

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

COMPLETED**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:

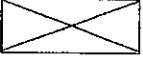
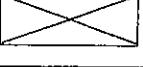
NAME													b6
TITLE	Sergeant												
AGENCY	Santa Ana Police Department												
TELEPHONE	(7 1 4) 2 4 5 - 8 0 2 8				EXT. 								
FAX NUMBER	(7 1 4) 2 4 5 - 8 0 9 0												
EMAIL	@santa-ana.org												

ID NUMBER 120

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	403	365	6
b. Officers/deputies with limited or no arrest powers (e.g., jail or court officers in some agencies)		0	0
c. Non-sworn employees		303	45
d. TOTAL (sum of lines 'a' through 'c')		668	51

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
		0	6
	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
	0	0
a. Gangs.....	0	0
b. Drugs.....	6	0
c. Anti-terrorism.....	0	0
.....human trafficking.....		

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	0 0 , 1 2 2
b. Community Policing Officers, Community Relations Officers, or other sworn personnel specifically designated to engage in community policing activities	0 0 , 0 2 5
c. School Resource Officers, School Liaison Officers, or other sworn personnel whose primary duties are related to school safety (exclude crossing guards)	0 0 , 0 0 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.....
b. Investigative duties (e.g., detectives).....
c. Jail-related duties.....
d. Community security duties.....
e. Process serving duties.....

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.

\$ 0 0 , 1 0 7 , 0 0 0 , 0 0 0

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. Drugs forfeiture program.....	\$ 3 , 0 0 0 , 0 0 0
b. Gambling forfeiture program.....	\$ 0 , 0 0 0 , 0 0 0
c. Other forfeiture program(s).....	\$ 0 , 0 0 0 , 0 0 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

8b. 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

10. How many total hours of ACADEMY training and FIELD Training (e.g., Sworn, TCO) were required by 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..... <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 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'.

Average annual hours per officer
Total hours of training..... <input type="checkbox"/> 1 <input type="checkbox"/> 4 <input type="checkbox"/> 0

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="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 1 <input type="checkbox"/> 6 <input type="checkbox"/> 8
b. Black or African American, not of Hispanic origin	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 8
c. Hispanic or Latino	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 1 <input type="checkbox"/> 7 <input type="checkbox"/> 2
d. American Indian or Alaska Native	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 2
e. Asian	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 5
f. Native Hawaiian or other Pacific Islander	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
g. Two or more races	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
h. No information available	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
i. Total (sum of lines 'a' through 'h')	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 5

Gender

a. Male	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 3 <input type="checkbox"/> 3 <input type="checkbox"/> 8
b. Female	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 7
c. Total (sum of lines 'a' and 'b')	<input type="checkbox"/> 0 <input type="checkbox"/> 0 , <input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 5

SECTION III - OPERATIONS

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.....

0	0	,	2	0	1
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b. Non-sworn personnel.....

0	0	,	2	1	5
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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

Other (please specify)..... 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.)	151932	214692
b. Sergeant or equivalent first-line supervisor	78120	94956
c. Entry-level officer or deputy (post-academy)	63336	76980

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 general 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

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

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-service sworn personnel	<input type="checkbox"/>	<input checked="" 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: **4100**
- 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: **4129**
- 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 emergency 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

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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..... 1

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 0

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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 checked="" type="checkbox"/>
9mm.....	<input 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 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 type="checkbox"/>	<input type="checkbox"/>
Revolver.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		No backup sidearm is authorized..... <input type="checkbox"/>

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

Assault weapon (e.g., AR-15)

Shotgun

Carbine

Rifle

Other (please specify)

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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 5

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 Horses 1

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 4

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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.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
PR-24 baton.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Collapsible baton.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Soft projectile (e.g., bean-bag).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Blackjack/slapjack.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Rubber bullet.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other impact device (please specify).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Camouflaged Vest/Plate Carrier

b. Chemical agents

OC (pepper spray/foam).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other chemical agent (please specify).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

CN (teargas), CS

c. Other weapons/actions

Conducted energy device (e.g., stun gun, Taser, Stinger).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Hold or neck restraint (e.g., carotid hold).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other weapon/action (please specify).....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

[Redacted]

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).....	<input checked="" type="checkbox"/> Facial recognition.....	<input type="checkbox"/>
Mug shots.....	<input checked="" type="checkbox"/> Digital photography.....	<input checked="" type="checkbox"/>
Suspect composites.....	<input type="checkbox"/> None of the listed digital imaging technologies.....	<input type="checkbox"/>

Night vision/electro-optic

Infrared (thermal) imagers.....	<input type="checkbox"/> Night vision
Image intensifiers.....	<input type="checkbox"/> goggles/binoculars.....
Laser range finders.....	<input type="checkbox"/> License plate readers.....
	<input type="checkbox"/> None of the listed night vision/electro-optic technologies.....

Vehicle stopping/tracking

Electrical/engine disruption.....	<input type="checkbox"/> Tire deflation devices.....
Stolen vehicle tracking (e.g., LoJack).....	<input type="checkbox"/> 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.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0
Other marked vehicles (SUV, truck, van, etc.).....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 0
Unmarked cars.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 8 <input type="checkbox"/> 0
Other unmarked vehicles (SUV, truck, van, etc.).....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 0
Fixed-wing aircraft.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
Helicopters.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
Boats.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
Motorcycles.....	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> , <input type="checkbox"/> 0 <input type="checkbox"/> 3 <input type="checkbox"/> 0

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 on their off-duty time in their 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.....	<input type="checkbox"/> N <input type="checkbox"/> , <input type="checkbox"/> A <input type="checkbox"/> , <input type="checkbox"/>
Fixed-site surveillance in public areas.....	<input type="checkbox"/> N <input type="checkbox"/> , <input type="checkbox"/> A <input type="checkbox"/> , <input type="checkbox"/>
Mobile surveillance.....	<input type="checkbox"/> N <input type="checkbox"/> , <input type="checkbox"/> A <input type="checkbox"/> , <input type="checkbox"/>

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 ,

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 (■) all that apply.

<input checked="" type="checkbox"/> Analysis of community problems	<input checked="" type="checkbox"/> In-field report writing
<input checked="" type="checkbox"/> Automated booking	<input checked="" type="checkbox"/> Intelligence gathering
<input checked="" type="checkbox"/> Crime analysis	<input checked="" type="checkbox"/> Inter-agency information sharing
<input checked="" type="checkbox"/> Crimemapping	<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 checked="" type="checkbox"/> Resource allocation
<input checked="" type="checkbox"/> Hotspot identification	<input type="checkbox"/> NONE of the listed functions
<input checked="" type="checkbox"/> In-field communications	

38. Does your agency maintain its own computerized files with any of the following information? Mark (■) all that apply.

<input checked="" type="checkbox"/> Alarms	<input checked="" type="checkbox"/> Intelligence related to potential terrorist activity
<input checked="" type="checkbox"/> Arrests	<input type="checkbox"/> Pawn shop data
<input type="checkbox"/> Biometric data for use with facial recognition system	<input type="checkbox"/> Protection orders
<input checked="" type="checkbox"/> Calls for service	<input checked="" type="checkbox"/> Stolen property
<input checked="" type="checkbox"/> Citizen complaints against officers/agency	<input checked="" type="checkbox"/> Summons
<input checked="" type="checkbox"/> Fingerprints	<input checked="" type="checkbox"/> Traffic citations
<input checked="" type="checkbox"/> Gangs	<input checked="" type="checkbox"/> Traffic stops
<input checked="" type="checkbox"/> Incident reports	<input checked="" type="checkbox"/> Use of force incidents
<input type="checkbox"/> Illegal attempts to purchase firearms	<input checked="" type="checkbox"/> Warrants
	<input type="checkbox"/> NONE of the listed files

39. Do any of your agency's field/patrol officers use computers or terminals WHILE IN THE FIELD?

Yes No -- SKIP to Question 41

→ 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:

0	0
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,

1	0	0
---	---	---

Portable computers/terminals used with vehicle docking stations:

0	0
---	---

,

0	0
---	---

Portable computers/terminals NOT used with vehicle docking stations:

0	0
---	---

,

0	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?

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 type="checkbox"/> Yes	<input checked="" 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Address history (e.g., repeat calls for service).....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Internet access.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GIS/crimemapping.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other (please specify).....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

41. How are data from criminal incident reports PRIMARILY transmitted to your agency's central information system? 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

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

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

- ~~45a. Collection of information on in-custody deaths~~..... Yes No
- o. Racial profiling..... Yes No
- p. Citizen complaints..... Yes No
- ~~45b. 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)) 00,000
- b. **Other disposition** (e.g., unfounded, exonerated, not sustained, withdrawn) 00,016
- c. **Pending** (Final disposition of the allegation has not been made) 00,001
- d. **TOTAL** use of force complaints received (sum of lines 'a' through 'c') 00,017

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.*****