

RETURN TO

Bureau of the Census
1201 East 10th Street
Jeffersonville, IN 47132-0001

FORM **CJ-44**
(6-19-97)

1997 SAMPLE SURVEY OF LAW ENFORCEMENT AGENCIES

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR
BUREAU OF JUSTICE STATISTICS
U.S. DEPARTMENT OF JUSTICE

In correspondence pertaining to this report, please refer to the number at the top of the address label

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FROM THE DIRECTOR
BUREAU OF JUSTICE STATISTICS

On behalf of the Bureau of Justice Statistics (BJS), U.S. Department of Justice, the Bureau of the Census is conducting a sample survey of law enforcement agencies in the United States. The survey will obtain current information on the workload and resources of the Nation's law enforcement agencies. BJS first conducted this survey in 1987 as part of its Law Enforcement Management and Administrative Statistics (LEMAS) program. The survey was repeated in 1990 and 1993.

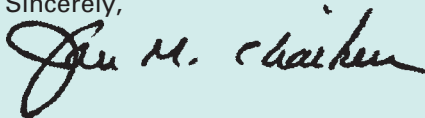
As in past years, your agency and other agencies in the scientifically selected sample will represent the characteristics and work of all law enforcement agencies in the United States. Federal, State, and local officials will use the data to assess the needs of law enforcement agencies and to keep informed of their status. BJS will publish the data in a series of reports.

So that we can complete data collection and publish the survey results as soon as possible, please complete this questionnaire within 3 weeks and return it in the enclosed envelope. If answers to questions are not readily available, provide reasonable estimates marked with an asterisk (*). You may wish to retain a photocopy of your completed reply. If you need assistance with the questionnaire, call Carolyn Gates at the Census Bureau on 1-800-352-7229.

Public reporting burden for this collection of information is estimated to average 2 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, 633 Indiana Avenue, 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 and appreciate your cooperation to make the results comprehensive, accurate, and timely.

Sincerely,



Jan M. Chaiken, Ph.D.
Director

Enclosures

SECTION I – OPERATIONS

1. Enter the number of facilities or sites, separate from headquarters, operated by your agency as of June 30, 1997.

District/Precinct stations.	019	<input type="text"/>
Fixed neighborhood/community sub-stations. . .	020	<input type="text"/>
Mobile neighborhood/community sub-stations. .	021	<input type="text"/>
Other – Specify ↘		
023		<input type="text"/>
	022	<input type="text"/>

2. Indicate the functions for which your agency has PRIMARY responsibility. Exclude functions which your agency performs only upon request such as aiding another agency in an emergency. *Mark (X) all that apply.*

- | | |
|--|--|
| 024 <input type="checkbox"/> Enforcement of traffic laws | 040 <input type="checkbox"/> Court security |
| 025 <input type="checkbox"/> Traffic direction and control | 041 <input type="checkbox"/> Jail operations |
| 026 <input type="checkbox"/> Accident investigations | 042 <input type="checkbox"/> Serving civil process |
| 027 <input type="checkbox"/> Dispatching calls for service | 043 <input type="checkbox"/> Civil defense |
| 028 <input type="checkbox"/> Emergency medical services | 044 <input type="checkbox"/> Fire services |
| 029 <input type="checkbox"/> Vice enforcement | 045 <input type="checkbox"/> Animal control |
| 030 <input type="checkbox"/> Fingerprint processing | 046 <input type="checkbox"/> Responding to citizen calls for service |
| 031 <input type="checkbox"/> Ballistics testing | |
| 032 <input type="checkbox"/> Crime lab services | Crime investigation for: |
| 033 <input type="checkbox"/> Underwater recovery | 047 <input type="checkbox"/> Homicide |
| 034 <input type="checkbox"/> Bomb disposal | 048 <input type="checkbox"/> Other violent crimes |
| 035 <input type="checkbox"/> Search and rescue | 049 <input type="checkbox"/> Arson |
| 036 <input type="checkbox"/> School crossing services | 050 <input type="checkbox"/> Other property crimes |
| 037 <input type="checkbox"/> Tactical operations (SWAT) | 051 <input type="checkbox"/> Environmental crimes |
| 038 <input type="checkbox"/> Parking enforcement | |
| 039 <input type="checkbox"/> Executing arrest warrants | |

3. Does your agency have primary responsibility for the enforcement of drug laws in the area under its jurisdiction?

052 1 Yes 2 No

4. As of June 30, 1997, how many officers did your agency have assigned to a special unit for drug enforcement or to a multi-agency drug enforcement task force?

	Full-time	Part-time
a. Special drug enforcement unit	054	055
b. Multi-agency drug task force	056	057

5. Are any persons arrested by your agency tested for illegal drugs prior to jail admission?

058 1 Yes 2 No

6. Enter the number and capacity of temporary holding or lockup facilities, physically separate from a jail, operated by your agency as of June 30, 1997, and the maximum holding time for adults and juveniles.

	Adults	Juveniles
a. Number of facilities	059	060
b. Total capacity	061	062
c. Maximum holding time	063 hours	064 hours

7. During the 12-month period ending June 30, 1997, which of the following types of patrol units did your agency use? Mark (X) all that apply.

	Routine patrol	Special events	Did not use
Automobile	065 <input type="checkbox"/>	066 <input type="checkbox"/>	067 <input type="checkbox"/>
Motorcycle	068 <input type="checkbox"/>	069 <input type="checkbox"/>	070 <input type="checkbox"/>
Foot	071 <input type="checkbox"/>	072 <input type="checkbox"/>	073 <input type="checkbox"/>
Horse	074 <input type="checkbox"/>	075 <input type="checkbox"/>	076 <input type="checkbox"/>
Bicycle	077 <input type="checkbox"/>	078 <input type="checkbox"/>	079 <input type="checkbox"/>
Marine	080 <input type="checkbox"/>	081 <input type="checkbox"/>	082 <input type="checkbox"/>

8. Using the most recent week available with NORMAL patrol activity (excluding holidays and special events), report the number of patrol units for each type deployed on shifts of 7 hours or longer during the two 24-hour days listed below.

Enter the sum for ALL units deployed during the 24-hour period, not just for one shift. For example, if there were 10 one-officer automobile units deployed for the 8-hour morning shift on Wednesday, 10 units for the 8-hour afternoon shift, and 10 units for the 8-hour night shift, you should enter 30 in that cell.

Type of unit	Wednesday	Saturday
Automobile	083	084
One-officer units		
Two-officer units	085	086
Motorcycle	087	088
One-officer units		
Two-officer units	089	090
Foot	091	092
One-officer units		
Two-officer units	093	094
Horse	095	096
One-officer units		
Two-officer units	097	098
Bicycle	099	100
One-officer units		
Two-officer units	101	102
Marine	103	104
One-officer units		
Two-officer units	105	106
Other – Specify ↘	107	108
109		

9. Does your agency participate in an operational 911 emergency telephone system or its equivalent (i.e. units can be dispatched as a result of a call)?

110 *Mark (X) only one.*

1 Yes – Basic 911 system
 2 Yes – Expanded 911 system
 3 No

10. As of June 30, 1997, which of the following types of systems did your agency have? Mark (X) all that apply.

- 111 3-digit phone number for non-emergency calls (e.g., 311)
 112 Phone-based mass notification system (e.g., reverse 911)
 113 Fax-based mass notification system

SECTION I – OPERATIONS – Continued

11. For the 12-month period ending June 30, 1997, enter the number of calls/requests for service received by your agency that originated from a 911 system, non-emergency phone number, alarm, or other source. For each, enter the number that resulted in the dispatch of 1 or more officers from your agency. Mark (*) estimates with an asterisk.

NOTE: The sum of lines b + c should equal a

	Total	911 system	Non-emergency phone numbers	Alarms	Other
a. Total calls/requests for service received	114	115	116	117	118
b. Calls/requests with officer(s) dispatched	119	120	121	122	123
c. Calls/requests with no officer dispatched (i.e., calls handled in other manner)	124	125	126	127	128

SECTION II – EQUIPMENT

1a. Does your agency SUPPLY sidearms to its regular field/patrol officers?

129

- 1 Yes
- 2 No – SKIP to question 2a

b. Which of the following types of sidearms does your agency SUPPLY to its regular field/patrol officers?

Caliber – Mark (X) all that apply.

Type	.357	.38/.380	.40	.45	9mm	10mm	Other caliber Specify
(1) Revolver	130	131	132	133	134	135	136
(2) Semi-automatic	137	138	139	140	141	142	143

2a. Are there any sidearms authorized, but not supplied by your agency, for use by its regular field/patrol officers while "on duty"?

144

- 1 Yes – Mark (X) all that apply
- 2 No – SKIP to question 3

Caliber – Mark (X) all that apply.

Type	.357	.38/.380	.40	.45	9mm	10mm	Other caliber Specify
(1) Revolver	145	146	147	148	149	150	151
(2) Semi-automatic	152	153	154	155	156	157	158

b. Does your agency give a cash allowance to regular field/patrol officers for purchase of any of the sidearms listed in 2a?

159

- 1 Yes
- 2 No

3. What are your agency's body armor policies for field/patrol officers? Mark (X) one per line.

	All	Some	None
160 Field/patrol officers supplied with body armor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
161 Field/patrol officers given cash allowance for body armor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
162 Field/patrol officers required to wear body armor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

4. Which of the following types of non-lethal weapons are authorized for use by your agency? Mark (X) all that apply.

a. Impact devices

- 163 Traditional baton
- 164 PR-24 baton
- 165 Collapsible baton
- 166 Soft projectile
- 167 Rubber bullet
- 168 Other

b. Chemical agents **Personal issue** **Tactical operations**

- OC (pepper spray) 169
- CN (tear gas) 171
- CS 173
- Other 175
- 170
- 172
- 174
- 176

c. Other non-lethal weapons/actions

- 177 Hand-held electrical device-direct contact
- 178 Hand-held electrical device-stand off (e.g., taser)
- 179 Choke/carotid hold or neck restraint
- 180 Capture net
- 181 Flash/bang grenade
- 182 Other – Specify ↘

183

5. Mark (X) each vehicle type operated by your agency. Include owned, leased, rented and confiscated vehicles.

- 184 Marked cars – Enter the number operated 185
- 186 Unmarked cars – Enter the number operated 187
- 188 Fixed-wing aircraft – Enter the number operated 189
- 190 Helicopters – Enter the number operated 191
- 192 Boats – Enter the number operated 193
- 194 All-terrain vehicles (ATV)
- 195 Armored vehicles
- 196 Mobile command post vehicles
- 197 Buses
- 198 Motorcycles
- 199 3-wheel motorized vehicles
- 200 Vans
- 201 Other – Specify ↘

202

SECTION II – EQUIPMENT – Continued

6a. Does your agency allow officers to take marked vehicles home?

- 203 Yes
 No – SKIP to question 7

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

- 204 Yes
 No

7. Enter the number of animals regularly maintained by your department for use in activities related to law enforcement.

205 Dogs 206 Horses

8. Does your agency use any of the following technologies on a regular basis? Mark (X) all that apply.

Video Camera

- 207 In patrol cars
 208 Mobile surveillance
 209 Fixed-site surveillance
 210 Other

Night Vision/Electro-Optic

- 215 Image intensifiers
 216 Infrared (thermal) imagers
 217 Laser range finders
 218 Other

Digital Imaging

- 211 Fingerprints
 212 Mug shots
 213 Suspect composites
 214 Other

Vehicle Stopping/Tracking

- 219 Tire deflation spikes
 220 Electrical/engine disruption
 221 Stolen vehicle tracking (e.g., LoJack)
 222 Other

SECTION III – COMPUTERS AND INFORMATION SYSTEMS

1. Indicate whether your agency does or does not use each computer type listed below. Mark (X) one per line.

Type of computer	Agency uses	Agency does not use
223 a. Mainframe computer	1 <input type="checkbox"/>	2 <input type="checkbox"/>
224 b. Mini-computer	1 <input type="checkbox"/>	2 <input type="checkbox"/>
225 c. Personal computer (PC)/ or Microcomputer	1 <input type="checkbox"/>	2 <input type="checkbox"/>
226 d. Laptop computer (in-field)	1 <input type="checkbox"/>	2 <input type="checkbox"/>
227 e. Car-mounted mobile digital/ data terminal (MDT)	1 <input type="checkbox"/>	2 <input type="checkbox"/>
228 f. Car-mounted mobile digital/ data computer (MDC)	1 <input type="checkbox"/>	2 <input type="checkbox"/>
229 g. Hand-held digital terminal	1 <input type="checkbox"/>	2 <input type="checkbox"/>
230 h. Other – Specify <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>

231

2. Mark (X) the functions for which your agency uses computers.

232 <input type="checkbox"/> Crime analysis	237 <input type="checkbox"/> In-field communications
233 <input type="checkbox"/> Crime mapping	238 <input type="checkbox"/> In-field report writing
234 <input type="checkbox"/> Criminal investigations	239 <input type="checkbox"/> Internet access
235 <input type="checkbox"/> Dispatch (CAD)	240 <input type="checkbox"/> Records management
236 <input type="checkbox"/> Fleet management	241 <input type="checkbox"/> Resource allocation

3. Mark (X) the types of computerized files maintained by your agency.

242 <input type="checkbox"/> Alarms	254 <input type="checkbox"/> Stolen vehicles
243 <input type="checkbox"/> Arrests	255 <input type="checkbox"/> Stolen property other than vehicles
244 <input type="checkbox"/> Calls for service	256 <input type="checkbox"/> Summonses
245 <input type="checkbox"/> Criminal histories	257 <input type="checkbox"/> Traffic accidents
246 <input type="checkbox"/> Department inventory	258 <input type="checkbox"/> Traffic citations
247 <input type="checkbox"/> Driver's license information	259 <input type="checkbox"/> Uniform Crime Reports – Incident-Based (NIBRS)
248 <input type="checkbox"/> Evidence	260 <input type="checkbox"/> Uniform Crime Reports – Summary
249 <input type="checkbox"/> Field interview information	261 <input type="checkbox"/> Vehicle registration
250 <input type="checkbox"/> Incident reports	262 <input type="checkbox"/> Warrants
251 <input type="checkbox"/> Linked files for crime analysis	
252 <input type="checkbox"/> Payroll	
253 <input type="checkbox"/> Personnel	

4a. Does your agency have exclusive or shared ownership of an Automated Fingerprint Identification System (AFIS) that includes a file of digitized prints? Mark (X) only one box.

- 263 Yes – Exclusive 3 No
 Yes – Shared

b. Does your agency operate an AFIS terminal that has access to a remote AFIS site?

- 264 Yes 2 No

5. Which of the following types of data does your agency geocode and map? Mark (X) one per line.

	Yes	No
265 Calls for service	1 <input type="checkbox"/>	2 <input type="checkbox"/>
266 Arrests	1 <input type="checkbox"/>	2 <input type="checkbox"/>
267 Incidents	1 <input type="checkbox"/>	2 <input type="checkbox"/>

6. Do your agency's patrol officers have direct access to the following types of information via computer while in the field? Mark (X) one per line.

	Yes	No
268 Motor vehicle records	1 <input type="checkbox"/>	2 <input type="checkbox"/>
269 Driving records	1 <input type="checkbox"/>	2 <input type="checkbox"/>
270 Criminal history records	1 <input type="checkbox"/>	2 <input type="checkbox"/>
271 Linked files for crime analysis	1 <input type="checkbox"/>	2 <input type="checkbox"/>
272 Calls for service	1 <input type="checkbox"/>	2 <input type="checkbox"/>

7. How is field report data primarily transmitted to the department's central information system? Mark (X) one per column.

	Criminal incident reports	Traffic accident reports
	273	274
Paper report	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Wireless transmission (e.g., cellular, UHF)	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Telephone line (voice)	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Computer medium (e.g., disk transfer)	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Data device (e.g., laptop download)	5 <input type="checkbox"/>	5 <input type="checkbox"/>

8. Does your agency maintain an official site (i.e., "Home Page") on the World Wide Web/Internet?

- 275 Yes 2 No

SECTION IV – PERSONNEL

	Sworn personnel		Nonsworn personnel		
	Full-time (1)	Part-time (2)	Full-time (3)	Part-time (4)	
	276	277	278	279	
1. Total authorized positions on June 30, 1997					
2. Enter the actual number of full-time and part-time agency employees during the pay period that included June 30, 1997. Sum of lines a through f.	280	281	282	283	
a. Administration – Chief of police or sheriff, assistants, and other personnel who work in an administrative capacity. <i>Include finance, personnel, and internal affairs.</i>	284		285		
b. Field operations – Police officers, deputies, detectives, inspectors, supervisors, and other personnel providing direct law enforcement services. <i>Include traffic, patrol, investigations, and special operations.</i>	286		287		
c. Technical support – Dispatchers, records clerks, data processors, and other personnel providing support services. <i>Include communications, fleet management, and training.</i>	288		289		
d. Jail operations – Correctional officers, guards, cooks, janitors, and other personnel who work in the jail.	290		291		
e. Court operations – Bailiffs, security guards, process servers, etc.	292		293		
f. Other , (e.g., crossing guards, parking monitors, etc.) – <i>Specify</i> ↘ 296	294		295		
3. Of the total number of FULL-TIME sworn personnel working in field operations (2b(1) above), enter the number of uniformed officers whose regular assigned duties included:					
a. Responding to calls for service	297				
b. Serving as a Community Policing Officer	298				
c. Serving as a School Resource Officer	299				
4. Enter the number of FULL-TIME agency employees BY RACE AND SEX during the pay period that included June 30, 1997. If counts are not available from records, indicate estimates with an asterisk (*).	Sworn personnel		Nonsworn personnel		
	Male (1)	Female (2)	Male (3)	Female (4)	
a. Total number of full-time agency employees – <i>Sum of lines b through f below.</i>	300	301	302	303	
b. White, not of Hispanic origin	304	305	306	307	
c. Black, not of Hispanic origin	308	309	310	311	
d. Hispanic origin ¹	312	313	314	315	
e. American Indian/Alaskan Native	316	317	318	319	
f. Asian/Pacific Islander	320	321	322	323	
¹ Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, excluding Brazilian, Jamaican, and Haitian.					
5. For applicants (sworn positions only), regular field/patrol officers, and nonsworn personnel, indicate the types of drug testing programs that are authorized by your agency's written policy. Mark (X) all that apply, but at least one per line.	Universal (all are tested) (a)	Random selection (b)	Reasonable suspicion of use (c)	Other (d)	Not tested (e)
(1) Applicants for employment (sworn positions)	324 <input type="checkbox"/>	325 <input type="checkbox"/>	326 <input type="checkbox"/>	327 <input type="checkbox"/>	328 <input type="checkbox"/>
(2) Regular field/patrol officers.	329 <input type="checkbox"/>	330 <input type="checkbox"/>	331 <input type="checkbox"/>	332 <input type="checkbox"/>	333 <input type="checkbox"/>
(3) Nonsworn personnel	334 <input type="checkbox"/>	335 <input type="checkbox"/>	336 <input type="checkbox"/>	337 <input type="checkbox"/>	338 <input type="checkbox"/>
6. Mark (X) all the following screening techniques that are used by your agency in selecting new officer recruits.					
339 <input type="checkbox"/> Personal interview	343 <input type="checkbox"/> Physical agility test	347 <input type="checkbox"/> Medical exam			
340 <input type="checkbox"/> Psychological screening	344 <input type="checkbox"/> Written aptitude test	348 <input type="checkbox"/> Driving record check			
341 <input type="checkbox"/> Polygraph exam	345 <input type="checkbox"/> Criminal record check	349 <input type="checkbox"/> Other – <i>Specify</i> ↘			
342 <input type="checkbox"/> Voice stress analyzer	346 <input type="checkbox"/> Background investigation	350			

SECTION IV – PERSONNEL – Continued

7. Indicate your agency's residency requirement for new officer recruits that goes into effect at the time of employment or within one year of employment. Mark (X) only one.

- 1 Within State 4 Within metropolitan area
 2 Within county 5 Within specified miles or driving time
 3 Within municipality 6 No residency requirement

8. Indicate your agency's education requirements for new officer recruits. Mark (X) only one.

- 1 Four-year college degree required
 2 Two-year college degree required
 3 Some college but no degree required 353
 Enter number of semester hours required . . .
 4 High school diploma or equivalent required
 5 No formal education requirement

9a. How many hours of training does your agency require for new officer recruits? If no training of that type is required by your agency, then enter 0.

Enter number of classroom training hours required 354
 Enter number of field training hours required . . . 355

b. Does your agency operate its own training academy for the training of its new officer recruits?

- 1 Yes 2 No

10. What is the amount of in-service training required for your agency's field/patrol officers?

357 358
 hours every months

11. Is collective bargaining authorized for your agency's employees? Mark (X) one per line.

- | | | |
|------------------------|----------------------------|----------------------------|
| | Yes | No |
| 359 Sworn | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 360 Nonsworn | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

12. Does your agency authorize membership by sworn officers in any of the following types of organizations? Mark (X) one per line.

- | | | |
|----------------------------------|----------------------------|----------------------------|
| | Yes | No |
| 361 Police union | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 362 Nonpolice union | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 363 Police association | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

13. Does your agency provide any of the following to sworn full-time personnel? Mark (X) one per line.

- | | | |
|--|----------------------------|----------------------------|
| | Yes | No |
| 364 a. Hazardous duty pay | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 365 b. Shift differential pay | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 366 c. Education incentive pay | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 367 d. Merit pay | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

SECTION V – FINANCIAL INFORMATION

1. Enter your agency's expenditures for the most recently completed fiscal year. If data are not available, provide estimates and mark with an asterisk(*). Include expenditures of jails administered by your agency.

	Amount
a. Gross salaries and wages, including employer contributions to employee benefits. If employer contributions to employee benefits are NOT included in the amount above, estimate the percentage of gross salaries necessary to account for these costs (e.g., 15%, 20%). 368 %	369 \$
b. Other operating expenditures (e.g., purchase of supplies, food, and contractual services, etc.)	370 \$
c. Equipment (e.g., purchase of cars, radios, computers, etc., with a life expectancy of 5 years or more)	371 \$

2. Enter the total estimated value of money, goods, and property received by your agency from a drug asset forfeiture program during the 12 months ending June 30, 1997. If no money, goods, or property were received, enter 0.

Amount
372 \$

3. Enter total overtime hours worked, total overtime monetary payment, and total compensatory hours earned by FULL-TIME sworn personnel who worked overtime during the most recently completed fiscal year. If data are not available, provide estimates and mark with an asterisk(*).

a. Total overtime hours worked	373 Hours
b. Total overtime monetary payment	374 \$
c. Total overtime compensatory hours earned	375 Hours

4. Enter your agency's salary schedule for the following full-time positions. If a position does not exist in your department, enter "N/A".

	Base annual salary	
	Minimum	Maximum
a. Chief of police or sheriff	376 \$	377 \$
b. Sergeant or equivalent first-line supervisor	378 \$	379 \$
c. Field/patrol officer or deputy with 1 year post-academy experience	380 \$	381 \$
d. Entry-level officer or deputy (post-academy)	382 \$	383 \$

SECTION VI – POLICIES AND PROGRAMS

1. Does your agency have a separate special unit with one or more employees assigned FULL-TIME for any of the following problems or tasks? If YES, enter the number of employees assigned full-time as of June 30, 1997, in columns (1) and (2). If NO, mark one (X) box only in either column (3), (4), or (5).

Type of problem/task	Agency has a special unit with full-time personnel		Agency does not have a special unit with full-time personnel <i>Mark (X) one per line.</i>			
	Enter the number of personnel assigned full-time.		Agency has personnel who have been specially designated to handle this problem/task as needed. (3)	Agency has special policies or procedures that address this problem/task, but no specially designated personnel. (4)	Agency has no special policies or procedures, or specially designated personnel for this problem/task. (5)	
	Sworn (1)	Nonsworn (2)				
a. Bias/hate crime	384	385	386	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Child abuse	387	388	389	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Community crime prevention	390	391	392	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Community policing	393	394	395	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Crime analysis	396	397	398	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Domestic violence	399	400	401	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Drug education in schools	402	403	404	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. Drunk drivers	405	406	407	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. Environmental crime	408	409	410	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Gangs	411	412	413	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. Juvenile crime	414	415	416	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
l. Missing children	417	418	419	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
m. Police-prosecutor relations	420	421	422	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
n. Repeat offenders	423	424	425	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
o. Research and planning	426	427	428	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
p. Victim assistance	429	430	431	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
q. Youth outreach	432	433	434	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

2. Does your agency have written policy directives on the following? Mark (X) one per line.

	Yes	No
435 a. Use of deadly force/firearm discharge	1 <input type="checkbox"/>	2 <input type="checkbox"/>
436 b. Handling the mentally ill	1 <input type="checkbox"/>	2 <input type="checkbox"/>
437 c. Handling the homeless.	1 <input type="checkbox"/>	2 <input type="checkbox"/>
438 d. Handling domestic disputes	1 <input type="checkbox"/>	2 <input type="checkbox"/>
439 e. Handling juveniles.	1 <input type="checkbox"/>	2 <input type="checkbox"/>
440 f. Use of less-than-lethal force	1 <input type="checkbox"/>	2 <input type="checkbox"/>
441 g. Relationships with private security firms	1 <input type="checkbox"/>	2 <input type="checkbox"/>
442 h. Off-duty employment of sworn personnel	1 <input type="checkbox"/>	2 <input type="checkbox"/>
443 i. Strip searches	1 <input type="checkbox"/>	2 <input type="checkbox"/>
444 j. Code of conduct and appearance	1 <input type="checkbox"/>	2 <input type="checkbox"/>
445 k. Use of confidential funds	1 <input type="checkbox"/>	2 <input type="checkbox"/>
446 l. Employee counseling assistance	1 <input type="checkbox"/>	2 <input type="checkbox"/>
447 m. Citizen complaints	1 <input type="checkbox"/>	2 <input type="checkbox"/>
448 n. Maximum hours worked by officers.	1 <input type="checkbox"/>	2 <input type="checkbox"/>
449 o. Discretionary arrest power	1 <input type="checkbox"/>	2 <input type="checkbox"/>

3. Which of the following best describes your agency's pursuit driving policy? Mark (X) only one.

- 1 Judgmental (leaves decisions to officer's discretion)
- 2 Restrictive (restricts decisions of officers to specific criteria (e.g., type of offense, top speed, etc.))
- 3 Discouragement (discourages all pursuits)
- 4 Other – Specify ↴
451
- 5 Agency does not have a written policy pertaining to pursuit driving

4a. Is there a civilian complaint review board/agency in your jurisdiction that reviews excessive force complaints against your department?

- 452 1 Yes
- 2 No – SKIP to question 5

b. To whom does the civilian complaint review board/agency report? Mark (X) all that apply.

- 453 Law enforcement executive (chief, sheriff, etc.)
- 454 Government executive (mayor, commissioner, city manager, etc.)
- 455 Governmental body (city/county council, commission, etc.)
- 456 Other – Specify ↴
457

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

- 458 1 Yes
- 2 No

5. Who conducts administrative (non-criminal) investigations of citizen complaints about police use of excessive force? Mark (X) all that apply.

- 459 Law enforcement executive (chief, sheriff, etc.)
- 460 Internal affairs unit
- 461 Other sworn agency personnel (not listed above)
- 462 Other – Specify ↴
463

SECTION VI – POLICIES AND PROGRAMS – Continued

6. Who has the final responsibility for acting on the recommendations for disciplinary action in cases involving the use of excessive force, prior to appeal (non-legal)? *Mark (X) all that apply.*

- 464 1 Law enforcement executive
 465 2 Other sworn agency personnel
 466 3 Government executive
 467 4 Other – *Specify* ↘

468

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

- 1 Yes 2 No

8. Who has the right to administrative appeal in cases involving the use of excessive force?

Yes No

470 Citizens 1 2

471 Officers 1 2

SECTION VII – COMMUNITY POLICING ACTIVITIES

1. Does your agency have a community policing plan? *Mark (X) only one.*

- 472 1 Yes, formally written
 2 Yes, not formally written
 3 No

2. During the 3-year period ending June 30, 1997, what proportion of each of the following types of agency personnel received at least 8 hours of community policing training (e.g., problem solving, SARA, community partnerships, etc.)? *Mark (X) one per line.*

	All	More than half	Less than half	None
475 New officer recruits	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
476 In-service sworn personnel . .	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
477 Civilian personnel.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

3. During the 12-month period ending June 30, 1997, which of the following did your agency do? *Mark (X) all that apply*

- 478 Train citizens in community policing (e.g., community mobilization, problem solving)
 479 Give patrol officers responsibility for specific geographic areas/beats
 480 Assign detectives to cases based on geographic area/beat
 481 Actively encourage patrol officers to engage in SARA-type problem-solving projects on their beats
 482 Include collaborative problem-solving projects in the evaluation criteria of patrol officers
 483 Form problem-solving partnerships with community groups, municipal agencies, or others through specialized contracts or written agreements
 484 None of the above

4. During the 12-month period ending June 30, 1997, which of the following groups did your agency regularly meet with to address crime-related problems? *Mark (X) all that apply.*

- 485 Neighborhood associations
 486 Tenants' associations
 487 Youth service organizations
 488 Advocacy groups
 489 Business groups
 490 Religious groups
 491 School groups
 492 Other – *Specify* ↘

493

494 Did not meet with any groups

5a. During the 12-month period ending June 30, 1997, did your agency survey the citizens in its jurisdiction to gather any of the following information? *Mark (X) all that apply.*

- 495 Public satisfaction with police services
 496 Public perceptions of crime/disorder problems
 497 Personal crime experiences
 498 Other – *Specify* ↘

499

500 Did not survey the general public – *SKIP to question 6*

b. For which purposes, does your agency use the survey information described in 5a. above? *Mark (X) all that apply.*

- 501 Allocating resources to targeted neighborhoods
 502 Prioritizing crime/disorder problems
 503 Formulating agency policy and procedures
 504 Redistricting beat/reporting areas
 505 Providing information to patrol officers
 506 Other – *Specify* ↘

507

6a. As of June 30, 1997, did your agency provide citizens with regular access to crime statistics or crime maps?

- 508 1 Yes – *GO to 6b*
 2 No – *STOP here*

b. Can citizens routinely access crime statistics or crime maps through any of the following methods? *Mark (X) all that apply.*

- | | |
|--|---|
| 509 <input type="checkbox"/> In-person | 514 <input type="checkbox"/> Newspaper |
| 510 <input type="checkbox"/> Telephone | 515 <input type="checkbox"/> Radio |
| 511 <input type="checkbox"/> Internet/web-page | 516 <input type="checkbox"/> Television |
| 512 <input type="checkbox"/> Public kiosk/terminal | 517 <input type="checkbox"/> Other – <i>Specify</i> ↘ |
| 513 <input type="checkbox"/> Newsletter | 518 |

c. What level of crime statistics/maps can citizens in your jurisdiction routinely access? *Mark (X) all that apply.*

- | | |
|---|---|
| 519 <input type="checkbox"/> County | 525 <input type="checkbox"/> Neighborhood |
| 520 <input type="checkbox"/> City | 526 <input type="checkbox"/> Apartment complex |
| 521 <input type="checkbox"/> District | 527 <input type="checkbox"/> Census block |
| 522 <input type="checkbox"/> Precinct | 528 <input type="checkbox"/> Street |
| 523 <input type="checkbox"/> Census tract | 529 <input type="checkbox"/> Block |
| 524 <input type="checkbox"/> Patrol beat | 530 <input type="checkbox"/> Other – <i>Specify</i> ↘ |

531