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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 <a href="http://survey.policeforum.org/LEMASCJ44L.pdf">http://survey.policeforum.org/LEMASCJ44L.pdf</a>
    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.

PLEASE SUBMIT

3) Fax the survey to PERF at 202-466-7826.

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

JAN 1 1 2008

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

Do not leave any items blank.

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

**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 TITLE COMMANDER AGENCY ACTAMONTE SPRINGS POLIE DEPT TELEPHONE (407) 571 - 8200 EXT. FAX NUMBER (407) 571 - 8193 EMAIL BACTAMONTE ORG

Of the total number of FULL-TIME SWORN personnel with general arrest powers (as entered in 1a, column 2),

be counted more than once. If none, enter '0.')

REGULARLY ASSIGNED DUTIES

School Resource Officers, School Liaison Officers, or other sworn personnel whose primary duties are related to school safety (exclude

Uniformed officers with

enter the number of each of the following: (Personnel may

### 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.'

	1-, -111-1 0.				
4.		AUTHORIZED full-time paid	ACT paid agency		
a.	Sworn	positions	Full-time	Part-time	
	personnel with general arrest powers	/05	102	0	
b.	Officers/deputies with limited or no arrest powers (e.g., jail or court officers in		0	0	
	some agencies)	-			
c.	Non-sworn employees		నం	0	
d.	TOTAL (sum of lines 'a' through 'c')		122	0	

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

		Full-time	Part-time
Reserve/auxiliary officers	Sworn	0	<u> </u>
	Non-sworn	0	0

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	6	. 0
b.	Drugs	5	0
c.	Anti-terrorism		٥
d.	Human trafficking	2	Ö

468197	131
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	that include responding to citizen calls/requests for service	, 48
Ъ.	Community Policing Officers, Community Relations Officers, or other sworn personnel specifically designated to engage in community policing activities	,

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.

IT I	ione, enter 'U.'	Nu	mbei	r		
a.	Patrol duties	$\prod$ ,		4	8	
b.	Investigative duties (e.g., detectives)	,		Į	5	
c.	Jail-related duties	$\prod$ ,			O	
d.	Court security duties	السلسا			O	
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.

\$ , 10,097,9	78
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Please mark here if this figure is an estimation....

 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	\$ 76	?
b.	Gambling forfeiture program	n\$ , , , , , , , , , , , , , , , , ,	<u>_</u>
c.	Other forfeiture program(s)	\$ , 4,32	1

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

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

### **SECTION II - PERSONNEL**

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

	and Bepression on, moor, as a respective.	i	is requi	red, enter '0.		
8a.	Indicate your agency's minimum education requireme which new (non-lateral) officer recruits must have at it or within two years of hiring. Mark ( ) only one response	niring		•	Academy Training	Field Training
	☐ Four-year college degree required		Total h	ours of training	, 7 7 9	1,256
	☐ Two-year college degree required		R	erage, how many l		
	☐ Some college but no degree required	;		uired annually fo ATIONARY field		
	High school diploma or equivalent required	i	enforce	ment training only.		g of that type is required,
	☐ No formal education requirement - SKIP to Question 9	)	enter '0	•	Avera	_
b.	Does your agency allow any exemption(s) to this minimeducation requirement policy?	num	Total h	ours of training	annual   per off	icer
	☐ Yes ■ No		1 Otal 1	ours of training	7	8
9.	Which of the following screening techniques are used your agency in selecting new officer recruits?	by	genera	l arrest powers (a	s entered in 1	VORN personnel with a, column 2) by RACE included September
	Background/record checks			07. If none, enter 'C		meauded September
	Background investigation Yes	□ No	Race			
	Credit history check	No No	a.	White, not of Hisp	oanic	, 86
	Criminal history check Yes	□ No	b.	origin Black or African	American,	
	Driving record check Yes	□ No		not of Hispanic or	_	,5
	Personal attributes		c.	Hispanic or Latin	o ,	
	Personal interview Yes	□ No	d.	American Indian ( Native	or Alaska	
	Personality inventory	□ No	e.	Asian		. 6
	Polygraph exam	<b>N</b> o	f.	Native Hawaiian	or other	<del></del>
	Psychological evaluation Yes	□ No		Pacific Islander		, 6
	Voice stress analyzer Yes	□ No	g.	Two or more race	s.	, 0
	Written aptitude test	□ No	h.	No information av	/ailable	
	Community relations skills		i.	Total (sum of line	s 'a'	
	Analytical/problem-solving ability assessment□ Yes Assessment of understanding of diverse cultural	■ No	ļ	through 'h')	i	,102
	populations	No No	Gende	r		
	Mediation/conflict management skills assessment	No No		Male		
	Second language test	<b>≅</b> No	b.	Female	a.	,,
	Volunteer/community service history check□ Yes	No	c.	Total (sum of line	es 'a' and 'b')	1.02
	Physical attributes					
	Drug test	□ No				
	Medical exam	□ No				
	Physical agility/fitness test	□ No				

	•	•	÷		
	Enter the number of FULL-TIM were certified as bilingual as of snone, enter '0.'		0	SECTION III - OPERATIONS	
	a. Sworn personnel      b. Non-sworn personnel	, 0	17	***Unless otherwise noted, please answer all question using September 30, 2007, as a reference.***  Does your agency participate in an operational 9-1-1	
14.	During the 12-month period end did your agency use any of the finterpretation services?	ling September 30, 2007	-	emergency telephone system (i.e., your agency's units be dispatched as a result of a call to 9-1-1)? Mark ( wone response.  Yes - Enhanced 9-1-1 system	s can
	Sworn personnel Ye	es 🗆 No		Yes - Basic 9-1-1 system	
	Non-sworn personnel	es □ No		□ No - SKIP to Question 19	
-	Volunteers Ye Private contractors Ye	es 🗆 No	18.	Does your agency's 9-1-1 system have the following capabilities for incoming calls from wireless/cellular phones?	
	Other (please specify) Ye	es <b>P</b> No		Can display phone number of wireless caller	□N
	·			Can display exact location of wireless caller Yes	N N
15	Does your agency authorize or	arovide any of the		Can display general location of wireless caller.	□N
16.	a. Education incentive pay b. Hazardous duty pay c. Merit/performance pay d. Shift differential pay e. Special skills proficiency pay f. Bilingual ability pay g. Tuition reimbursement h. Military service pay i. Collective bargaining rights j. Residential incentive pay Enter the salary schedule for the SWORN positions as of Septem does not exist on a full-time basis	Yes No He following FULL-TIM Aber 30, 2007. If a position in your agency, enter 'N. Base ANNUAL satary	E on A.'	During the 12-month period ending September 30, 2ddid your agency use the following types of patrol on REGULARLY SCHEDULED basis?  Automobile	a
	a. Chief executive (chief,	78,800 126,0			
	director, sheriff, etc.)				

(post-academy)

b. Sergeant or equivalent

first-line supervisor c. Entry-level officer or deputy 40,500

35,000

### 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					
In-service sworn personnel					

- 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
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22.	During the 12-month period ending September 30, did your agency have a problem-solving partnershi written agreement with any of the following?	
	Advocacy groups Yes	No No
٠	Business groups Yes	□ No
	Faith-based organizations Yes	No No
	Local government agencies (non-law enforcement)	□ 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, did your agency use technology in any of the follow ways to improve contact between citizens and police	ing
	Agency's email address was marketed to citizens	□ No
	Agency's website provided citizens with direct access to crime maps	■ No
	Agency's website provided citizens with direct access to crime statistics	No 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	□ No
	System used for non-emergency mass community notification	□ No
	3-1-1 system available to handle police non-emergency calls□ Yes	No No
	Electronic crime reporting was available	□ No
•	Citizens received crime reports via email	□ No
	Other (please specify)	₩ 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 □ No Public anti-fear campaign...... Yes No. Dissemination of information to increase citizen ☐ No preparedness...... Yes Community meetings on homeland □ No security/preparedness...... Yes Increased sworn officer presence at critical areas...... Yes  $\square$  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		
Intelligence personnel with primary duties related to terrorist activities		

### **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:	Prima sidear	•	
10mm			
9mm		梅	
.45		:	
.40			
.357			
.380			
Other caliber			
Any semiautomatic as long as they qualify			
Revolver	🗆		
		No backup sidearm is authorized	
	rol off	firearms systems does your icers or authorize for their use	?
Assault weapon (	e.g., A	R-15)	
Shotgun			
☐ Carbine		•	
Rifle	Ī		_
☐ Other (please spe	cify)		
☐ Not applicabler	o seco	ndary firearms systems authorize	d
29. Are your agency's un REQUIRED to wear field? Mark (■) only	prote	ctive body armor while in the	

Yes, all the time

 $\square$  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 D Horses	1
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31. Which of the following types of less-than-lethal weapon actions are authorized for use by your agency's field/p officers? Exclude weapons used only by tactical units.	your agency as of September 30, 2007. Include owned, rente leased and confiscated vehicles that your agency uses. If none,
a. Impact devices	enter '0.'
Traditional baton Yes	No Marked cars, 55
PR-24 baton Yes	No Other marked vehicles (SUV, truck, van, etc.)
Collapsible baton Yes	□ No Unmarked cars
Soft projectile (e.g., bean-bag)	No Other propertied rehister (SUIV tweet
Blackjack/slapjack Yes	No van, etc.)
Rubber bullet Yes	□ No Fixed-wing aircraft
Other impact device (please specify) Yes	No Helicopters
	Boats
b. Chemical agents  OC (pepper spray/foam)	□ No Motorcycles, 12
Other chemical agent (please specify)	No 34a. Does your agency allow officers to take marked vehicles home?
Other manager destina	Yes No - SKIP to Question 35a
c. Other weapons/actions  Conducted energy device (e.g., stun gun,	b. Does your agency allow officers to drive marked vehicles for personal use during off-duty hours?
Taser, Stinger)	☐ Yes ■ No
Hold or neck restraint (e.g., carotid hold)□ Yes  Other weapon/action (please specify)□ Yes	c. Does your agency allow officers to drive marked vehicles outside of the jurisdiction during off-duty hours?
<u> </u>	Yes No
32. As of September 30, 2007, did your agency use any of following technologies on a regular basis? Mark (■) apply.	
աբրոյ. Digital imaging	Yes 🔲 No - SKIP to Question 36
Fingerprints (e.g., AFIS)	b. Enter the number of video cameras operated by your agency as of September 30, 2007. If none, enter '0.'
Mug shots Digital photography	In patrol cars
Suspect composites None of the listed digital imaging technologies	
Night vision/electro-optic	
Infrared (thermal) Night vision	Mobile surveillance, 3
imagers goggles/binoculars	36. During the 12-month period ending September 30, 2007,
Image intensifiers License plate readers	did your agency operate gunshot detection sensors on a regular basis?
Laser range finders None of the listed night electro-optic technologie	vision/ Yes If YES, how many?
Vehicle stopping/tracking	■ No
Electrical/engine disruption ☐ Tire deflation devices	
Stolen vehicle tracking (e.g., LoJack)	B

# SECTION VII - COMPUTERS AND INFORMATION

	SYSTE	MS
37.	***Unless otherwise noted, p using September 30, 2007, as Does your agency use compu	a reference.***
	functions? Mark ( ) all that  Analysis of community problems  Automated booking  Crime analysis  Crime mapping  Crime investigations  Dispatch (CAD)  Fleet management	apply.  In-field report writing  Intelligence gathering  Inter-agency information sharing  Internet access  Personnel records  Records management  Resource allocation
38.		□ NONE of the listed functions  ts own computerized files with tion? Mark (■) all that apply.
39.	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 Do any of your agency's field	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
	computers/termina	of the following types of the following types of the available for use by your of officers WHILE IN THE enter '0.'  nounted , 50  terminals ocking , 0

40.	Do any of your agency's field/patrol officers have direct access to the following types of information using IN-FIELD vehicle-mounted or portable computers?
i	Motor vehicle records Yes □ No
	Driving records Yes No
	Criminal history records Yes □ No
	Warrants Yes No
	Protection orders Yes 🗀 No
	Inter-agency information system Yes
	Address history (e.g., repeat calls for service)■ Yes □ No
	Internet access
	GIS/crime mapping Yes 🔲 No
	Other (please specify)
	Mark (■) only one response.  □ Paper report  □ Voice (cellphone, telephone, recording, radio)  ■ Computer/data device  □ Other (please specify)  □ Not applicable - agency does not handle such reports
42.	Does your agency own or have access to an Automated Fingerprint Identification System (AFIS) that includes a file of digitized prints? Mark ( ) all that apply.
	☐ 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
42	
43	. Does your agency have an operational computer-based personnel performance monitoring/assessment system (e.g., Early Warning or Early Intervention System) for monitoring or responding to problematic officer behavior patterns?
	Yes No

stations:

### 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 (1111) the appropriate box for each problem/task listed below.

Mark only one box per line.

		(1)	Agency DOES NOT HAVE a specialized unit with full-time personne					
Type of problem/task		Agency HAS specialized unit with personnel assigned <u>FULL-TIME</u> to address this problem/task	(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	4						
b.	Bias/hate crime							
c.	Bomb/explosive disposal	. •						
d.	Child abuse/ endangerment							
e.	Community crime prevention							
f.	Crime analysis							
g.	Cybercrime							
h.	Domestic violence							
i.	Drug education in schools							
j.	Financial crimes	- <b></b>						
k.	Drug enforcement	:						
l.	Gangs							
m.	(DUI/DWI)	. ;						
n.	Internal affairs	<b></b>						
o.	Juvenile crime							
p.	Methamphetamine labs			•				
q.	Missing children							
r.	Repeat offenders							
s.	Research and planning							
t.	School safety							
u.	Terrorism/homeland security	•						
v.	Victim assistance							

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### 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?

	Ofi	ficer conduct	
	a.	Use of deadly force/firearm discharge	□ No
	b.	Use of less-than-lethal force Yes	□ No
	c.	Code of conduct and appearance Yes	□ No
	d.	Off-duty employment Yes	□ No
	е.	Maximum work hours allowed Yes	□ No
	f.	Off-duty conduct	□ No
	g.	Interacting with the media Yes	□ No
	h.	Employee counseling assistance Yes	□ No
	De	aling with special populations/situations	
	i.	Mentally ill persons Yes	□ No
	j.	Homeless persons□ Yes	' No
	k.	Domestic disputes	□ No
	1.	Juveniles	□ No
	m.	Persons with limited English proficiency	□ No
	Pre	ocedural	
	n.	Collection of information on in-custody deaths	□ No
	ο,	Racial profiling Yes	□ No
	p.	Citizen complaints Yes	□ No
	q.	Checking of immigration status by patrol officers□ Yes	No No
46.	wr	tich of the following best describes your agency's itten policy for pursuit driving? Mark ( ) only on ponse.	ne
		Prohibition (prohibits all pursuits)	
		Discouragement (discourages all pursuits)	
		Judgmental (leaves decisions to officer's discretion, s type of offense, speed, etc.)	uch as
		Restrictive (restricts decisions of officers to specific	criteria)
		Other (please specify)	
		Agency does not have a written policy pertaining to	oursuit

					1				- }	
47. Enter the current dispositions for all formal citizen complaints received during 2006 regarding use of for none, enter '0.'									rce.	I
a.		ined (Sufi disciplin r(s))								· (
b.		r dispositi rated, not								1
c.		ing (Final tion has n								0
d.		AL use of ed (sum c			'c')		,			2
	jurisdic officers  Yes  Does th	nis civiliar gative aut	reviews agency? SKIP to	use of fo Question board/a	rce ( 1 49 genc	comp y hav	olain ve in	ts.ag	gain	st
c ir	itizen co ivestiga	r agency omplaints tion outsi officer is	about u	se of force	ce re	ceive	sep	_ arat	e	
	Yes	□ No								

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

driving