# ALEAP Program Manual

*Arkansas Law Enforcement Accreditation Program*

Edition 2

**Administrative Program Guide**

Edition 2
May 2015

# Table of Contents

# Chapter 1

## *Program Introduction*

The Arkansas Law Enforcement Accreditation Program (ALEAP) is a voluntary process where police agencies in Arkansas prove their compliance with Arkansas Law Enforcement's current Best Practices or Standards. These Standards were carefully developed by Arkansas Law Enforcement professionals to assist agencies in the efficient and effective delivery of service and the protection of individual's rights.

The Arkansas Association of Chiefs of Police (AACP) developed the Accreditation and Recognition Programs to assist Arkansas agencies in meeting their professional obligations to the citizens of Arkansas. An appointed Committee of Chiefs of Police or other executive level police officers who hold Active Membership in the AACP as well as other critical partners identified by the AACP Board of Directors and or the AMPC from across the state developed the Accreditation Program and identified the Standards for Arkansas Law Enforcement. This Committee now conducts reviews of an agency's efforts and awards "Accredited" or "Recognized" status.

Being "Accredited" or "Recognized" means that the agency meets or exceeds all of the identified Standards for Arkansas Law Enforcement Agencies. These Standards cover all aspects of law enforcement operations including use of force, protection of citizen rights, pursuits, property and evidence management, and patrol and investigative operations. While being "Accredited" or "Recognized" does not guarantee an agency will not make a mistake, it does ensure that the agency has carefully thought about these critical issues, has developed policy and procedures to address them and has systems in place to identify and correct problems.

There are a number of benefits to becoming an "Accredited" or "Recognized" police agency. Police officers exercise government's most awesome powers – the power to stop and question a citizen, the power to arrest a citizen, to seize his person and property, and the power to use force in that process. Officers often operate alone without direct supervision. Police agencies direct and control their officer's activity through supervision, training, and written policies and procedures. Since supervisors cannot always be present, the training and the policies and procedures of an agency are critical to ensuring proper performance. Appropriate equipment is also necessary. The Programs ensure an agency has addressed the most critical of law enforcement issues in both policy as well as actual operation. The Programs do not tell an agency what their policy must be, but rather it ensures that the policy, procedure, or operation addresses all of the critical aspects of an issue.

The Accreditation and Recognition Programs assures both City Management and the citizens of a city that their Police Department is operating in a manner that reflects the current best practices of Law Enforcement. It reduces both officer and agency risks. It can provide citizens with reassurance and improve community cooperation – and can also lead to improved performance of the department.

The Accreditation Process

An agency that has been awarded "Accredited" status has undertaken a careful internal review of all of its policies and procedures, equipment, facilities, and operations and has then requested an outside review to prove their compliance with the standards. After an independent review of their written policies and proofs of compliance, a team of assessors is sent to the agency to review their operations, facilities, and to interview staff. A Final Report outlining the findings is sent to the Accreditation Committee. The Committee reviews the findings and, if the agency meets all the standards, votes to award "Accredited" status.

The "Accredited" status is awarded for a three year period. During the three year period the agency must submit an annual report and proofs of compliance for four performance related standards. These are reviewed as they are received and continued compliance verified. During the last year of the three year period the agency must prepare updated documentation on all of the Standards and another on site review is conducted. The findings are submitted to the Accreditation Committee for consideration to approve "Accredited" status for the next three years.

The Recognition Process

An agency that has been awarded the "Recognized" status has chosen to implement the AACP Model Policies applicable to their agency by function. Agencies may not alter language within the policies which are attributed to State or Federal law (Red and Green respectively) unless such language is changed by law, or change language that contains a reporting or physical requirement of the agency. In addition, agencies should be very careful when considering changes to language found in blue lettering (a suggested best practice by an important law enforcement organization, manufacturer, etc.). Required polices must be updated for legal compliance as needed. AACP will notify recognized agencies of needed updates as appropriate. Agencies in the Recognition Program are required to meet all State Requirements as outlined in Chapter 13 of the Standards Manual.

"Recognized" status is awarded for a three year period. During the three year period the agency must submit annual reports and proofs of compliance regarding Response to Resistance, Vehicle Pursuits, and Evidence Inventory. These are reviewed as they are received and continued compliance verified. During the last year of the three year period the agency must reapply for recognized status and ensure that the agency complies with all requirements. Another on site review is conducted. The findings are submitted to the Accreditation Committee for consideration to approve "Recognized" status for the next three years.

CALEA Agencies

While ALEAP is a standalone accrediting body, CALEA agencies within the State of Arkansas are highly encouraged to participate in the ALEAP Accreditation program. CALEA agencies desiring to participate will: pay a two-hundred and fifty dollar ($250) annual fee; submit proof of CALEA accreditation every three years, submit proof of compliance for any ALEAP standard identified by the ALEAP Committee as substantially different from CALEA standards; and submit annual reports required by the ALEAP Accreditation program.

# Chapter 2

## *Program Definitions*

The following definitions are used throughout the program manual.

**AACP Accreditation Committee** – A Committee of Chiefs of Police or other executive level police officers who hold Active Membership in the AACP as well as other critical partners identified by the AACP Board of Directors and or the AMPC. appointed by the AACP Board of Directors whom make the decisions regarding the Program process, modifications and additions to Standards, and vote to award "Accredited" status to agencies which have proven compliance with standards.

**ALEAP Program Director** – An individual with overall management oversight of the program. The Arkansas Association Chiefs of Police currently contracts with an outside agency to conduct Program Coordination and ensure the integrity of the process.

**Agency Program Manager** (PM) –The person designated by the Chief of Police to administer and oversee the Accreditation program for the Candidate Agency. This may be a sworn or non-sworn member of the agency or may be a community volunteer. In some agencies the Program Manager may be the Chief of Police.

**Assessors** – Chiefs of Police, Command level officers, or Program Managers that have been trained specifically in the Review Process and have been carefully selected by the Accreditation Program to conduct Initial and Final On-Site assessments of candidate agencies.

**Board of Directors** – The governing Board of Directors of the Arkansas Association Chiefs of Police.

**Candidate Agency** – An Arkansas law enforcement agency that has contracted with the Arkansas Association Chiefs of Police to conduct an assessment of their compliance with the Arkansas Law Enforcement Accreditation Program.

**Chief Executive Officer (CEO)** – The duly authorized top administrator of the law enforcement agency and is the highest-ranking executive for the law enforcement agency who possesses ultimate command authority for the operation of the agency.

**Compliance Files** – Files created for each Standard which contains the Candidate Agency's Proofs of Compliance with that standard.

**Contract** – An agreement between a Candidate Agency and the Arkansas Association Chiefs of Police whereby the Arkansas Association Chiefs of Police provides initial and ongoing evaluation of a candidate agency's compliance with each Standard and grants "Accredited" status.

**Document Submission Form (DSF)** – A form designed to facilitate and document submission of proofs of compliance and explain the content of the proofs submitted.

**Electronic Submission Process** – The method of submitting over two thirds of the required proofs of compliance via the PMAM website and having those proofs reviewed and accepted prior to the Final Compliance Review.

**Final Compliance Review** – An onsite evaluation by a Police Chief and one or two Assessors not associated with the Candidate Agency. This Final Review Team will ensure compliance with Standard which requires visual confirmation of compliance. The Team Leader prepares a report of their findings which is submitted to the Accreditation Committee for their action.

**Initial Compliance Review** – An onsite evaluation conducted by an Assessor to ensure the agency's files are ready for visual confirmation during the Final Review process. This informal review is designed to assist Candidate Agencies achieve Recognized status with the least cost and difficulty.

**Initial Meeting** – Is a meeting between the Candidate Agency and an Assessor to start the Internal Review Process. The Facilitator conducting the Initial Meeting will conduct an inspection of the agency facility to identify any physical or equipment issues which would pose a problem in gaining recognized status.

**Internal Review Process** – The process where a Candidate Agency reviews its policies, procedures, and operations to ensure it meets the Standards. Proofs of Compliance are collected and placed in Compliance Files. Many of the Proofs may be submitted electronically to the ALEAP Program Director for acceptance.

**PMAM Human Capital Management –** is a software development company and application service provider which is contracted through AACP for the Accreditation process.

**Proofs of Compliance** – Any written or visual evidence which proves the agency is complying with the Standard(s). This can be written documentation, copies of reports, logs, and internal memorandums, interviews with agency employees, visual observation of activities, operations, facilities, equipment, or any other evidence which tends to prove the agency is in compliance with the Standard's.

**Standards** – a compilation of law enforcement practices and requirements determined by the Accreditation Committee to be the most appropriate for Arkansas Law Enforcement agencies.

# Chapter 3

*Application Process*

Agency Preparation

The Chief of an Agency which is pursuing Accreditation or Recognition is required to attend an Accreditation Program Familiarization Course offered periodically. This program is intended to ensure the Chief is fully aware of the program requirements.

Initially the Chief should designate a Program Manager (PM). The Program Manager can be any sworn or non-sworn member of the department. The more familiar the Program Manager is with departmental operations, the easier the task will be. There are several factors to consider when choosing a PM. The Chief should appoint an individual who:

Has an interest in doing the job,

Is computer literate,

Is organized and efficient,

Is capable of writing clearly and concisely,

Is capable of formulating drafts of agency policy statements,

Is capable of dealing effectively with all levels of agency management,

In some cases, such as smaller agencies, the Chief of Police may be the Program Manager.

In addition to the Chief attending the Accreditation Program Familiarization Course outlined above, the Program Manager must attend both the Accreditation Program Familiarization Course **and** the Program Manager/Facilitator Course. It is recommended that the Chief of Police also attend this training, however it is not required unless the Chief is the Program Manager. If the Chief wishes to become an Assessor, this training is required.

This training is provided at annual conferences and in regional training programs around the state. Listings of upcoming training programs as well as the Standards are maintained on the AACP website at www.arkchiefs.org under the tab "Accreditation Program."

The agency should thoroughly review the Standards to ensure they will be able to meet all the requirements. Copies of the most current Standards are provided to all Arkansas Agencies at no charge on the AACP website.

Compliance Processes Available

Currently, there is one method for attaining Accredited status; the Electronic Submission Process.

The **Electronic Submission Process** is a program which allows agencies to submit over two-thirds of their proofs of compliance electronically (those designated as "E" or "EV") and the ALEAP Program Director will "accept" them as they are submitted. This provides the agency with immediate feedback on their level of compliance and reduces the Final Compliance Review from three assessors to only two, thereby saving the department additional travel expense.

Because of the limited number that can be enrolled in the Electronic Submission Process at any one time, agencies who wish to seek admission to this process should submit their application as soon as possible after receiving training. No fees are due until being accepted into the program. Agencies can begin work on files and proofs at any time and submit them electronically after accepted into the program.

Application

Agencies that have attended the Familiarization program and have had their Program Manager attend Manager/Facilitator training may make formal application. The agency should download an ALEAP Application from the AACP website. The completed application should then be sent to the Arkansas Association of Chiefs of Police at the address listed on the bottom of the application.

Submission of Application to the Committee

The AACP will review the applications received and will submit the applications to the AACP Accreditation Committee periodically. If the agency has already completed its Internal Review Process and has all files ready for inspection, the Accreditation Committee will approve the application and direct the ALEAP Program Director to send a Final Compliance Review team to the agency.

As soon as the agency is approved for entry, the ALEAP Program Director will have a Contract mailed to the agency. The contract should be completed and signed by both the governmental entity CEO and the department CEO/Chief of Police. As soon as the Contract is completed and returned with the first year program fees, the ALEAP Program Director will contact the agency and provide submission instructions, and arrange for scheduling an initial meeting.

Agencies that are not immediately accepted into the Electronic Submission due to space limitations may still begin reviewing the standards, modifying policies, developing their files and collecting proofs of compliance. When the agency is accepted, the Internal Review process will be much shorter. In fact, some agencies may be ready for their final review immediately after being accepted if they have properly prepared.

Expect Agency Change

The Program Manager (PM) is a key change agent. The Chief should also be aware that Accreditation is a task in which the entire agency participates. Chiefs cannot simply assign this task to someone in the organization and forget about it. Because the Chief makes final policy decisions, and presumably knows more about the department than most, their active participation is essential.

Chiefs are encouraged to hold regular briefings on Accreditation status. The PM will also serve as an information liaison. The Chief may also want to schedule time at regular staff meetings for the PM to bring staff up to date on progress and address problem areas. Some agencies may find it useful to assign agency staff to conduct policy reviews in certain areas to assist the PM.

The PM should make every effort to visit other Accredited or Recognized agencies. The information gathered will prove to be invaluable.

The Standards developed by the Accreditation Committee should serve as a blueprint for agency policy. They are not, however, the only resource the agency should explore. Arkansas law enforcement agencies have an excellent reputation regarding the sharing of information, especially in the area of policy development. Law enforcement agencies that have a long-term commitment to Accreditation efforts can serve as a tremendous resource to those departments just starting the process. New PM's seeking advice should never hesitate to contact other agencies involved in the accreditation process or the Accreditation staff.

# Chapter 4

*Internal Review and Accreditation Process*

Agency Initial Meeting

Because some of the Standards require specific facility and equipment standards to be met, an Initial Meeting is conducted to ensure the agency is aware of their needs in these areas. Facility and equipment issues can be costly and agencies should know well in advance if any Standard requirements will require additional budgeting efforts. A local trained assessor usually conducts the initial visit to ensure the agency is aware of the documentation process, conduct a facility inspection, and to assist the agency in locating and developing directives if necessary.

Agencies who are proceeding under the Full Review Process can request an Initial Meeting from the ALEAP Program Director. A trained assessor will be provided to conduct an Initial Visit for these agencies.

Internal Review Process

Once an agency has been accepted into the program, they begin reviewing and developing policy and collecting documentation as proof of compliance. (There is no reason an agency cannot begin development of policies and procedures that meet the Standards prior to their official application or acceptance into the program. Submission or review can then be completed quickly once an agency is accepted into the program and the overall review process shortened significantly.)

Agencies accepted into the program are expected to complete their internal review and have their Final Review visit within two years from their date of acceptance.

File Requirements

The ALEAP Standards are available on-line at no charge. Candidate Agencies must develop an electronic filing system (PMAM or other electronic file system) for each standard and will maintain Proof of Compliance for each standard in the respective file. The details of the file construction and maintenance process are covered in Chapter 5 of this Manual.

An agency may request that a particular standard, originally designed to be submitted electronically (E or EV), be viewed on site instead if the documentation is voluminous or part of the proof cannot be submitted electronically. File copies of all submissions are maintained by the agency even if reviewed and accepted electronically.

The self-assessment will typically begin as an exercise in comparison. The Program Manager (PM) starts comparing current agency policy to the Accreditation standards. Many managers will quickly come to the conclusion that the agency is closer to compliance than anticipated. Law enforcement typically adapts to the ebb and flow of legislative changes and most agencies

quickly adopt policy that is consistent with the law. As the PM compares what must be covered for the Accreditation purposes, he/she will probably find that some fine-tuning is necessary.

<u>Compile Supportive Documentation</u>

There are several ways to prove compliance on most standards. If a standard requires a Written Directive, the agency's directive must cover all aspects or requirements of the standard. Other proofs of compliance with the directive (items that prove the agency is complying with their own directive) must be included to show full compliance with the Standard.

**Written Directives** — Usually a policy or general order of the department issued by the Chief, generally codified in the department's Operating Manual. It can also be local ordinances, state laws, civil service rules, city personnel rules or other written material that requires employee compliance.

**Written Documentation** —Examples of written documents include, but are not limited to lesson plans, memos, logbooks, emails, state law sections, or judicial policies and law. Agency policy is usually considered a written directive and will most often be the first item the PM has available to prove compliance.

**Other Documentation** — May include photographs, log sheets, agency forms, training rosters, evidence bags or any number of other items.

**Interviews** — Interviews may be conducted by the Final Review team. For example, the director of personnel for the jurisdiction may be listed as a potential interview to prove compliance with certain personnel standards. The lead dispatcher may be listed as the best source of information on dispatch responsibilities during high-speed pursuits. Listing the names of individuals does not insure that the assessment team will interview the person. However, if the team does choose to interview the suggested person, the PM has already supplied them with the name (and proper spelling) of the person to be interviewed. This makes the assessor's job easier and that makes the assessment go faster.

**Observation** — This type of proof is the easiest for the assessor and probably the least utilized. There are several standards where simply observing the action or a piece of equipment is proof that the agency is in compliance with the standard. PM's should be aware that assessors are not required to settle for a single proof of compliance unless it is overwhelming in nature. The wise PM will list proofs in at least two categories, and in some cases, all four categories. The more ways a PM can show the agency is truly doing what they say they are doing, the better. The assessors will be looking to find compliance with the first few items they look at in the folder. Having additional proofs will never hurt, but not having enough is a common shortcoming.

<u>Train Agency Personnel in Policy Changes</u>

If policy changes are necessary, it is imperative that all members of the department receive a copy and be trained in those changes. This receipt of a copy of a directive or training should always be documented and maintained by the agency. The Manager may want to have other agency personnel present the changes (including the Chief or other high ranking officer) or may simply coordinate with shift commanders. The important point is that agency personnel know

about newly adopted policy as soon as possible. Any new policy should include a training component for those it affects. Depending on the type of policy change, training may be formal classroom training, Roll Call Training, or even Roll Call Training Bulletins as long as there is documentation that the individuals received the training. The PM should remember that the assessment team may desire to interview agency rank and file on the particular issue addressed.

Electronic Submission of Proofs of Compliance

The notation next to the Standard Title (E, EV, or V) indicates which standards are approved for electronic submission. An "E" indicates the standard may be submitted electronically. An "EV" indicates the standard may be submitted electronically, but it will also be reviewed on-site by the Final Review Team. A "V" notation indicates the file will be reviewed by the On-Site Team. An agency may request an electronic submission standard be reviewed on-site due to the amount of proof required to show compliance. If electronic submission is allowed, the following process is used.

Each proof of compliance will be uploaded into PMAM or saved on electronic file chronologically.

If a standard has multiple parts or requirements, the Candidate Agency must show compliance with each part of the standard. The Proofs of Compliance may be listed as Item 1, 2, 3, etc. within the "Attach Compliance Documents" within the PMAM Assessment portal.

Proofs of Compliance for some standards will be clear and obvious. However, if the agency has any question concerning the documentation or the level of proof required, they should review the "Discussion" section of the standard for clarification. The agency's ALEAP Program Director may also be contacted for clarification of what might be required. Participation in the User's Group can also assist Program Managers in the understanding what is required for proof of compliance. The ALEAP Program Director reviews documentation from many agencies and ensures the appropriate level of proof and consistency of documentation. If the documentation is sufficient to prove compliance, the ALEAP Program Director accepts the documentation and notifies the agency of the acceptance.

Agency documentation which is submitted electronically for acceptance as proof of compliance is maintained on a private host server and is backed up biweekly. The program will automatically send an email receipt when a Proof is received. When the Proof has been accepted, an email will be sent indicating acceptance. This email should be printed and placed in the front of the agency's paper file or maintained in an electronic file if the paperless process is used.

If the documentation submitted is believed to be insufficient in proving compliance, the ALEAP Program Director shall contact the Program Manager and to discuss the issue. The ALEAP Program Director may suggest other documentation or other adjustments that would prove compliance. If the agency requests, the ALEAP Program Director will request review of the issue and submitted proofs of compliance by the Accreditation Committee for a decision.

The ALEAP Program Director may identify standards for review by the onsite Final Review even with documentation "accepted" as proof of compliance. The Final Review team will also

randomly select a number of electronically "accepted" files for onsite review to ensure proper documentation and review.

Extensions

Once the application is made the Candidate agency should have performed an internal review and be somewhat ready for the Initial Compliance Review. Along with the initial Application the first year fee is due and will be due annually on the same date. Therefore, with this understanding and the amount of new agencies and re-accreditation ALEAP will have to perform each year, extensions following the two year deadline of Recognition/Accreditation will not typically be accepted.

Initial Compliance Review

When the agency has submitted and received acceptance of all standards recommended for electronic submission and believes it has all on site review requirements completed, they should schedule their Initial Compliance Review. The Initial Compliance Review is usually conducted by a local assessor and will be coordinated through the ALEAP Program Director. The assessor will travel to the agency and conduct an initial review of the entire on-site requirements. This process assists agencies by making sure their on-site electronic files and the required proof of compliance is complete before the Final Review.

The local Assessor will review the agency's electronic files to ensure proofs of compliance are prepared for the on-site Final Review. While he/she will not review in detail or formally accept the standard, they will ensure the file is ready for review. Since this assessor is typically located close to the agency, this Initial Compliance Review may take only a couple of hours when electronic submission has been used.

Upon successful completion of the Initial Compliance Review, the agency may request the Final Review. The agency should complete any necessary changes or additions to their files identified in the Initial Compliance Review or Mock assessment prior to requesting their Final Review.

Final Compliance Review

The Final Compliance Review is requested by an agency when documentation for all standards has been completed and when the Initial Compliance Review (if required) has been conducted. Any modifications recommended by the local Assessor in the Initial Compliance Review (or Mock Assessment) should be completed prior to requesting the Final Review. The Final Review is requested through the ALEAP Program Director.

The ALEAP Program Director will select a Team Leader (TL) Assessor and other Assessor's from another area in Arkansas that has no personal connection with the Candidate Agency. The Final Review Team will travel to the agency and conduct the Final Review by visually confirming the compliance with the remaining Standards where documentation has not been previously submitted. The Team may be required to reconfirm compliance with standards where documentation has previously been submitted.

The TL will be the contact person for the team. The TL shall moderate all discussions regarding compliance issues. The PM will be expected to be available to discuss issues anytime the team is working.

If the agency has electronically submitted all standards allowed, the Final Review will normally require two assessors for two days. The team will usually arrive the night before or by noon on the first day, meet agency personnel and begin their tour and review of the agency. The team will usually conclude their review in the early afternoon on the second day. An exit interview is held with department leadership, and the team then travels back to their respective agencies that afternoon or evening.

The Final Review team will need a room or office to conduct their work. Preferably this room would need to have internet access, power, and easy access to the PM. Members of the team may want to attend shift change, ride along with officers, and/or interview members of the agency not scheduled for interview. This means the entire agency needs to be prepared for these possibilities. The team is instructed to weigh all responses to queries. The PM should arrange to attend shift briefings prior to the assessment and brief the department members on the upcoming Final Review and what to expect.

Program Managers should be aware that the on-site team may not be restricted in their access to department facilities or personnel nor are they required to use only the means recommended by the agency to determine compliance.

The team will conduct an exit interview prior to departure. The Chief of the agency will determine who should attend this exit interview. At this meeting, the agency will be advised of the final recommendation the team will give the Committee.

If the agency failed to meet standards, the Committee can grant up to a ninety (90) day extension. If there are disputed compliance issues, the agency has the option of presenting their case to the Committee.

During the on-site the Final Review team will complete all evlauators notes via the PMAM portal.

The Team Leader assigned to the Final Review Team will prepare a report of the Final Review and submit it to the ALEAP Program Director within 10 business days of the Final Review visit.

The expense of the Final Review Team, including overnight accommodations, is the responsibility of the candidate agency. Assessors will complete Travel Vouchers and will be paid by the AACP. The AACP will invoice the Candidate Agency afterward.

Committee Review and Award

Upon receipt of the final report from the Team Leader, the ALEAP Program Director will prepare a Summary Report of the agencies status and readiness for Committee Review. The ALEAP Program Director will electronically forward the summary report and the Final Review Report to the Committee Chairperson. A copy of the report will also be forwarded to the Candidate Agency.

If there are no significant concerns regarding the agency's compliance, the Committee Chairperson may request a vote. The Chairperson may request additional information from the Candidate Agency or may delay the vote until the next scheduled business meeting of the Committee.

*NOW WHAT?*

You have done it — congratulations! Now enjoy the benefits.

Accreditation/Recognition Term

Accredited/Recognized status is awarded for a three (3) year term. Requirements for maintaining Accredited status is provided in Chapter 7.

Official Accreditation/Recognition

The agency will be identified and introduced as an "Accredited" or "Recognized" agency at the Arkansas Association of Chiefs of Police Annual Conference. The agency will also be listed on the Arkansas Association of Chiefs of Police website as an Accredited or Recognized agency.

Certificate Presentation

The agency will receive a framed Certificate of Accreditation/Recognition. Additional certificates are available should an agency have more than one facility.

Local awards can be made within the agency's city at either a City Council meeting or dinner if requested. Local awards would be presented by a member of the Accreditation Committee or ALEAP Program Director depending upon scheduling. Expenses for the individual making the presentation are the responsibility of the candidate agency.

Accredited/Recognized Agency Logo

Accreditation staff will provide the Program Manager with camera-ready copies of the official "Accredited/Recognized Agency" seal. This logo may be displayed on agency letterhead, web pages or any other official manner.

# Chapter 5

*Standards Proof and Compliance*

<u>Standards</u>

The Standards are compiled in a separate document for ease of review and study. The Standards are reviewed annually and updated as necessary. New or revised Standards must be complied with as indicated in Chapter 8 of this manual.

<u>File Development (Electronic Filing system)</u>

As indicated earlier, the agency will develop an electronic filing system for each standard and will maintain Proof of Compliance with each standard in the respective file. Copies of files are maintained by the agency as long as the agency remains in the program.

If the agency is NOT utilizing PMAM, then its electronic files should be organized as follows: (An electronic file system has been created and is available for download on the www.arkchiefs.com website).

1. Each electronic folder will be labeled as Chapter 1, Chapter 2, etc
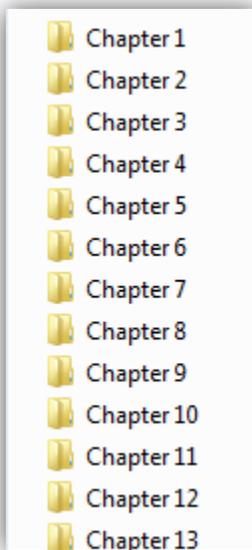
2. Within each Chapter folder, the Standard will be listed as 1.01, 1.02, etc.
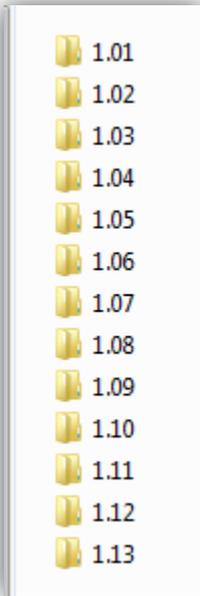


3. Within each Standard folder, the Proofs will be listed chronologically.
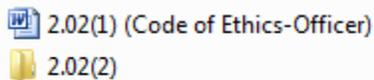


File Development (PMAM)

PMAM's Assessment portal site is free for those agencies that want to upload their proofs of compliance. This site can be accessed at: www.pmamhcm.com. It is recommended for those agencies using the PMAM site to keep the same electronic file as described above. This filing system will be needed to locate, save and upload files onto the PMAM portal.

From there the proofs will be uploaded via the Assessment tab:
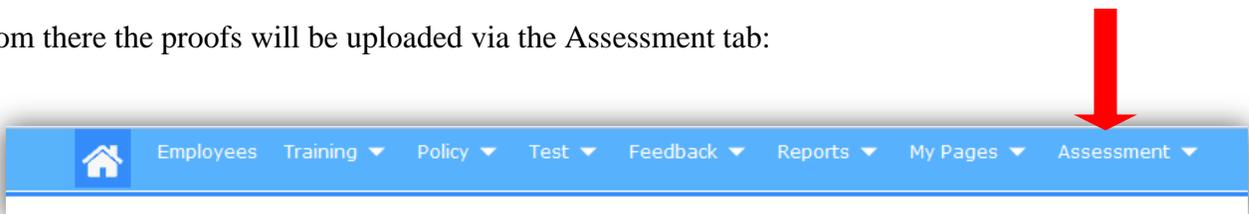


The agency will then assign itself an assessment name. The entire name of the agency must be listed out with no abbreviations, such as: Trumann Police Department, Craighead Sheriff's Office, and Arkansas State Police, etc.
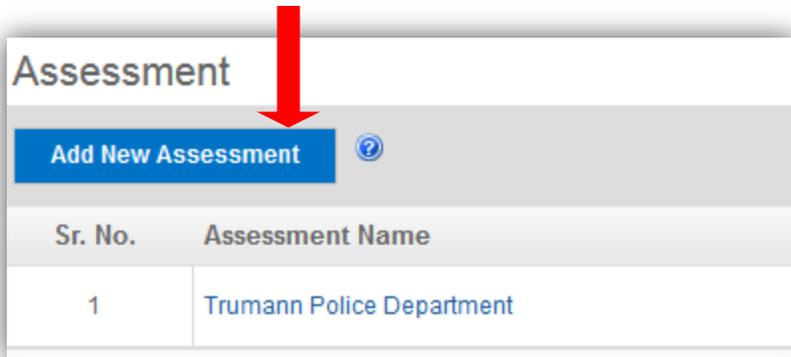
The agency will then determine and assign itself a date it will be ready for submission. If the agency has not uploaded any policies or is just beginning the process it will leave the "partial submission" box blank. This will allow the agency to upload policies, proofs, and any other documents without submitting.



Once an assessment name has been established the agency is ready to begin uploading and attaching proofs of compliance.

1. Click: *Attach*



2. Determine the type of proof. (For those agencies who have purchased PMAM the Policy and Training tab will be available along with other compliance documents.

3. Proof Title: Standard number (Proof number/letter) Description of Proof.
   Example: 1.01(1) Copy of Org chart
   Example: 1.01(3c) Photo of posted Org chart
   Example: 1.07(c) Copy of Chiefs job description

4. Sequence: Chronologically as set by Standard proofs.

5. Document Information: Description of proof.

6. Upload Document: (Located within the above mentioned electronic file folders.)
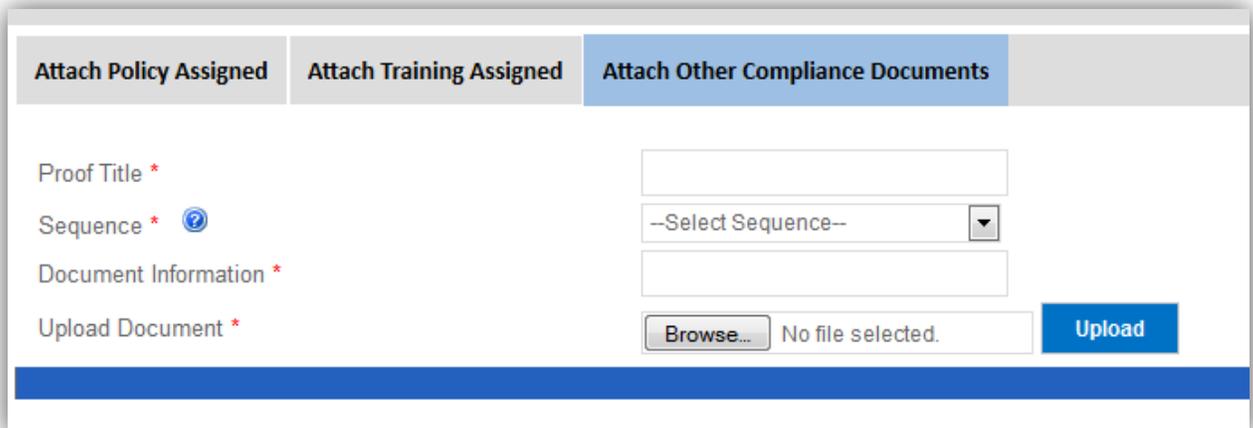


Numbering System

Standards are numbered according to their placement within the chapter and section to which they apply. For example, in the standard number **1.02**, the "1" refers to the chapter,

*Administration and Organization*, and the ".02" corresponds to the chronological order of the standard within this chapter, *Budget*.

Proofs of Compliance number(s) are located below each Proof of Compliance section. Numbers beside each Proof - (1), (2), (3) etc. - correspond to the Proof of Compliance of which each number <u>must</u> be met. Tabbed below some numbers are small letter(s) which are options to the Proof of Compliance - (a), (b), (c). One of these <u>must</u> be met (but as stated previously all of these proofs would add more weight to the Standard being met above and beyond.)

Examples on how to label a Standard Proof of Compliance within the department's electronic filing system is below:

- 1.01(1) Copy of Organizational Chart.

1.01 is the Standard number. (1) Is the first (chronological) proof that **must** be met:

- 1.02(1) Copy of directive Budget responsibility

1.02 is the Standard number. (1) Is the first (chronological) proof that **must** be met:

- 2.06(3a) Copy of IA investigation.

2.06 is the Standard number. (3a) is an option proof listed under "3".

<u>Electronic Submission Notation</u>

Immediately adjacent to the Standard number and Title is a notation indicating whether the standard is authorized for electronic submission (E), is authorized for electronic submission and on-site review (EV), or an on-site standard (V).

<u>Components of the Standards</u>

Standards Statement - The Standards are identified by its specific number, such as 1.02. The Standards statement then presents the requirements of the standard. The Standard may contain a number of separate requirements. Each of the separate requirements must be addressed in the agency's directive (policy statement) or operations and proof of compliance is needed for each requirement.

<u>Standards Containing the Word "If"</u>

Some standards are conditional or "if" standards. For instance, if the law enforcement agency does not have a Special Response Team, then the agency is not required to develop a detailed policy regarding the selection of members. The agency must, however, create a file folder and a Document Submission Form under the appropriate standard number, indicating that the agency does not have a Special Response Team.

<u>Critical Agency Functions performed for the Agency by Other Entities Must Still Meet Standards</u>

If Communications or Property and Evidence functions are performed by agencies other that the Candidate Agency, the Agency performing those functions must meet the Standards for those functions. Because these functions provide critical services to both the officers of the Candidate Agency and the citizens of the city, these standards must still be met. The Candidate Agency must provide the appropriate evidence of compliance and the Final Review Team may need to make site visits to those providing agencies during the Final Review.

If a Candidate Agency does not have a holding facility, where prisoners are booked in and kept without constant supervision, and instead uses another agency facility, they may show most of Chapter 10 as Not Applicable, IF the holding facility used is subject to the Arkansas State Jail Standards Act. Several standards within Chapter 10 will still apply to the agency.

Standards 10.01, 10.02, 10.03 and 10.22 still apply to the Candidate Agency. Standard 10.10 still applies to the Candidate Agency to the extent that the prisoner's property is cared for until released to the holding agency. Standard 10.12 still applies to the Candidate Agency to the extent that officers are instructed on how and when to obtain medical aid for a prisoner prior to release to the holding agency. The agency must also comply with 10.14 and 10.15 regarding strip or body cavity searches. If these actual searches are performed for the Candidate Agency by another agency at the Jail, the Candidate Agency must still have a policy on when and how requested and if they are to be performed prior to arrival at the jail.

If the agency used by the Candidate Agency to hold prisoners is not subject to the Arkansas State Jail Standards Act, the Candidate Agency must comply with all of Chapter 10.

Waiver from Standard Compliance

Waivers of Standards are not granted by the Committee. The Standards were designed to be minimum requirements for agencies in Arkansas. Agencies should carefully review the standards manual and resolve any questions before making application.

Proofs of Compliance

Proofs of Compliance are those methods used by the Candidate Agency to prove they comply with the Standards and their own policies. Proofs can be written documentation, copies of logs, sign-off sheets, photographs, visual inspections or interviews with agency staff. Most of the standards can have documentation submitted electronically, but some will require visual inspection during the onsite Final Review. The electronic submission process is outlined in the following chapter. This chapter addresses the content and construction of Proofs of Compliance.

Minimization of Documentation

While each part of a Standard must be proven individually and completely, the minimum number and amount of documents should be submitted which accomplishes that purpose. If submitting a part of a document such as a policy, the agency should submit a copy of at least one complete page and not cut and paste only the two sentences which apply. This allows the reviewers to see that it is part of a larger policy and the context for the statements. If a standard requires proof of training, a sample of two or three certificates or a departmental sign in sheet showing training

may be submitted as acceptable proof. The agency should be aware that the Final Review team may request to see proof of entire agency training on any issue (all members) when on site.

<u>"Highlighting-Annotation" Matching Proof within a Policy, Directive, Memo, etc.</u>

Microsoft Word allows for yellow highlighting to be used on any text. Agencies are expected to highlight the specific sections (sentences, paragraphs, pages) of a document which specifically proves compliance. If an entire document is needed to prove compliance, highlighting is unnecessary.

# Chapter 6

## *Electronic Submission*

<u>Web Based Electronic Submission and Review of Proofs of Compliance</u>

The Accreditation Program maintains a web based system of submitting and reviewing most proofs of compliance, PMAM. Training on the use of the system is provided in the Program Manager/Facilitator Training Program and the agency receives access information when it is accepted for Accreditation.

Proofs are submitted using the software package which has been customized to allow submitting agencies to review all the proofs they have submitted, to determine if they have been accepted, and to review information posted about the program.

The Accreditation Program's web based system was designed for ease of administration and to reduce the amount of on-site time necessary to observe compliance. This saves the agency money by reducing on-site expenses. While most proofs of compliance may be submitted and accepted electronically, the on-site proofs (and possibly some proofs already accepted electronically) may still require physical examination to confirm compliance. The electronic submission process, therefore, does not relieve the agency of keeping complete files on all standards.

Agencies must maintain electronic files on all standards while participating in the program. These files need to be maintained throughout the three year period in order to facilitate re-accredited.

<u>Electronic Submission Procedures</u>

Agencies submit proofs electronically by first ensuring their documents showing compliance (such as a General Order or Policy) are in electronic format and have the appropriate areas highlighted.

Each requirement of a standard must be clearly met and a different document showing proof of compliance may be necessary for each. PDF files or photographs submitted as proofs can be submitted as an additional attachment when submitting the file on-line.

<u>Viewing the Proofs Submitted</u>

Under the PMAM's Assessment tab, the Program Manager can review the proofs of compliance previously submitted by clicking on *Status*. The status of each proof indicated whether it has been Accepted, Rejected, or Request more info.

# Chapter 7

*Maintaining Accredited Status*

<u>Annual Report and Review of Selected Standards</u>

Accredited status is awarded for a three (3) year period. During this period the agency must continue to comply with the Standards.

Most program files will not need any updating during the three year period, however, agencies are required to keep up with the activities required by the Program and by their own policies. In other words, if the agency created a policy to conduct quarterly inspections of specialized equipment, then the agency must follow through with those inspections. Proof that they were done does not have to be placed in Accreditation Files, but are usually filed in the departments administrative files after review by the chief. The Agency is required to submit an Annual Report and Proofs of Compliance for four of the standards which require specific action on the part of the agency. The Annual Report Form is available for download and asks about any changes in agency policy or operation. If policy changes were made impacting critical standards, copies of those policy changes should also be submitted with the Annual Report.

The Agency Director must also sign the report indicating that the Department continues to meet or exceed all Accreditation Standards, or if it does not, what the Department is doing to come back into compliance.

Should an agency fail to submit these proofs in a timely manner, the ALEAP Program Director will query the agency. Failure to promptly submit the required proofs, annual fees, or other issues which provide proof that an agency is not complying with Standards will result in the ALEAP Program Director notifying the members of the Accreditation Committee. Action of the Committee may revoke Accredited status.

<u>Renewing Accredited Status</u>

During the last twelve months of the three year cycle, if the agency wishes to renew their Accredited status, the agency is required to provide documentation and Proofs of Compliance for all standards as they did during initial Accreditation. The re-accredited process is designed to be a Full Review process for all agencies.

Since all re-accredited agencies have been through the process at least once already, they should be familiar with the file requirements and proofs of compliance.

The Agency must apply for Re-Accreditation using the Application form found on the Program Website and a new Contract will be executed for the next three year period. The ALEAP Program Director is the primary contact for the agency during this Re-Accreditation renewal process. A Final Review Team visit and Committee Review will be conducted in the same manner as in the initial process.

Agency Re-Accreditation Process

Agencies should first begin with a review of each file. The following steps should be taken to ensure a complete review and compliance with the Standards.

1. Review the most current Standards Manual and compare the standard and proof of compliance requirements with those already in the file. Be aware that a number of standards have changed, new standards have been added, and minimum requirements for acceptance may have been modified since the last time the agency was reviewed.

2. Collect any new proofs of compliance needed. Make sure the proofs required for showing compliance are present and are within the 12 months prior to the anticipated on-site.

3. If desired, the agency may submit the following files for review through the electronic web-based submission system prior to the Final Review:

a.      Any new standard not previously reviewed,

b.      Standards 3.02; 3.04; 3.09; 6.01; 6.02; 6.10; 7.13; 7.14; and 12.08.

c.      Any standard where the agency has changed their directive since the last review.

4. Agencies are encouraged to conduct a Mock Assessment with other area Program Managers prior to the Final Review.

5. Program managers should note that many files may already contain proofs that will be required for this and subsequent reviews. For instance a Charter provision designating the creation of the department may already be present in the file. However, where training or periodic activity is required, the agency must show that these activities have occurred within the previous 12 month period. (New employees trained in required policies or provided copies, etc.)

Agencies wishing to renew their Accredited Status must schedule their Final Review at least 30 days prior to the expiration date of their Accredited status. All proofs of compliance for this review must be dated within the last 12 months of their prior Accreditation period.

# Chapter 8

## *New or Revised Standards*

Law enforcement is an ever changing process. As such, it is anticipated that modifications and additions will be made to the Standards over time. The Accreditation Committee is charged with the responsibility of keeping the standards up to date and consistent with best law enforcement practices. The Committee may consider at their periodic meetings, any change, modification, or additions to the standards. Any Arkansas Police Chief, Assessor, ALEAP Program Director, or Accredited agency may suggest or recommend modifications or additions.

When additions or modifications to the standards are made, the Committee will decide an effective date for the addition or modification. The Committee will also determine if the currently Accredited agencies must meet the new or modified standard. If currently Accredited agencies are required to meet the new or modified standard, the Committee will establish a time frame for compliance and the agencies notified. Otherwise, agencies already in Accredited status must comply with the revision or modification at their next Accreditation Renewal.

<u>Reapplication for Accredited Status after Failure to Complete Review Process or After Revocation</u>

Agencies which fail to complete the initial review process within the 24 months allowed, or who have lost their Accredited status due to any other action of the Accreditation Committee are allowed to reapply after six months from the date of the action. The Committee will again act upon the application without prejudice as in any other application action.

<u>Interpretation of Standards and Appeal</u>

The ALEAP Program Director is charged with the interpretation of Standards and the determination of sufficient proof of compliance. From time to time, different interpretations may be raised by Candidate Agencies. The final authority on the interpretation of standards and proofs of compliance is the Accreditation Committee. If an agency requests, the ALEAP Program Director will request an interpretation of a standard or proof of compliance from the Accreditation Committee.

# Chapter 9

*Fees and Expenses*

AACP Participation Required

To participate in the program, the agency Chief must be a member of the Arkansas Association of Chiefs of Police. Membership also provides numerous other benefits including legal updates, legislative representation on law enforcement issues, training, and access to Chiefs around the state to assist in solving problems.

Accreditation Program Annual Fees

Accreditation Program annual fees depend on the size of agency as listed below:

| Sworn Officers | Fee Amount |
|---|---|
| 1-10 | $250.00 |
| 11-20 | $500.00 |
| 21-50 | $750.00 |
| 51-75 | $1,000.00 |
| 76-150 | $1,500.00 |
| 151 or more | $2,000.00 |
| CALEA Agency | $250.00 |

After acceptance of the contract by the Committee, the agency will be billed for their first year's fees. The initial meeting for the Candidate will be scheduled. These annual costs will subsequently be billed each year.

The agency is also responsible for the expenses of the Assessor's visits (only one required but others can be requested by the agency) and the Final Review team. (This expense is incurred every three years.) Assessors are generally located close by and seldom result in any expense. Final Review teams are from another area of the state but overnight travel expenses are not expected to exceed $1,000 if the electronic is option is used.

Travel expenses for the Facilitator and Final Review Team are controlled by the Program Travel Expense Policy and will be reimbursed immediately upon final approval of the expense report. The Candidate Agency will subsequently be billed with a single itemized invoice after the Final Review.

# Chapter 10

*AACP Accreditation Committee*

Membership

The AACP Accreditation and Model Policy Committee (AMPC) manages the overall operation of the ALEAP Program and presents awards to qualifying agencies. The Committee is under the direct supervision of the AACP Board of Directors. The Committee oversees the model policy program; establishes and approves standards of best business practices for Arkansas Law Enforcement; develops and manages a system for accepting applications for accreditation; develops and manages a system for evaluating Candidate Agency's compliance with the established standards; and awards accredited status to agencies that have adequately proven compliance with the established standards of best business practices.

Organization

The Committee is composed of a body of members appointed by the AACP Board of Directors and or the AMPC Chair. Committee members are made up of Chiefs of Police or other executive level police officers who hold Active Membership in the AACP as well as other critical partners identified by the AACP Board of Directors and or the AMPC. Committee members serve staggered 2 year terms with appropriate members being appointed each year. Officers of the Committee include a Chairperson and Vice Chairperson. Recording duties are performed by the AACP staff or ALEAP Program Director attending the meeting. The Chair and Vice-Chair are appointed each year by the Board.

Meetings

The Committee will meet as needed to consider the business of the Committee. The Committee may take action electronically if approved by the Chairperson. Electronic voting on all issues is permitted by Committee Bylaws.

Voting

A quorum exists when at least five (5) members of the Committee are present. Decisions are made based on a simple majority of those present and voting.

When issues are submitted to the Committee members for electronic vote, a time limit shall be established by the Chairperson, and a majority of those voting within the time limit shall decide the issue. A minimum of five Committee members voting within the time period is required for a quorum and decision.

Committee members who have a personal relationship with the Candidate Agency or the Candidate Agency Chief of Police will abstain from voting on Accreditation for that agency. If a tie vote occurs, the decision is postponed until all committee members can vote. If a member

cannot vote for any reason, the tie is broken by the President of the Arkansas Police Chief's Association.

# Appendix A

***Travel Policy***

Accreditation Committee Members, ALEAP Program Directors, Facilitators and Final Review Team members will adhere to the following travel policies.

Travel

Travel to and from an agency or event under this program will be at the lowest possible expense. If travelers use personal vehicle they will be reimbursed at the current state rate for total mileage. Airfare and car rental must be approved in advance by the ALEAP Program Director.

Lodging

Every effort should be made to select lodging at the current state rate. Anticipated lodging rates at more than state rate must have prior approval of the ALEAP Program Director. Receipts for lodging must be submitted. The program will not reimburse exceptional expenses such as in room movies.

Meals

No more than $40 per day is authorized for meals. If a meal log is completed receipts are not required. The program will not pay for alcoholic beverages. The actual meal expense including tip, not to exceed the daily total should be reported on the log.

Other Expenses

Other necessary and required expenses may be reimbursed with prior approval of the ALEAP Program Director.

Travel Expense Invoice

Upon completion of travel, a Travel Expense Invoice should be prepared and submitted to the AACP Office along with all required receipts within five business days of return from travel. AACP staff will then pay the assessor and bill the Candidate Agency for the travel amounts.