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RETURN Police Executive Research Forum
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.
- 2) Mail the survey to PERF using the enclosed postage-paid envelope.
- 3) Fax the survey to PERF at 202-466-7826.

■ 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.

■ 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.

■ 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 | PUBLIC INFORMATION SPECIALIST | | | | | | | | | | | | | | | | | | | | | | | | |
| AGENCY | RIVERSIDE COUNTY SHERIFF'S DEPARTMENT | | | | | | | | | | | | | | | | | | | | | | | | |
| TELEPHONE | (951) 486-2803 | | | | | | | | | | | | | | | | | | | | | | | | |
| FAX NUMBER | (951) 486-3358 | | | | | | | | | | | | | | | | | | | | | | | | |
| EMAIL | [REDACTED]@RIVERSIDESHERIFF.ORG | | | | | | | | | | | | | | | | | | | | | | | | |

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

- ☐ 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

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

☐ Yes ☒ No

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

Physical attributes

Drug test..... ☒ Yes ☐ No

Medical exam.....☒ Yes ☐ 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.'

| | Academy Training | | Field Training | |
|-----------------------------|------------------|---|----------------|---|
| Total hours of training.... | | 0 | 69 | 0 |

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'

enter '0.'

N/A

Average
annual hours
per officer

Total hours of training.....

| | | |
|--|--|--|
| | | |
|--|--|--|

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 | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 2 | 5 | 1 |
| b. | Black or African American, not of Hispanic origin | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 7 | 8 | |
| c. | Hispanic or Latino | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 5 | 0 | 2 |
| d. | American Indian or Alaska Native | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | 2 |
| e. | Asian | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 2 | 8 | |
| f. | Native Hawaiian or other Pacific Islander | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | 0 |
| g. | Two or more races | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 2 | 8 | |
| h. | No information available | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | 0 |
| i. | Total (sum of lines 'a' through 'h') | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | | 8 | 8 | 9 |

Gender

- | | | | | | | |
|-------------------------------------|--|---|---|---|---|---|
| a. Male | | 1 | , | 7 | 1 | 4 |
| b. Female | | | , | 1 | 7 | 5 |
| c. Total (sum of lines 'a' and 'b') | | 1 | , | 8 | 8 | 9 |

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..... , 226

b. Non-sworn personnel..... , 80

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

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

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.) | 215,619 | 215,619 |
| b. Sergeant or equivalent first-line supervisor | 69,644 | 91,026 |
| c. Entry-level officer or deputy (post-academy) | 52,150 | 69,986 |

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

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

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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| In-service sworn personnel | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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:

| | | |
|--|--|----|
| | | 11 |
|--|--|----|
- ☒ 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:

| | | |
|--|--|----|
| | | 22 |
|--|--|----|
- ☒ 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..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Business groups..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| <hr/> | | |
| Faith-based organizations..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Local government agencies (non-law enforcement)..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other local law enforcement agencies..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Neighborhood associations..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Senior citizen groups..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| School groups..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Youth service organizations..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> 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..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Agency's website included methods for citizens to ask questions and/or provide feedback..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Agency's website provided citizens with direct access to crime maps..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Agency's website provided citizens with direct access to crime statistics..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Agency hosted a listserv or other electronic means to distribute news and updates..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Reverse 9-1-1 system used for emergency community notification..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| System used for non-emergency mass community notification..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 3-1-1 system available to handle police non-emergency calls..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Electronic crime reporting was available..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Citizens received crime reports via email..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other (please specify)..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

SECTION V - EMERGENCY PREPAREDNESS

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

- 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

- 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

10. 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

FO & THREAT ASSESSMENT TO CRITICAL
INFRASTRUCTURE WITHIN THE COUNTY

- 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..... | <table border="1"><tr><td></td><td>1</td><td>1</td></tr></table> | | 1 | 1 | <table border="1"><tr><td></td><td></td><td>2</td></tr></table> | | | 2 |
| | 1 | 1 | | | | | | |
| | | 2 | | | | | | |

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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| .45..... | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| .40..... | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| .357..... | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| .380..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other caliber..... | <input type="checkbox"/> | <input type="checkbox"/> |
| Any semiautomatic, as long as they qualify..... | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Revolver..... | <input checked="" 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

| | |
|--|----|
| | 20 |
|--|----|

 Horses

| | |
|--|---|
| | 6 |
|--|---|

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)..... ☒ Yes ☐ 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

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..... 6 9 4

Other marked vehicles (SUV, truck, van, etc.)..... 5 1

Unmarked cars..... 7 8 3

Other unmarked vehicles (SUV, truck, van, etc.)..... N A

Fixed-wing aircraft..... N A

Helicopters..... 4

Boats..... 4

Motorcycles..... 2 3

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..... 1 0

Fixed-site surveillance in public areas..... 0

Mobile surveillance..... 3

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

→ N A

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SECTION VIII - SPECIAL PROBLEMS/TASKS

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

14. 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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Bias/hate crime | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Bomb/explosive disposal | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Child abuse/ endangerment | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Community crime prevention | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Crime analysis | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Cybercrime | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| h. Domestic violence | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| i. Drug education in schools | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Financial crimes | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| k. Drug enforcement | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Gangs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Impaired drivers (DUI/DWI) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. Internal affairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| o. Juvenile crime | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| p. Methamphetamine labs | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| q. Missing children | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| r. Repeat offenders | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| s. Research and planning | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| t. School safety | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| u. Terrorism/homeland security | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| v. Victim assistance | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

SECTION IX - POLICIES AND PROCEDURES

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

i. 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

i. 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)) ☒ 3, ☐ ☐ ☐ N/A
- b. Other disposition (e.g., unfounded, exonerated, not sustained, withdrawn) ☒ 76, ☐ ☐ ☐ N/A
- c. Pending (Final disposition of the allegation has not been made) ☒ 0, ☐ ☐ ☐ N/A
- d. TOTAL use of force complaints received (sum of lines 'a' through 'c') ☒ 79, ☐ ☐ ☐

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.*****