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OMB No. 1121-0240: Approval Expires 11/30/2010

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/LEMASCJ44L.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. PLEASE SUBMIT
 - 2) Mail the survey to PERF using the enclosed postage-paid envelope.

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

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

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.
 - 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.

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 preently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

INFORMATION SUPPLIED BY:

NAME	
CAPTAIN	
AGENCY DEHALB COUNTY POLICE DEPARTMENT	
TELEPHONE (770)482-0325 EXT.	
FAX NUMBER (770)482-0361	
EMAIL OCO. DEKALBICO.GA	

ID	NU	MBER
~1		

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.')

REGULARLY ASSIGNED DUTIES

that include responding to citizen

Community Relations Officers, or

other sworn personnel specifically designated to engage in community

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

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

Community Policing Officers,

Uniformed officers with

calls/requests for service

policing activities

crossing guards)

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1 1	. و	u	h
\cdot	_	J	O

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 1		AUTHORIZED full-time paid	ACTUAL paid agency employees		
a.	Sworn	positions	Full-time	Part-time	
	personnel with general arrest powers	11.54	955	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		370	150	
d.	TOTAL (sum of lines 'a' through 'c')		1325	150	

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	Sworn	0	0
officers	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	1	0
b. Drugs	2	0
c. Anti-terrorism	l	0
d. Human trafficking	0	

If none, enter '0.'	t each officer only once.
n none, enter o.	Number
a. Patrol duties	
b. Investigative duties (e.g., detective	s),/60
c. Jail-related duties	,
d. Court security duties	,
e. Process serving duties	,
12-month period that includes Septe are not available, provide an estimate a below. Include jails administered by y include building construction costs or a purchases.	and mark (m) the box our agency. Do NOT najor equipment
Please mark here if this figure is	
Enter the total estimated value of more property received by your agency frogram during calendar year 2006, property were received, enter '0.'	om an asset forfeiture
a. Drug forfeiture program,	D, DK
b. Gambling forfeiture program.	
c. Other forfeiture program(s),	, P4

Please mark here if any of these figures are an

estimation.....

6.

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SECTION II - PERSONNEL

_	using September 30, 2007, as a reference.***
8a.	Indicate your agency's minimum education requirement

	or within two years of hiring. Mark (\blacksquare) 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?				
9.	Which of the following screening techniques are used your agency in selecting new officer recruits?	by			
	Background/record checks				
	Background investigationYes	□ No			
	Credit history check	□ No			
	Criminal history checkYes	□ No			
	Driving record check	□ No			
	Personal attributes				
	Personal interview Yes	□ No			
	Personality inventory Yes	No No			
	Polygraph exam	M No			
	Psychological evaluation	□ No			
	Voice stress analyzer	□ No			
	Written aptitude test	□ No			
	Community relations skills				
	Analytical/problem-solving ability assessment ☐ Yes Assessment of understanding of diverse cultural	No No			
	populations	No No			
	Mediation/conflict management skills assessment	₩ No			
	Second language test	M No			
	Volunteer/community service history check□ Yes	™ No			
	Physical attributes				
	Drug test	□ No			
	Medical examXYes	□ No			
	Physical agility/fitness test Yes	□ No			

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.'

		gency training requirements. red, enter '0.'	If no training of that type
	Total h	Acade Traini ours of training,	
11.	PROB. enforce enter '0	A ann	gency's NON- ficers? Include law
12.	Enter t genera and Gl	the number of FULL-TIMI l arrest powers (as entered ENDER for the pay period 17. If none, enter '0.'	in 1a, column 2) by RACE
	Race	,	
	a.	White, not of Hispanic origin	11/18
•	b.	Black or African American, not of Hispanic origin	1,491
	c.	Hispanic or Latino	. 22
	d.	American Indian or Alaska Native	
	e.	Asian	, 0
	f.	Native Hawaiian or other Pacific Islander	,
	g.	Two or more races	, 6
	h.	No information available	O O
	i.	Total (sum of lines 'a' through 'h')	<u>, 955</u>
	Gender	r	
	a.	Male	.630
	b.	Female	1,125
	c.	Total (sum of lines 'a' and 't) ,955

13. Enter the number of FULL-TI were certified as bilingual as on none, enter '0.'		SECTION III - OPERATIONS
a. Sworn personnel	\square , DK	***Unless otherwise noted, please answer all questions using September 30, 2007, as a reference ***
b. Non-sworn personnel 14. During the 12-month period endid your agency use any of the	nding September 30, 2007,	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.
interpretation services?		Yes - Enhanced 9-1-1 system
Sworn personnel	Yes □ No	☐ Yes - Basic 9-1-1 system
Non-sworn personnel	Yes 🗆 No	☐ No - SKIP to Question 19
Volunteers	,	18. Does your agency's 9-1-1 system have the following capabilities for incoming calls from wireless/cellular phones?
Other (please specify)	Yes No	Can display phone number of wireless caller Yes No
		Can display exact location of wireless caller Yes 📓 No
15. Does your agency authorize or following for sworn personnel		Can display general location of wireless caller Yes \(\Boxed{D}\) No
a. Education incentive pay		19. During the 12-month period ending September 30, 2007, did your agency use the following types of patrol on a REGULARLY SCHEDULED basis?
b. Hazardous duty pay	¶Yes □ No	Automobile
c. Merit/performance pay	Yes 🗆 No	Motorcycle Yes 🗆 No
d. Shift differential pay	□ Yes ■ No	Foot
e. Special skills proficiency pa	ıy,□ Yes 🕻 No	Aviation
f. Bilingual ability pay	□ Yes 🍎 No	Marine ☐ Yes 🗷 No
g. Tuition reimbursement	Yes 🌉 No	Horse Yes No
h. Military service pay	Yes 1 No	Bicycle Yes 🗆 No
 i. Collective bargaining rights 		Human transporter (e.g., Segway)
j. Residential incentive pay		Other (please specify) Yes No
16. Enter the salary schedule for SWORN positions as of Septe does not exist on a full-time bas	the following FULL-TIME mber 30, 2007. If a position	
	Base ANNUAL	
	salary Minimum Maximum	
a. Chief executive (chief, director, sheriff, etc.)	DK DK	
b. Sergeant or equivalent first-line supervisor	41,004 66,636	
c. Entry-level officer or deput (post-academy)	36,492 59,304	

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	more	Less than half	None	NA
New officer recruits	1 20	· 🗀			. 🗆
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

patrol officers as of September 30, 2007:

Actively encouraged patrol officers to engage in SARA-type problem-solving projects on their beats

If YES, please specify the number of

$\overline{}$	Character A.	_			1
	Conducted	×	curzen	nonce	исипени

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

\Box	None	of the	above

22.	During the 12-month period ending September 30, did your agency have a problem-solving partnershi written agreement with any of the following?	
	Advocaçy groups Yes	□ No
	Business groups Yes	□No
	Faith-based organizations	□ No
	Local government agencies (non-law enforcement)	□No
•	Other local law enforcement agencies Yes	□ No
	Neighborhood associations	□ No
	Senior citizen groups	□ No
	School groups	□ No
	Youth service organizations	□ 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 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 No
	3-1-1 system available to handle police non-emergency calls Yes	K No
	Electronic crime reporting was available□ Yes	No
	Citizens received crime reports via email Yes	No No
	Other (please specify)	M No

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SECTION V - EMERGENCY PREPAREDNESS

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

	<i>3</i>	
24.	Does your agency have a written plan that specifies action 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 activitie did your agency engage during the period ending September 30, 2007?	S
	Partnership with culturally diverse communities	No
	Public anti-fear campaign	No
	Dissemination of information to increase citizen	No
	Community meetings on homeland security/preparedness	No
	Increased sworn officer presence at critical areas	No
	Emergency preparedness exercises	No
	Other (please specify) Yes	No
27.	Of the total number of actual FULL-TIME personnel, ho many are intelligence personnel with primary duties relat to terrorist activities? If none, enter '0.'	w ed
	Sworn Non-sw	orn
	Intelligence personnel with primary duties related to terrorist activities	0

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	•	Backup sidearm
	10mm			
	9mm	顯		
	.45			
	.40			
	.357		. '	
	.380			
	Other caliber			
	Any semiautomatic as long as they qualify			
	Revolver	🗆		
	·	=	No backup sid authorized	
b.	Which types of second agency issue to pat Mark (■) all that ap Assault weapon (rol off oply.	icers or autho	
-	Shotgun			,
	☐ Carbine			
	☐ Rifle			-
	☐ Other (please spe	cify)	,	
	☐ Not applicable—r	o secc	ndary firearms	systems authorized
29.	Are your agency's un REQUIRED to wear field? Mark (■) only ☐ Yes, all the time	prote	ctive body arr	
	Yes, in some circum	mstanc	es (e.g., servin	g warrants)
	□ No ·			•
30,	Enter the number of agency for use in act none, enter '0.'	ivities	related to law	
	Dogs / A	Hore	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

	•	D 110111111 0 2 5 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.	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.'
	a. Impact devices	
	Traditional baton	Marked cars
	PR-24 baton Yes No	Other marked vehicles (SUV, truck, van, etc.)
	Collapsible baton Yes 🗆 No	Unmarked cars
	Soft projectile (e.g., bean-bag) Yes A No	
	Blackjack/slapjack□ Yes ■ No	Other unmarked vehicles (SUV, truck, van, etc.)
	Rubber bullet	Fixed-wing aircraft
	Other impact device (please specify) Yes W No	Helicopters
		Boats
	b. Chemical agents	
	OC (pepper spray/foam)	Motorcycles, 155
	Other chemical agent (please specify) Yes No	34a. Does your agency allow officers to take marked vehicles home?
		Yes No - SKIP to Question 35a
	c. Other weapons/actions	b. Does your agency allow officers to drive marked vehicles
	Conducted energy device (e.g., stun gun, Taser, Stinger)□ Yes № No	for personal use during off-duty hours?
	Hold or neck restraint (e.g., carotid hold)□ Yes 🛮 No	☐ Yes Wo
	Other weapon/action (please specify)	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,
32.	As of September 30, 2007, did your agency use any of the following technologies on a regular basis? Mark () all that	did your agency operate video cameras on a regular basis?
	apply.	■ Yes □ No - SKIP to Question 36
	Digital imaging Fingerprints (e.g., AFIS) Facial recognition □	
	<u> </u>	agency as of September 30, 2007. If none, enter '0.'
	Mug shots Digital photography	In patrol cars
	Suspect composites	
	imaging technologies	Fixed-site surveillance in public areas,
	Night vision/electro-optic	Mobile surveillance
	Infrared (thermal) Night vision	36. During the 12-month period ending September 30, 2007,
	imagers goggles/binoculars	did your agency operate gunshot detection sensors on a
	Image intensifiers License plate readers	regular basis?
	Laser range finders	Yes If YES, how many?
	Vehicle stopping/tracking	■ No , N
	Electrical/engine disruption Tire deflation devices	ı [
	Stolen vehicle tracking None of the listed vehicle	
	(e.g., LoJack) stopping/tracking technologies	」

SECTION VII - COMPUTERS AND INFORMATION **SYSTEMS** ***Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.*** 37. Does your agency use computers for any of the following functions? Mark (11) all that apply. ☐ Analysis of community In-field report writing problems Intelligence gathering Automated booking Inter-agency information Crime analysis sharing Crime mapping Internet access Trime investigations Personnel records ■ Dispatch (CAD) Records management Fleet management Resource allocation Hotspot identification ☐ NONE of the listed functions In-field communications 38. Does your agency maintain its own computerized files with any of the following information? Mark () all that apply. Alarms Intelligence related to potential terrorist activity M Arrests Pawn shop data ☐ Biometric data for use **Z** Protection orders with facial recognition system M Stolen property Calls for service M Summonses Citizen complaints against officers/agency Traffic citations Fingerprints Traffic stops **適** Gangs Use of force incidents Incident reports W Warrants Illegal attempts to ☐ NONE of the listed files purchase firearms 39. Do any of your agency's field/patrol officers use computers or terminals WHILE IN THE FIELD? ☐ No -- SKIP to Question 41 **逐** Yes 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.' Permanent vehicle-mounted computers/terminals: Portable computers/terminals used with vehicle docking stations:

40.	Do any of your agency's field/patr access to the following types of inf vehicle-mounted or portable comp	ormation using IN-FIELI
	Motor vehicle records Yes	□ No
	Driving records Yes	No No
	Criminal history records Yes	2 No
	Warrants Yes	□ No
	Protection orders Yes	□No
	Inter-agency information system	No No
	Address history (e.g., repeat calls for service)	□ No
	Internet access Yes	₩ No
	GIS/crime mapping Yes	D No
	Other (please specify) Yes	™ No
	transmitted to your agency's centre Mark (■) only one response. □ Paper report □ Voice (cellphone, telephone, reco ■ Computer/data device □ Other (please specify) □ Not applicable - agency does not	ording, radio) handle such reports
42.	Does your agency own or have acc Fingerprint Identification System file of digitized prints? Mark ()	(AFIS) that includes a
	Magency is exclusive/shared owner	r of an AFIS system
	☐ Agency has access to a remote Al	FIS system
	☐ Agency has access to AFIS through	gh another agency
•	\square None of the above	
43.	Does your agency have an operati personnel performance monitorin Early Warning or Early Intervent monitoring or responding to prob patterns?	g/assessment system (e.g., tion System) for
	W Yes □ No	

stations:

Portable computers/terminals NOT used with vehicle docking

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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 (11) the appropriate box for each problem/task listed below. Mark only one box per line.

		(1)	Agency DOES NOT HA	VE a specialized unit with	full-time personnel
T	vpe 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				
b.	Bias/hate crime		95		
c.	Bomb/explosive disposal	æ			
d.	Child abuse/ endangerment	(4)			
e.	Community crime prevention	<u>o</u> j			
f.	Crime analysis				
g.	Cybercrime		48	. .	
h.	Domestic violence	E			. 🗆
i.	Drug education in schools	. 10	· 🗆		
j.	Financial crimes	(9)	· 🗖		
k.	Drug enforcement	E			
I.	Gangs	5 0			
m.	Impaired drivers (DUI/DWI)	ā a	. 🗆		
n.	Internal affairs				
0.	Juvenile crime				
p.	Methamphetamine labs		41	<u> </u>	
q.	Missing children	M.			
r.	Repeat offenders		7.J.		
s.	Research and planning				
t.	School safety				Ø
u.	Terrorism/homeland security				
v.	Victim assistance	10 0			

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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?

Officer conduct

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

	cor	ter the current dispositions for all formal citizen mplaints received during 2006 regarding use of force. If ne, enter '0.'
	a,	Sustained (Sufficient evidence to justify disciplinary action against the officer(s))
	b.	Other disposition (e.g., unfounded, exonerated, not sustained, withdrawn)
	с.	Pending (Final disposition of the allegation has not been made)
	d.	TOTAL use of force complaints received (sum of lines 'a' through 'c')
48 a		s there a civilian complaint review board/agency in your
		urisdiction that reviews use of force complaints against officers in your agency?
	0	
-	o E b. 1	officers in your agency?
-]	o E b. I	officers in your agency? Yes No - SKIP to Question 49 Does this civilian review board/agency have independent

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