.

\$ 317,571,900

Please mark here if this figure is an estimation....■

7. Enter the total estimated value of money, goods, and property received by your agency from an asset forfeiture program during calendar year 2006. If no money, goods or property were received, enter '0.'

a. Drug forfeiture program.....	\$ 22,457,500
b. Gambling forfeiture program.....	0
c. Other forfeiture program(s).....	0

Please mark here if any of these figures are an estimation.....□

SECTION II - PERSONNEL

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

8a. Indicate your agency's minimum education requirement which new (non-lateral) officer recruits must have at hiring or within two years of hiring. Mark (■) only one response.

- ☐ Four-year college degree required
- ☐ Two-year college degree required
- ☐ Some college but no degree required
- ☒ High school diploma or equivalent required
- ☐ No formal education requirement - SKIP to Question 9

b. Does your agency allow any exemption(s) to this minimum education requirement policy?

- ☐ Yes ☒ No

9. Which of the following screening techniques are used by your agency in selecting new officer recruits?

Background/record checks

- Background investigation..... ☒ Yes ☐ No
- Credit history check..... ☒ Yes ☐ No
- Criminal history check..... ☒ Yes ☐ No
- Driving record check..... ☒ Yes ☐ No

Personal attributes

- Personal interview..... ☒ Yes ☐ No
- Personality inventory..... ☐ Yes ☒ No
- Polygraph exam..... ☒ Yes ☐ No
- Psychological evaluation..... ☒ Yes ☐ No
- Voice stress analyzer..... ☐ Yes ☒ No
- Written aptitude test..... ☒ Yes ☐ No

Community relations skills

- Analytical/problem-solving ability assessment..... ☐ Yes ☒ No
- Assessment of understanding of diverse cultural populations..... ☐ Yes ☒ No

Mediation/conflict management skills assessment..... ☐ Yes ☒ No

Second language test..... ☐ Yes ☒ No

Volunteer/community service history check..... ☐ Yes ☒ No

Physical attributes

- Drug test..... ☒ Yes ☐ No
- Medical exam..... ☒ Yes ☐ No
- Physical agility/fitness test..... ☒ Yes ☐ No

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10. How many total hours of ACADEMY training and FIELD training (e.g., with FTO) are required of your agency's new (non-lateral) officer recruits? Include law enforcement training only. Include both State/POST training requirements AND agency training requirements. If no training of that type is required, enter '0.'

	Academy Training	Field Training
Total hours of training....	800	400

11. On average, how many hours of IN-SERVICE training are required annually for your agency's NON-PROBATIONARY field/patrol officers? Include law enforcement training only. If no training of that type is required, enter '0.'

	Average annual hours per officer
Total hours of training.....	20

12. Enter the number of FULL-TIME SWORN personnel with general arrest powers (as entered in 1a, column 2) by RACE and GENDER for the pay period that included September 30, 2007. If none, enter '0.'

Race

- | | | | |
|--|---|----|------|
| a. White, not of Hispanic origin | 0 | DK | 994 |
| b. Black or African American, not of Hispanic origin | 0 | | 27 |
| c. Hispanic or Latino | 0 | | 185 |
| d. American Indian or Alaska Native | 0 | | 77 |
| e. Asian | 0 | | 46 |
| f. Native Hawaiian or other Pacific Islander | 0 | | 10 |
| g. Two or more races | 0 | | 40 |
| h. No information available | | 1 | 250 |
| i. Total (sum of lines 'a' through 'h') | | 1 | 1257 |

Gender

- | | | |
|-------------------------------------|----|-----|
| a. Male | DK | 787 |
| b. Female | DK | 22 |
| c. Total (sum of lines 'a' and 'b') | DK | 809 |

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13. Enter the number of FULL-TIME agency personnel who were certified as bilingual as of September 30, 2007. If none, enter '0.'

a. Sworn personnel..... 70

b. Non-sworn personnel..... 20

14. During the 12-month period ending September 30, 2007, did your agency use any of the following for language interpretation services?

Sworn personnel..... ☒ Yes ☐ No

Non-sworn personnel..... ☒ Yes ☐ No

Volunteers..... ☒ Yes ☐ No

Private contractors..... ☒ Yes ☐ No

Other (please specify)..... ☐ Yes ☒ No

15. Does your agency authorize or provide any of the following for sworn personnel?

a. Education incentive pay..... ☐ Yes ☒ No

b. Hazardous duty pay..... ☐ Yes ☒ No

c. Merit/performance pay..... ☒ Yes ☐ No

d. Shift differential pay..... ☒ Yes ☐ No

e. Special skills proficiency pay..... ☐ Yes ☒ No

f. Bilingual ability pay..... ☐ Yes ☒ No

g. Tuition reimbursement..... ☒ Yes ☐ No

h. Military service pay..... ☐ Yes ☒ No

i. Collective bargaining rights..... ☐ Yes ☒ No

j. Residential incentive pay..... ☐ Yes ☒ No

16. Enter the salary schedule for the following FULL-TIME SWORN positions as of September 30, 2007. If a position does not exist on a full-time basis in your agency, enter 'NA.'

	Base ANNUAL salary	
	Minimum	Maximum
a. Chief executive (chief, director, sheriff, etc.)	139,549	139,549
b. Sergeant or equivalent first-line supervisor	64,455	74,859
c. Entry-level officer or deputy (post-academy)	41,776	58,600

SECTION III - OPERATIONS

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

17. Does your agency participate in an operational 9-1-1 emergency telephone system (i.e., your agency's units can be dispatched as a result of a call to 9-1-1)? Mark (■) only one response.

☒ Yes - Enhanced 9-1-1 system

☐ Yes - Basic 9-1-1 system

☐ No - SKIP to Question 19

18. Does your agency's 9-1-1 system have the following capabilities for incoming calls from wireless/cellular phones?

Can display phone number of wireless caller... ☒ Yes ☐ No

Can display exact location of wireless caller... ☐ Yes ☒ No

Can display general location of wireless caller... ☒ Yes ☐ No

19. During the 12-month period ending September 30, 2007, did your agency use the following types of patrol on a REGULARLY SCHEDULED basis?

Automobile..... ☒ Yes ☐ No

Motorcycle..... ☒ Yes ☐ No

Foot..... ☐ Yes ☒ No

Aviation..... ☒ Yes ☐ No

Marine..... ☐ Yes ☒ No

Horse..... ☐ Yes ☒ No

Bicycle..... ☐ Yes ☒ No

Human transporter (e.g., Segway)..... ☐ Yes ☒ No

Other (please specify)..... ☐ Yes ☒ No

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SECTION IV - COMMUNITY POLICING

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

20. During the 12-month period ending September 30, 2007, what proportion of agency personnel received at least eight hours of community policing training (problem solving, SARA, community partnerships, etc.)? Mark (■) one choice per line. If your agency did not conduct training for a particular type of employee, please mark 'None.' If your agency did not have a particular type of employee for the specified time period, please mark 'NA.'

	All	Half or more	Less than half	None	NA
New officer recruits	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-service sworn personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■	

21. During the 12-month period ending September 30, 2007, which of the following did your agency do? Mark (■) all that apply.

- Maintained an agency mission statement that included a community policing component
- Actively encouraged patrol officers to engage in SARA-type problem-solving projects on their beats
If YES, please specify the number of patrol officers as of September 30, 2007:
- Conducted a citizen police academy.
- Maintained or created a formal, written community policing plan
- Gave patrol officers responsibility for specific geographic areas/beats
If YES, please specify the number of patrol officers as of September 30, 2007:
- Included collaborative problem-solving projects in the evaluation criteria of patrol officers
- Upgraded technology to support the analysis of community problems
- Partnered with citizen groups and included their feedback in the development of neighborhood or community policing strategies
- Conducted or sponsored a survey of citizens on crime, fear of crime, or satisfaction with police services
- ☐ Maintained a community policing unit with full-time personnel
- ☐ None of the above

22. During the 12-month period ending September 30, 2007, did your agency have a problem-solving partnership or written agreement with any of the following?

- Advocacy groups.....■ Yes ☐ No
- Business groups.....■ Yes ☐ No
- Faith-based organizations.....☐ Yes ■ No
- Local government agencies (non-law enforcement).....■ Yes ☐ No
- Other local law enforcement agencies.....■ Yes ☐ No
- Neighborhood associations.....■ Yes ☐ No
- Senior citizen groups.....☐ Yes ■ No
- School groups.....■ Yes ☐ No
- Youth service organizations.....☐ Yes ■ No

23. During the 12-month period ending September 30, 2007, did your agency use technology in any of the following ways to improve contact between citizens and police?

- Agency's email address was marketed to citizens.....■ Yes ☐ No
- Agency's website included methods for citizens to ask questions and/or provide feedback.....■ Yes ☐ No
- Agency's website provided citizens with direct access to crime maps.....■ Yes ☐ No
- Agency's website provided citizens with direct access to crime statistics.....■ Yes ☐ No
- Agency hosted a listserv or other electronic means to distribute news and updates.....■ Yes ☐ No
- Reverse 9-1-1 system used for emergency community notification.....☐ Yes ■ No
- System used for non-emergency mass community notification.....☐ Yes ■ No
- 3-1-1 system available to handle police non-emergency calls.....☐ Yes ■ No
- Electronic crime reporting was available.....☐ Yes ■ No
- Citizens received crime reports via email.....☐ Yes ■ No
- Other (please specify).....☐ Yes ■ No

SECTION V - EMERGENCY PREPAREDNESS

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

24. Does your agency have a written plan that specifies actions to be taken in the event of terrorist attacks? (Include emergency operation plans that would be applicable to such an attack.)

☒ Yes ☐ No

25. Do the public safety agencies operating in or nearby your jurisdiction (including your agency) use a shared radio network infrastructure that achieves interoperability?

☒ Yes ☐ No

26. In which of the following terrorism preparedness activities did your agency engage during the period ending September 30, 2007?

Partnership with culturally diverse communities..... ☐ Yes ☒ No

Public anti-fear campaign..... ☐ Yes ☒ No

Dissemination of information to increase citizen preparedness..... ☒ Yes ☐ No

Community meetings on homeland security/preparedness..... ☒ Yes ☐ No

Increased sworn officer presence at critical areas..... ☒ Yes ☐ No

Emergency preparedness exercises..... ☒ Yes ☐ No

Other (please specify)..... ☐ Yes ☒ No

27. Of the total number of actual FULL-TIME personnel, how many are intelligence personnel with primary duties related to terrorist activities? If none, enter '0.'

	Sworn	Non-sworn
Intelligence personnel with primary duties related to terrorist activities.....	57	55

SECTION VI - EQUIPMENT

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

- 28a. Which types of sidearms are authorized for use by your agency's field/patrol officers? Mark (■) all that apply.

On-duty weapons

Semiautomatic:	Primary sidearm	Backup sidearm
10mm.....	<input type="checkbox"/>	<input type="checkbox"/>
9mm.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
.45.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
.40.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.357.....	<input type="checkbox"/>	<input type="checkbox"/>
.380.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other caliber.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Any semiautomatic, as long as they qualify.....	<input type="checkbox"/>	<input type="checkbox"/>
Revolver.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

No backup sidearm is authorized..... ☐

- b. Which types of secondary firearms systems does your agency issue to patrol officers or authorize for their use? Mark (■) all that apply.

☒ Assault weapon (e.g., AR-15)

☒ Shotgun

☒ Carbine

☒ Rifle

☐ Other (please specify)

☐ Not applicable--no secondary firearms systems authorized

29. Are your agency's uniformed field/patrol officers REQUIRED to wear protective body armor while in the field? Mark (■) only one response.

☐ Yes, all the time

☒ Yes, in some circumstances (e.g., serving warrants)

☐ No

30. Enter the number of animals regularly maintained by your agency for use in activities related to law enforcement. If none, enter '0.'

Dogs 26 Horses 0

31. Which of the following types of less-than-lethal weapons or actions are authorized for use by your agency's field/patrol officers? Exclude weapons used only by tactical units.

a. Impact devices

- Traditional baton..... ☒ Yes ☐ No
 PR-24 baton..... ☒ Yes ☐ No
 Collapsible baton..... ☒ Yes ☐ No
 Soft projectile (e.g., bean-bag)..... ☒ Yes ☐ No
 Blackjack/slapjack..... ☐ Yes ☒ No
 Rubber bullet..... ☐ Yes ☒ No
 Other impact device (please specify)..... ☐ Yes ☒ No
 []

b. Chemical agents

- OC (pepper spray/foam)..... ☒ Yes ☐ No
 Other chemical agent (please specify)..... ☒ No
 []

c. Other weapons/actions

- Conducted energy device (e.g., stun gun, Taser, Stinger)..... ☒ Yes ☐ No
 Hold or neck restraint (e.g., carotid hold)..... ☒ Yes ☐ No
 Other weapon/action (please specify)..... ☐ Yes ☒ No
 []

32. As of September 30, 2007, did your agency use any of the following technologies on a regular basis? Mark (☒) all that apply.

Digital imaging

- Fingerprints (e.g., AFIS)..... ☒ Facial recognition..... ☒
 Mug shots..... ☒ Digital photography..... ☒
 Suspect composites..... ☒ None of the listed digital imaging technologies..... ☐

Night vision/electro-optic

- Infrared (thermal) imagers..... ☐ Night vision goggles/binoculars..... ☐
 Image intensifiers..... ☐ License plate readers..... ☒
 Laser range finders..... ☐ None of the listed night vision/electro-optic technologies..... ☐

Vehicle stopping/tracking

- Electrical/engine disruption..... ☐ Tire deflation devices..... ☐
 Stolen vehicle tracking (e.g., LoJack)..... ☒ None of the listed vehicle stopping/tracking technologies..... ☐

33. Enter the total number of motorized vehicles operated by your agency as of September 30, 2007. Include owned, rented, leased and confiscated vehicles that your agency uses. If none, enter '0.'

Marked cars..... [] [] [] [] 8 2 4
 Other marked vehicles (SUV, truck, van, etc.)..... [] [] [] [] 3 4 1
 Unmarked cars..... [] [] [] [] 1 6 5
 Other unmarked vehicles (SUV, truck, van, etc.)..... [] [] [] [] 5 5
 Fixed-wing aircraft..... [] [] [] [] 4
 Helicopters..... [] [] [] [] 5
 Boats..... [] [] [] [] 0
 Motorcycles..... [] [] [] [] 7 2

34a. Does your agency allow officers to take marked vehicles home?

☒ Yes ☐ No - SKIP to Question 35a

b. Does your agency allow officers to drive marked vehicles for personal use during off-duty hours?

☐ Yes ☒ No

c. Does your agency allow officers to drive marked vehicles outside of the jurisdiction during off-duty hours?

☐ Yes ☒ No

35a. During the 12-month period ending September 30, 2007, did your agency operate video cameras on a regular basis?

☒ Yes ☐ No - SKIP to Question 36

b. Enter the number of video cameras operated by your agency as of September 30, 2007. If none, enter '0.'

In patrol cars..... [] [] [] [] 2 3 4
 Fixed-site surveillance in public areas..... [] [] [] [] 0
 Mobile surveillance..... [] [] [] [] 0

36. During the 12-month period ending September 30, 2007, did your agency operate gunshot detection sensors on a regular basis?

☐ Yes If YES, how many?

☒ No [] [] [] [] NA

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

- | | |
|---|--|
| <input type="checkbox"/> Analysis of community problems | <input checked="" type="checkbox"/> In-field report writing |
| <input type="checkbox"/> Automated booking | <input checked="" type="checkbox"/> Intelligence gathering |
| <input type="checkbox"/> Crime analysis | <input checked="" type="checkbox"/> Inter-agency information sharing |
| <input type="checkbox"/> Crime mapping | <input checked="" type="checkbox"/> Internet access |
| <input checked="" type="checkbox"/> Crime investigations | <input checked="" type="checkbox"/> Personnel records |
| <input checked="" type="checkbox"/> Dispatch (CAD) | <input checked="" type="checkbox"/> Records management |
| <input checked="" type="checkbox"/> Fleet management | <input type="checkbox"/> Resource allocation |
| <input type="checkbox"/> Hotspot identification | <input type="checkbox"/> NONE of the listed functions |
| <input checked="" type="checkbox"/> In-field communications | |

- ☐ Alarms
 - ☒ Arrests
 - ☒ Biometric data for use with facial recognition system
 - ☒ Calls for service
 - ☒ Citizen complaints against officers/agency
 - ☒ Fingerprints
 - ☒ Gangs
 - ☒ Incident reports
 - ☐ Illegal attempts to purchase firearms
 - ☒ Intelligence related to potential terrorist activity
 - ☒ Pawn shop data
 - ☒ Protection orders
 - ☒ Stolen property
 - ☐ Summonses
 - ☒ Traffic citations
 - ☒ Traffic stops
 - ☒ Use of force incidents
 - ☒ Warrants
 - ☐ NONE of the listed files

- If YES, how many of the following types of computers/terminals are available for use by your agency's field/patrol officers WHILE IN THE FIELD? If none, enter '0.'

[illegible]

			5	7	9
--	--	--	---	---	---

--	--	--	--

- | | | |
|---|---|--|
| Motor vehicle records..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Driving records..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Criminal history records..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Warrants..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Protection orders..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Inter-agency information system..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Address history (e.g., repeat calls for service)..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Internet access..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| GIS/crime mapping..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other (please specify)..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

- ☒ Paper report
- ☐ Voice (cellphone, telephone, recording, radio)
- ☐ Computer/data device
- ☐ Other (please specify)
- ☐ Not applicable - agency does not handle such reports

- ☒ Agency is exclusive/shared owner of an AFIS system
- ☒ Agency has access to a remote AFIS system
- ☐ Agency has access to AFIS through another agency
- ☐ None of the above

- ☒ Yes ☐ No

SECTION VIII - SPECIAL PROBLEMS/TASKS

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

44. How does your agency address the following problems/tasks? Mark (■) the appropriate box for each problem/task listed below. Mark only one box per line.

Type of problem/task	(1) Agency HAS specialized unit with personnel assigned <u>FULL-TIME</u> to address this problem/task	Agency DOES NOT HAVE a specialized unit with full-time personnel		
		(2) Agency has designated personnel to address this problem/task	(3) Agency addresses this problem/task, but does not have designated personnel	(4) Agency does not formally address this problem/task
a. Auto theft	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Bias/hate crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■
c. Bomb/explosive disposal	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Child abuse/endangerment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■
e. Community crime prevention	<input type="checkbox"/>	<input type="checkbox"/>	■	<input type="checkbox"/>
f. Crime analysis	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Cybercrime	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Domestic violence	<input type="checkbox"/>	<input type="checkbox"/>	■	<input type="checkbox"/>
i. Drug education in schools	<input type="checkbox"/>	<input type="checkbox"/>	■	<input type="checkbox"/>
j. Financial crimes	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Drug enforcement	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Gangs	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Impaired drivers (DUI/DWI)	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Internal affairs	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Juvenile crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■
p. Methamphetamine labs	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Missing children	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Repeat offenders	<input type="checkbox"/>	<input type="checkbox"/>	■	<input type="checkbox"/>
s. Research and planning	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. School safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■
u. Terrorism/homeland security	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Victim assistance	■	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION IX - POLICIES AND PROCEDURES

Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.

45. Does your agency have written policy or procedural directives on the following?

Officer conduct

- a. Use of deadly force/firearm discharge.....☒ Yes ☐ No
- b. Use of less-than-lethal force.....☒ Yes ☐ No
- c. Code of conduct and appearance.....☒ Yes ☐ No
- d. Off-duty employment.....☒ Yes ☐ No
- e. Maximum work hours allowed.....☒ Yes ☐ No
- f. Off-duty conduct.....☒ Yes ☐ No
- g. Interacting with the media.....☒ Yes ☐ No
- h. Employee counseling assistance.....☒ Yes ☐ No

Dealing with special populations/situations

- i. Mentally ill persons.....☒ Yes ☐ No
- j. Homeless persons.....☐ Yes ☒ No
- k. Domestic disputes.....☐ Yes ☒ No
- l. Juveniles.....☒ Yes ☐ No
- m. Persons with limited English proficiency.....☐ Yes ☒ No

Procedural

- n. Collection of information on in-custody deaths.....☒ Yes ☐ No
- o. Racial profiling.....☒ Yes ☐ No
- p. Citizen complaints.....☒ Yes ☐ No
- q. Checking of immigration status by patrol officers.....☒ Yes ☐ No

46. Which of the following best describes your agency's written policy for pursuit driving? Mark (■) only one response.

- ☐ Prohibition (prohibits all pursuits)
- ☐ Discouragement (discourages all pursuits)
- ☐ Judgmental (leaves decisions to officer's discretion, such as type of offense, speed, etc.)
- ☒ Restrictive (restricts decisions of officers to specific criteria)
- ☐ Other (please specify)
- ☐ Agency does not have a written policy pertaining to pursuit driving

47. Enter the current dispositions for all formal citizen complaints received during 2006 regarding use of force. If none, enter '0.'

- a. Sustained (Sufficient evidence to justify disciplinary action against the officer(s)) , , 0
- b. Other disposition (e.g., unfounded, exonerated, not sustained, withdrawn) , , 7
- c. Pending (Final disposition of the allegation has not been made) , , 0
- d. TOTAL use of force complaints received (sum of lines 'a' through 'c') , , 7

48a. Is there a civilian complaint review board/agency in your jurisdiction that reviews use of force complaints against officers in your agency?

☐ Yes ☒ No - SKIP to Question 49

b. Does this civilian review board/agency have independent investigative authority with subpoena powers?

☐ Yes ☐ No

49. Does your agency have a written policy requiring that citizen complaints about use of force receive separate investigation outside the chain of command where the accused officer is assigned?

☒ Yes ☐ No

*****Please retain a copy of the completed survey for your records.*****