CALEA®
THE GOLD STANDARD IN PUBLIC SAFETY

Accreditation - Where do I begin?

Randy Scott
Southwest Regional Program Manager

Laura Saunders
Mid-Atlantic Regional Program Manger

Objectives

- Pre-Enrollment and Enrollment
- Resources
  - Importance of Networking
- Initial Self-Assessment Planning
  - Timeline
  - Prioritize Standards
  - Written Directives
  - Proofs of Compliance
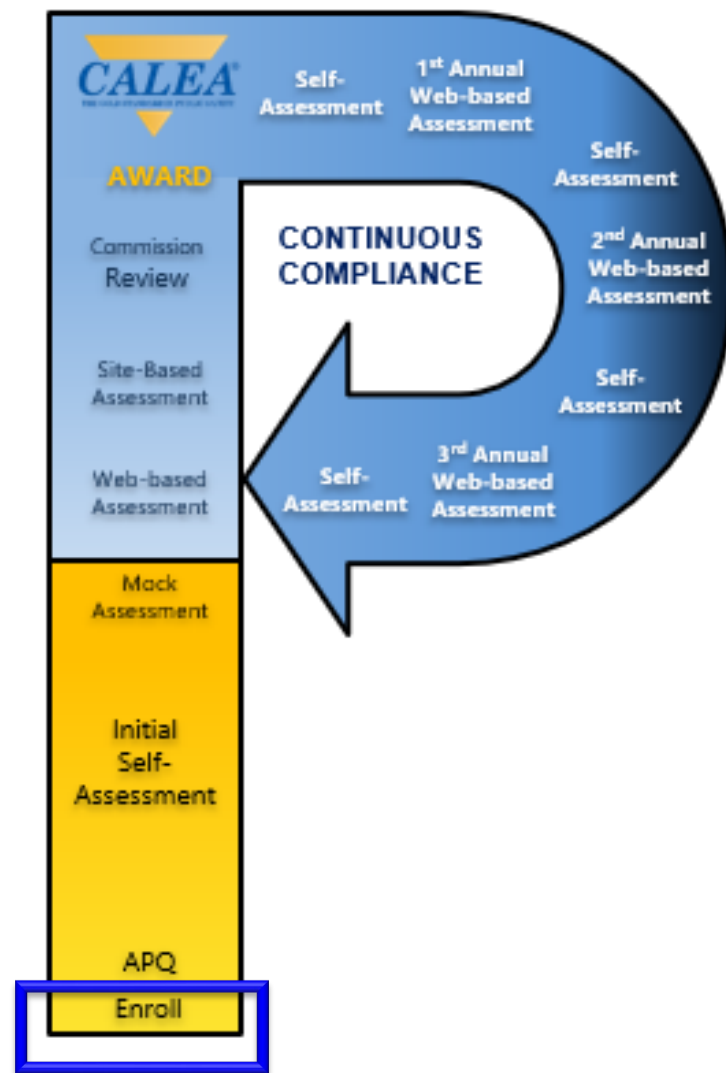
Pre-Conference Training

- Conference Introduction
- Introduction to CALEA
- 5 Step Process Getting Started and Self Assessment recorded training session
- PowerDMS recorded sessions
  - Getting Started with your PowerDMS Standards and Assessment
  - Managing Your PowerDMS Assessment

Pre-Conference Training

- Written Directives and Proofs of Compliance
- Managing Files for Compliance
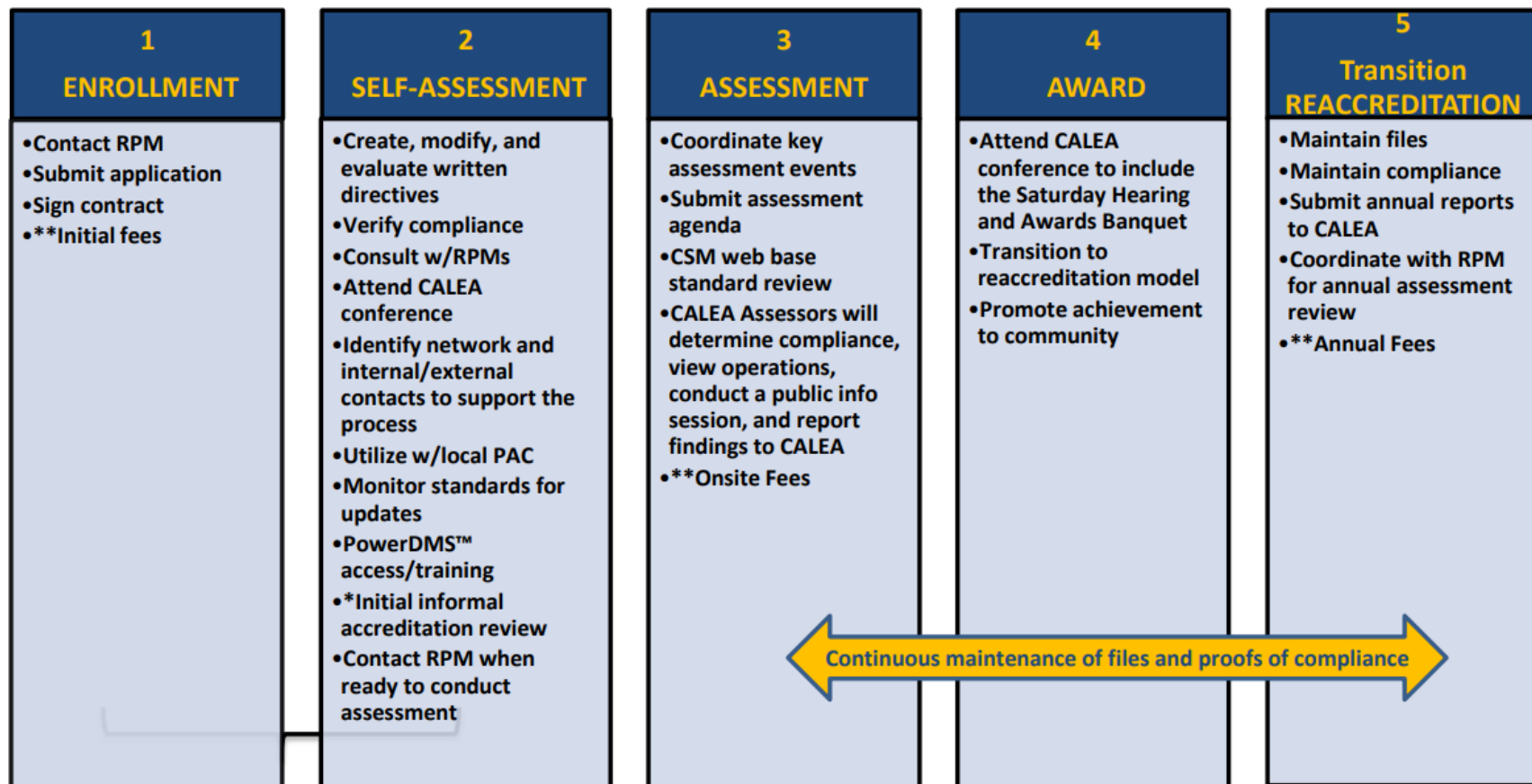- Time Sensitive Standards

CALEA Process

Pre-Enrollment & Enrollment

ACCREDITATION PROCESS

1 ENROLLMENT	2 SELF-ASSESSMENT	3 ASSESSMENT	4 AWARD	5 Transition REACCREDITATION
•Contact RPM •Submit application •Sign contract •**Initial fees	•Create, modify, and evaluate written directives •Verify compliance •Consult w/RPMs •Attend CALEA conference •Identify network and internal/external contacts to support the process •Utilize w/local PAC •Monitor standards for updates •PowerDMS™ access/training •*Initial informal accreditation review •Contact RPM when ready to conduct assessment	•Coordinate key assessment events •Submit assessment agenda •CSM web base standard review •CALEA Assessors will determine compliance, view operations, conduct a public info session, and report findings to CALEA •**Onsite Fees	•Attend CALEA conference to include the Saturday Hearing and Awards Banquet •Transition to reaccreditation model •Promote achievement to community	•Maintain files •Maintain compliance •Submit annual reports to CALEA •Coordinate with RPM for annual assessment review •**Annual Fees

Continuous maintenance of files and proofs of compliance

Pre-Enrollment Steps
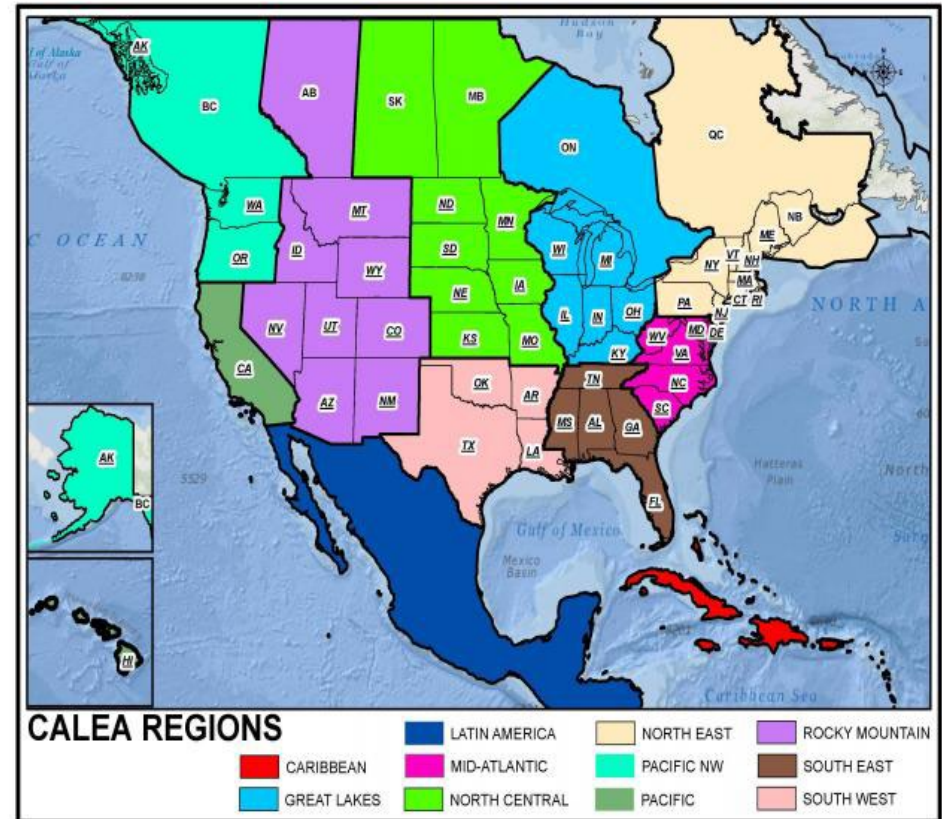
- Contact the <u>Regional Program Manager</u>

1

ENROLLMENT

- Contact RPM
- Submit application
- Sign contract
- **Initial fees

Contact the Regional Program Manager:
REGIONAL PROGRAM MANAGERS

- Randy Scott: Southwest
- Paul MacMillan: Northeast
- Tim Baysinger: North Central
- Dan Shaw: Great Lakes
- Vince Dauro: Southeast & Caribbean
- Mark Mosier: Pacific/Pacific Northwest, Rocky Mountain
- Laura Saunders: Mid-Atlantic
- Marco Sotomayor: Mexico/Latin America

CALEA REGIONS

LATIN AMERICA	NORTH EAST	ROCKY MOUNTAIN
CARIBBEAN	MID-ATLANTIC	PACIFIC NW	SOUTH EAST
GREAT LAKES	NORTH CENTRAL	PACIFIC	SOUTH WEST

https://www.calea.org/interactive-regional-map

Pre-Enrollment Steps

- Review information on the CALEA website
  - Benefits of Accreditation
  - Perspectives on Accreditation

- Obtain temporary access to the standards

- *Optional* - Purchase the standards as a non-client
  - Manuals and Publications Subscription | CALEA® | The Commission on Accreditation for Law Enforcement Agencies, Inc.

Pre-Enrollment Steps

🔵 Access to standards

Fw: Temporary Access to Standards Manuals

Maya Mitchell
To ⬚⬚⬚⬚⬚⬚⬚⬚⬚⬚⬚⬚⬚
Cc ✅ Laura Saunders

↩ Reply   ↩ Reply All   → Forward

Tue 1/25/2022 11:

ⓘ If there are problems with how this message is displayed, click here to view it in a web browser.

Hello,

All CALEA manuals are electronic publications, maintained by PowerDMS™. Please use the link below for access. The system will prompt you to create a new password to login. If you are not prompted to reset your password, use Welcome10 as your password.

Your username is ⬚⬚⬚⬚. Your access will expire **February 25, 2022.**

To access go to: https://powerdms.com/ui/Login.aspx?SiteID=STRIAL

Once you login go to the "Find Anything" search field and open Standards Manuals. You will generate a list of manuals to access.

Sincerely,

Maya

Maya Mitchell | Communications and Organizational Development Manager
mmitchell@calea.org | (703) 352-4225 ext. 20 | Direct (703) 468-4594
M-Th 7:00am-5:30pm EST | 13575 Heathcote Blvd, Suite 320, Gainesville, VA 20155

CALEA
THE GOLD STANDARD IN PUBLIC SAFETY

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Pre-Enrollment Steps

- Review the Standards

1.1 Law Enforcement Agency Role   Print

1.1.1 (LE1)
(M M M M) (LE1) Oath of Office

1.1.2 (LE1)
(M M M M) (LE1) Code of Ethics

1.1.3
(O O O O) Agency's Participation in Criminal Justice Diversion Programs
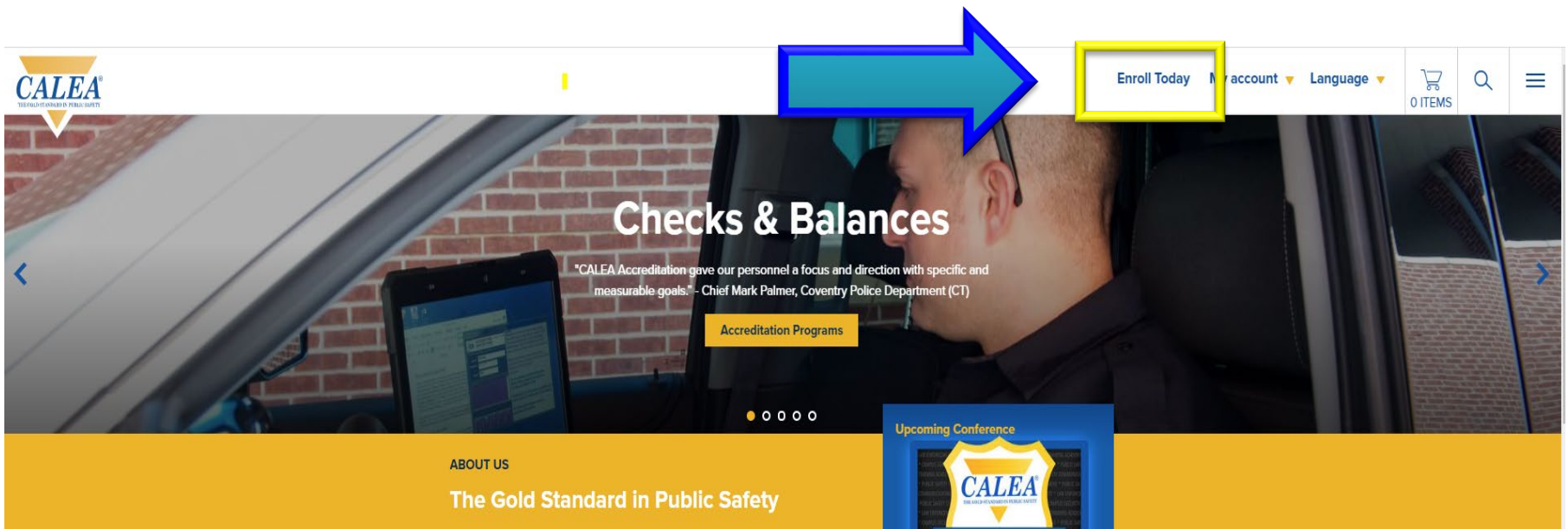
1.1.4
(M M M M) Consular Notification

Pre-Enrollment Steps

- Review the Standards

1.1 Law Enforcement Agency Role   Print

1.1.1 (LE1)
(M M M M) (LE1) Oath of Office

1.1.2 (LE1)
(M M M M) (LE1) Code of Ethics

1.1.3
(O O O O) Agency's Participation in Criminal Justice Diversion Programs

1.1.4
(M M M M) Consular Notification

Pre-Enrollment Steps

- Contact RPM ✓
- Review the Standards ✓
- Download Enrollment Documentation

1
ENROLLMENT

- Contact RPM
- Submit application
- Sign contract
- **Initial fees
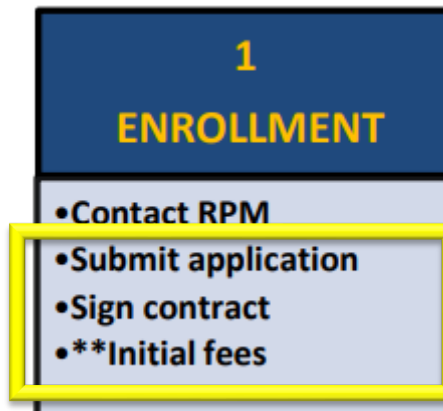
When to enroll?

- Download Enrollment documentation

https://www.calea.org/enrollment

Enrollment Steps

- Download Enrollment Documents
  - Generate Account (http://www.calea.org/enrollment)
  - Download Forms
  - Print
  - Sign
  - Return
- Questions?
  - **Call the RPM**

You Are Enrolled!

🔵 Welcome

CALEA Accreditation Program

calea@calea.org
To ⚪ ▢▢▢▢y@cit▢ ▢f▢re▢▢.org
Cc ⚪ ▢p▢▢▢▢ay▢▢city ▢g ▢▢▢.org; ✅ Laura Saunders

↩ Reply   ↩ Reply All   → Forward

Fri 1/21/2022 8:34 AM

ℹ You forwarded this message on 1/21/2022 11:12 AM.
Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

📄 ▢▢▢▢▢ ▢▢ Welcome Package.pdf
1 MB

Chief ▢▢▢▢,

The ▢▢▢▢ Police Department has been determined eligible to participate in the CALEA® Law Enforcement Accreditation Program and is now considered an agency in self-assessment. Attached to this message you will find the associated agreement, setting forth mutual obligations pertaining to the engagement, and it includes the invoice for accreditation fees.

CALEA Regional Program Manager Laura Saunders has been assigned to support your agency with efforts to comply with all applicable standards and to assist with any matters related to the respective program. Your regional program manager can be reached at (703) 353-4225 extension or email at lsaunders@calea.org. As a part of our services, you will receive access to the *"Clients Only Area"* of the CALEA website, where you will have access to special resources and other tools to promote your success. Your regional program manager can assist with access to this portal.

You will also be receiving an electronic message directly from PowerDMS™ within the next few business days with instructions for accessing the assessment module tool and the CALEA electronic publications. This is also included in the broader services provided by our organization and is a primary resource the accreditation process.

We look forward to working with your agency and stand ready to be of assistance. CALEA is the Gold Standard for Public Safety Agencies and we are proud to have your agency as a part of this elite group of dedicated professionals.

Post Enrollment

- Self-Assessment

2
SELF-ASSESSMENT

- Create, modify, and evaluate written directives
- Verify compliance
- Consult w/RPMs
- Attend CALEA conference
- Identify network and internal/external contacts to support the process
- Utilize w/local PAC
- Monitor standards for updates
- PowerDMS™ access/training
- *Initial informal accreditation review
- Contact RPM when ready to conduct assessment

Self-Assessment

- Agency Profile Questionnaire or APQ

APQ
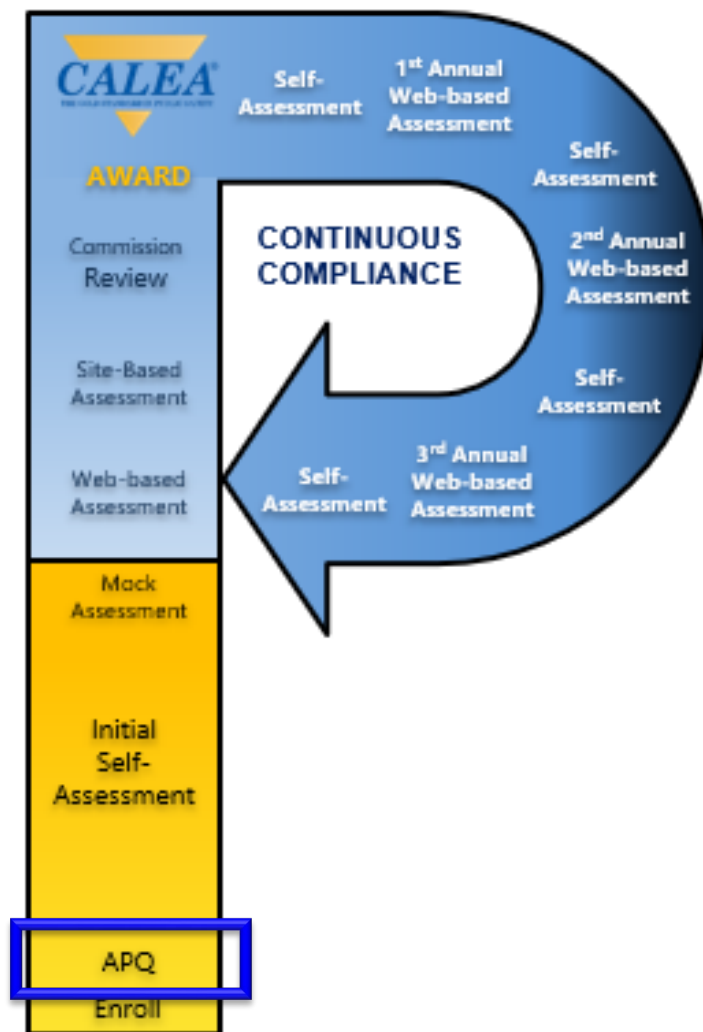
🔵 Complete & Return APQ to your RPM

Standards Related Questions

1.0   Organization, Management and Administration (Chapters 1-2)

Does your agency:

Have comprehensive written descriptions of the organization's
structure and functions?   (**1.1.1, 1.1.2**)   Yes ☐ No ☐

Have annual goals and objectives, an administrative reporting
program and a risk management program?   (**1.2.1, 1.2.3, 1.2.5, 1.2.6**)   Yes ☐ No ☐

Assign personnel according to workload assessments?   (**1.3.2**)   Yes ☐ No ☐

Conduct its own internal investigations (Organizational Integrity)?   (**1.4**)   Yes ☐ No ☐

Have a comprehensive written directive system?   (**2.1.5, 2.1.6**)   Yes ☐ No ☐

Have developed organizational values?   (**2.2.1, 2.2.2**)   Yes ☐ No ☐

Have written agreements for communications services?   (**2.3.3**)   Yes ☐ No ☐

Manage its own budget?   (**2.4**)   Yes ☐ No ☐

Formally evaluate agency performance?   (**2.5**)   Yes ☐ No ☐

Involve itself with the community and public education?   (**2.6**)   Yes ☐ No ☐
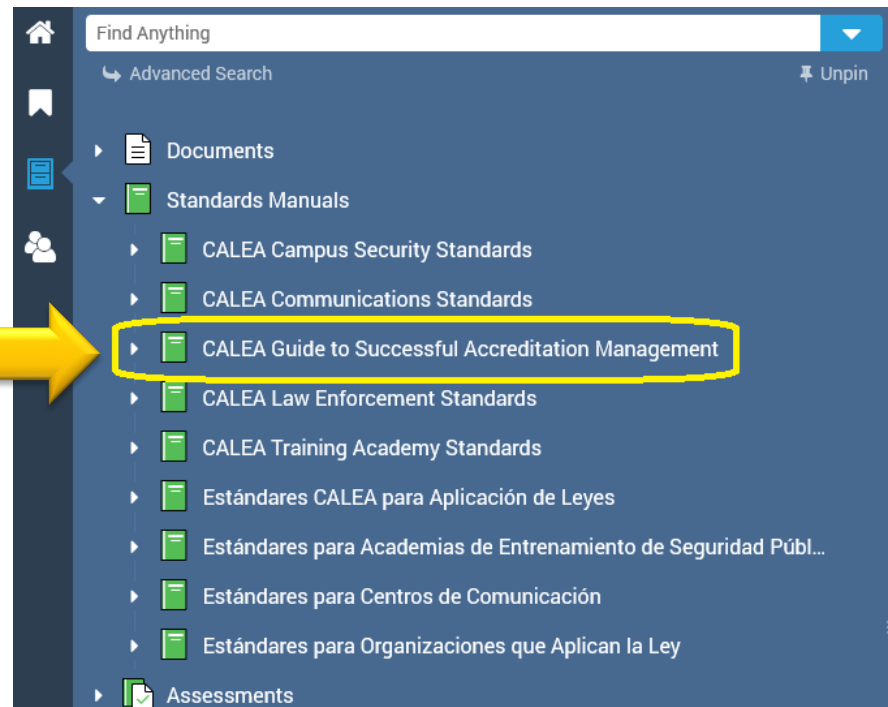
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Getting Started Call

- Complete Agency Profile Questionnaire
  - Return APQ to the RPM ✓

- Schedule "Getting Started" call
  - Determine level of accreditation
  - Determine time-frame

PowerDMS

- Access to PowerDMS – subscribe to standards manuals (*manual for your process and the CGSAM manual*) – create electronic assessment
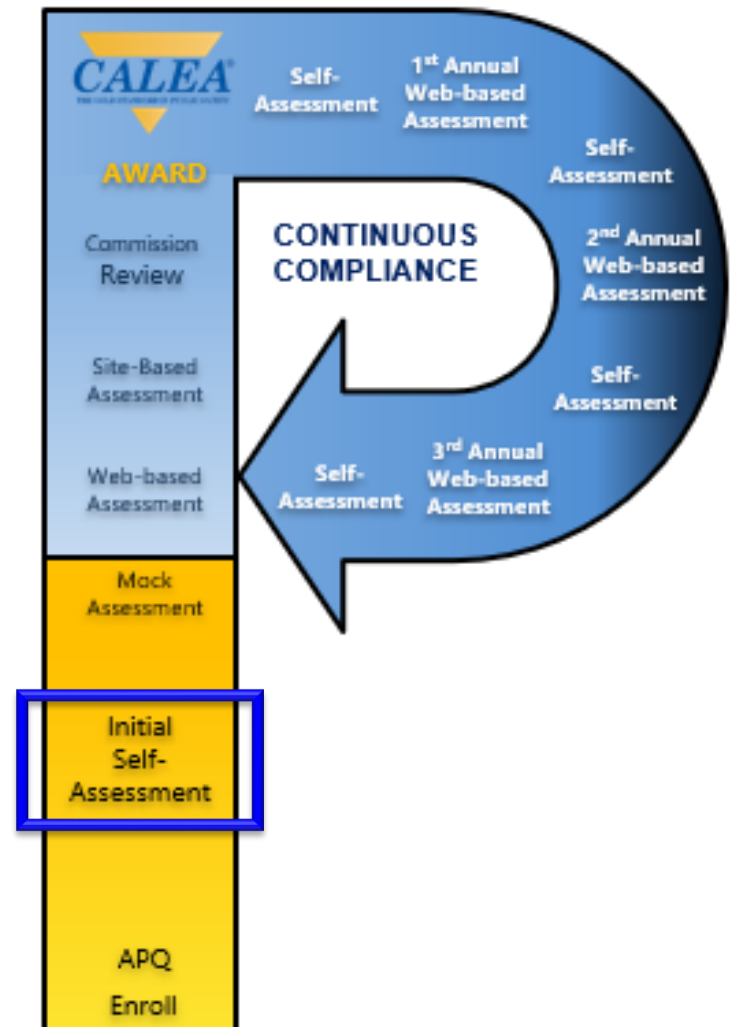
- Begin process

- Best Practices

Self-Assessment

- Initial Self-Assessment

Self-Assessment

2
SELF-ASSESSMENT

- Create, modify, and evaluate written directives
- Verify compliance
- Consult w/RPMs ✓
- Attend CALEA conference ✓
- Identify network and internal/external contacts to support the process
- Utilize w/local PAC
- Monitor standards for updates
- PowerDMS™ access/training ✓
- *Initial informal accreditation review
- Contact RPM when ready to conduct assessment

In addition to PowerDMS resources, view the recorded training sessions and attend conference training as well as visit SupportLIVE for one-on-one time
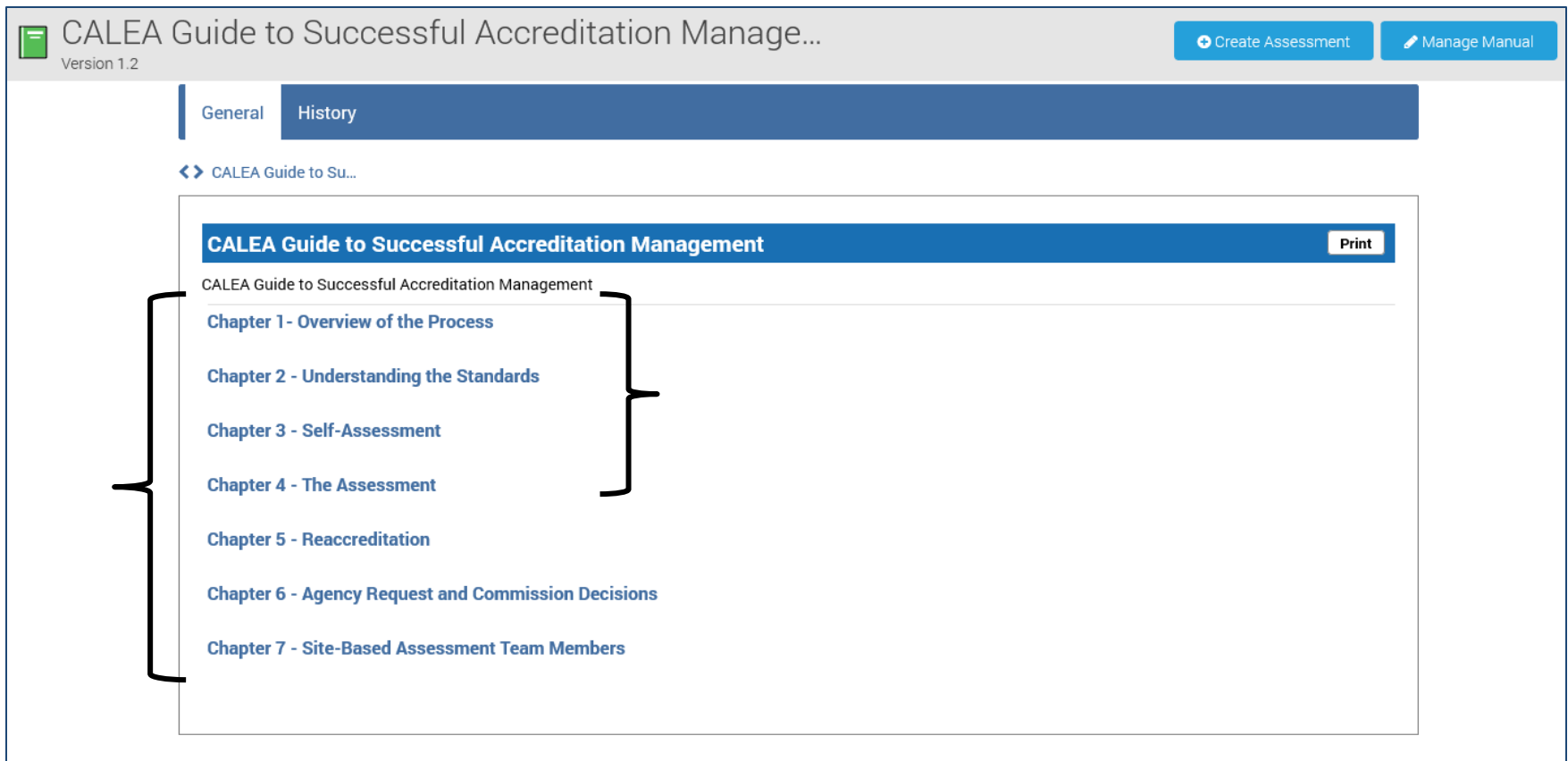
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Resources

- Regional Program Manager
- CALEA's Guide to Successful Accreditation Management (CGSAM)
- CALEA Website (*create account*)
- Accreditation Support Networks (PAC's)
- Chapter Introductions
- Appendices
- Training Opportunities – Online and Conference
- PowerDMS Resources (Help: Success Community & University)
- Resources Webinar

Resources/CGSAM

- CALEA's Guide to Successful Accreditation Management (CGSAM)

CALEA Website

- Obtain your Client ID from your RPM

Login to access all resources

Networking

🔵 Client Database

List Agencies

Or use this system to search the CALEA database for agency lists and totals sorted by Country, State/Province, Program Type, Agency Type, and Agency Size.

Please note: Country and State/Province are required fields; you must make a selection for each. The remaining fields are optional.

Search by Location

Country: (required)

US	⌄

State/Province: (required)

ALL	⌄

Narrow your search by Program, Agency Type or Agency Size *(Optional Filters)*

Program Type:

Optional Filter	⌄

Optional Filter
Training Academy Accreditation
Law Enforcement Accreditation
Campus Security
Communications Accreditation

Optional Filter - Full Time Authorized Count	⌄

Submit   **Reset**

Networking

[Client Database](#)

Agency Type: State Depts of Law Enforcement: 3		
Agency Name	**Location**	**Staff Size**
North Carolina Alcohol Law Enforcement *	Garner, NC	122
North Carolina DMV License and Theft Bureau *	Raleigh, NC	250
North Carolina State Bureau of Investigation *	Raleigh, NC	445
Agency Type: State Highway Patrol: 1		
Agency Name	**Location**	**Staff Size**
North Carolina State Highway Department of Public Safety *	Raleigh, NC	2125
Program Type: Communications Accreditation: 9		
Agency Type: Municipal Law Enforcement Agency: 5		
Agency Name	**Location**	**Staff Size**
Burlington Police Department *	Burlington, NC	
Fayetteville Police Department *	Fayetteville, NC	65
Jacksonville Police Department *	Jacksonville, NC	15
Shelby Police Department *	Shelby, NC	11
Winston-Salem Police Department *	Winston-Salem, NC	49

Top

Networking

- Knowledge and experience is shared

Accreditation Support Networks (PAC's)

Public Safety Communications Accreditation Support Network (PSCASN)

Chair
Ms. Kathy Strickland
kathy.strickland@cobbcounty.org
Agency
Cobb County 911 Emergency Department
140 N. Marietta Parkway
Marietta, GA 30060
United States

http://www.pscasn.net
Telephone
(770) 528-3829
CALEA Representative
Mark S. Mosier

Illinois Police Accreditation Coalition (IPAC)

Chair
Stephanie Erb
SErb@cityofmchenry.org
Agency
McHenry Police Department
333 South Green Street
McHenry, IL 60050
United States

http://www.i-pac.org/
Telephone
(815) 3637842
CALEA Representative
Daniel R Shaw

Northern New England Police Accreditation Coalition (NNEPAC)

Chair
Mr. Mark Collopy
mark.collopy@unh.edu
Agency
University of New Hampshire Police Department
18 Waterworks Road
Durham, NH 03824
United States

http://www.nnepac.com
Telephone
(603) 862-9808
CALEA Representative
Paul MacMillan

Campus Security Accreditation Coalition (CSAC)

Public Safety Communications Accreditation Support Network (PSCASN)

Latin American Police Accreditation Coalition (LAPAC)

Midwest Police Accreditation Coalition (MW-PAC)

Canadian Police Accreditation Coalition (CANPAC)

Support Networks

Example of messaging:

Support Networks

Chapter Introductions: Each chapter begins with an introduction that provides important guidance regarding the subject area, its applicability or any related standards.

Chapter 71 Introduction | Print

This chapter is applicable to situations when detainees are transported to a law enforcement facility, other than a holding facility, jail, or corrections facility, but under the control of the agency, for the purpose of processing, testing, or temporary detention. The length of time a detainee is held in temporary detention is measured in hours, not days and does not involve overnight housing or the provision of meals except in extenuating circumstances. Detainees should be kept in temporary detention areas no longer than necessary and should be monitored closely, particularly when they have not been through an intake and medical screening process as required in jails and holding facilities.

For the purpose of this chapter, temporary detention requires confinement within a facility and is not referring to detention of persons in public places. A contact between a law enforcement officer and a person does not become temporary detention nor does the person become a detainee until such time as the person is in the custody of agency personnel.

This chapter does not apply to the following:

- Detainees in a holding facility.
- Detainees in a courthouse or courtroom.
- Detainees in a jail.
- Detainees in rooms designed for interviews.

Appendices

- Appendices

Appendices

- Appendix A = Glossary

Analysis   Print

A systematic, structured process for dissecting an event into its basic parts to identify any patterns or trends. Analysis should reveal patterns or trends that could be predictive or could indicate program effectiveness, training needs, equipment upgrade needs and/or policy modification needs.

Outcomes   Print

Events, occurrences, or conditions that represent some aspect of the quality or results of a program or service. Examples include average call-processing times, complaint-resolution rates, and error rate changes.

Appendices

- Appendix B = Guiding Principals

Appendix B	Print

Guiding Principles for Agencies and Assessors

1.0 Functions Performed or Delegated

2.0 Standards

3.0 Written Directives

4.0 Assessors

5.0 General Premise

Appendices

- ## Appendix B = Guiding Principals

1.0 Functions Performed or Delegated   Print

1.1 An agency that delegates functions to other agencies is held accountable for compliance with applicable standards governing those functions.

For example, even though an agency delegates its communication functions to a regional center and its recruit training to a neighboring law enforcement agency, the agency remains responsible for the functions and, therefore, for compliance with the standards related to those functions.

1.2 An agency for which functions are preformed on its behalf by another entity is held accountable to verify compliance with applicable standards governing those functions.

An agency remains accountable for the performance of functions that the Commission determines are applicable for an agency of its size and type, even if the function is performed by another organization. This applies to functions delegated (as in 1.1) and functions that are traditionally performed by another entity. This includes recruitment, selection, and promotion, which may be the responsibility of a civil service board or central personnel agency.

Ordinarily, this matter is resolved before the self-assessment, but agencies should be aware of this guiding principle.

1.4 If an agency performs functions governed by standards designated as "not applicable," the agency must comply with those standards.

This guideline applies in those cases where, because of an agency's size, the standard is "not applicable." If the agency performs the function, regardless of whether the standard is designated as not applicable, the manner in which the agency performs the function must not be in conflict with the relevant standard.

1.5 If an agency occasionally performs a function governed by standards, its operations in this regard must not be in violation of the applicable standards.

"Occasional" performance might include: (1) a nonfull-service sheriff's office which, several times a month, backs up the local law enforcement agency at times when the law enforcement agency may be shorthanded; (2) a small law enforcement agency which, a few Friday nights a month, must hold prisoners for several hours in a holding area within the agency because the lock-up normally used by the agency is full; or (3) a large agency that normally utilizes a regional law enforcement training center holds in-service training programs several times a year because the demand for retraining increases due to problems which are unique to that agency. Agencies that occasionally perform functions should ensure that its operations do not violate the standards. Commission staff should be consulted by the self-assessing agency if questions arise in this regard.

Appendices

- Appendix B = Guiding Principals

2.0 Standards   Print

2.1 An agency can exceed the requirement of a standard.

2.1 An agency can exceed the requirement of a standard.

A semiannual reporting requirement may be done quarterly. This is but one example of how an agency's performance can exceed the standard.

2.3 Unless otherwise indicated, standards related to personnel matters apply to all agency employees.

Some standards indicate applicability to sworn or to civilian personnel. Where that differentiation is not made, the standard applies to all agency personnel.

2.4 Personnel shall be assessed according to the glossary terms.

There is no need for an agency to change its definitions or titles for positions, employees, or other individuals affiliated with the agency. The standards will be assessed using the glossary terms found in this manual in comparison to the agency's actual utilization of the personnel being assessed. The glossary terms define four types of agency personnel: (1) sworn, (2) reserve, (3) auxiliary, and (4) civilian. Sworn and reserve personnel have the authority to make a full custody arrest while auxiliaries and civilians do not. The distinction between sworn and civilian personnel is predicated on the authority to make a full-custody arrest as defined in this manual, not on the basis of taking an oath of office. There may be employees, auxiliaries, or other persons affiliated with the agency who are required to take an oath, wear a uniform, and perform quasi-law enforcement duties such as detention or transportation of detainees, but they are not considered sworn or reserve law enforcement officers unless their authority includes the authority to complete a full-custody arrest.

Appendices

- Appendix B = Guiding Principals

2.0 Standards

Print

2.1 An agency can exceed the requirement of a standard.

A semiannual reporting requirement may be done quarterly. This is but one example of how an agency's performance can exceed the standard.

2.2 A standard may be not applicable if the agency does not have responsibility for the functions addressed by the standard, providing the Commission concurs.

2.3 Unless otherwise indicated, standards related to personnel matters apply to all agency employees.

Some standards indicate applicability to sworn or to civilian personnel. Where that differentiation is not made, the standard applies to all agency personnel.

2.4 Personnel shall be assessed according to the glossary terms.

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- Apply to more than only sworn

1.1.2 (LE1) `Print`

(M M M M) (LE1) Code of Ethics

A written directive requires all personnel to abide by a code or canon of ethics adopted by the agency and mandates that ethics training be conducted for all personnel, at a minimum, biennially.

41.2.7 (LE1) `Print`

(M M M M) (LE1) Mental Health Issues

The agency has a written directive regarding the interaction of agency personnel with persons suspected of suffering from mental health issues that addresses:

Appendices

- Appendix E – Time sensitive

Appendix E

Time Sensitive Standards

Time Sensitive Activities By Standard Order

Time Sensitive Activities By Time Period

Chapter 1

Standard	Action	Description	Level	Frequency
1.1.2	Review	Organizational Chart Updated	M M M	Annual
1.2.1.d	Review	Risk Management Program	M M M	Annual
1.2.5	Update	Component goals and objectives	M M M	Annual
1.2.6	Document	Progress toward goals and objectives	O O O	Annual
1.2.9	Document	Review and revision of multiyear plan	NA O M	Annual
1.3.2	Assessment	Personnel workload assessment	NA O O	Triennial
1.3.3	Review	Specialized assignments	O O O	Annual
1.4.11	Summary	Internal investigations to public	O O O	Annual

Appendices

Appendix G

Appendix G

File Construction and Documentation

This appendix is to assist agencies with constructing appropriate accreditation files, determining the best proofs of compliance, and determining "how many" proofs of compliance are needed in the accreditation file. Information on the process of file review can be found within the CALEA Guide for Successful Accreditation Management.

Proof of Compliance Considerations

In developing proofs of compliance, it is important to ensure:

- The directives, documentation, interviews, or observations are relevant and appropriate to the standard being addressed.

- Information does not conflict with another standard statement or agency directive.

- The proof or proofs presented show continued compliance throughout the four-year assessment period or for the time period the standard is applicable to the agency.

INITIAL ACCREDITATION

For the initial accreditation assessment the accreditation manager should emphasize, through documentation, those "systems" the agency uses for organization, management, operations, and support services. This will allow the Compliance Service Member (CSM) and assessors to make objective judgments concerning the relative effectiveness of agency systems or how well the agency is likely to perform in certain areas, particularly when agency procedures may be relatively new.

Agencies are encouraged to include documentation of periodic reports such as plans, analyses, formal reports, etc., based on the data available. It is understood by CSM or assessors that the information contained in the report may be abbreviated to reflect only the relevant proof of compliance. If the complete document is requested by the CSM or assessor the agency will need to provide the resource.

Appendices

Appendix G

Reaccreditation

The accreditation manager preparing files for a reaccreditation assessment should focus on the "performance" of the agency. This is particularly true for any standards identified during the previous assessment as a compliance issue. Preparation of appropriate documentation for all time sensitive reports or activities is the key to a successful reaccreditation assessment. Accreditation Managers are provided guidelines for file maintenance minimums in the Standards Manual (see File Construction). The chart states minimums only and assumes that the proofs offered in the file adequately address the intent of the standard or standard bullet being reviewed. As with all proofs of compliance, the key to adequate compliance rests with the quality of the information offered for review.

It is understood the nature and volume of some proofs of compliance prohibits placing them in the actual file. The accreditation manager may choose to provide larger documents as an electronic resource and/or in a resource area during the assessment. Documents of a sensitive nature may need redaction and remain in a secured work area during the site-based assessment.

File Construction

In addition to any required directives, the following three types of proofs should be given consideration when determining compliance:

- Written documentation

Compliance is most appropriately shown by placing one proof for each year in the file, assuming each satisfies the agency's directive requirements and the requirements of the standard. Written documentation may take a variety of forms, including relevant memos, rosters, schedules, training records, newspaper articles, annual reports, etc. In providing documentation it is important to ensure: that the documentation is relevant and appropriate to the standard, that it does not conflict with another standard statement, and that the documentation provided shows continued compliance throughout the assessment period or for the time period that the standard was applicable to the agency.

Appendices

- Appendix G

Guidelines for Proving Compliance with Time Sensitive Standards

Regarding file maintenance issues, there are two types of standards:

- Time Sensitive

- Non-Time Sensitive

Time Sensitive Standards require an activity or action to occur during a specified time interval or upon incident. These standards require a event such as review, analysis, report, evaluation, training, and other activities listed in the standard or agency directive. The following recommendations are offered as guidelines for determining minimum adequate time sensitive proofs of compliance:

If the required documentation is not available, there should be a memo to file explaining the absence of documentation.

Appendices

- Appendix G

Frequency Required by Directive And/Or CALEA Standard	Recommended Minimum in File for Each Year	Recommended Total Minimum in File
Per Incident	1	4
Daily	1	4
Monthly	2	8
Quarterly	2	8
Semi-Annual	1	4
Annual	1	4
Biennial	1	2*
Every 4 Years	1*	1 or 2

*May not be applicable if not enough time has elapsed. (Example: new standard or bullet of a new standard and time required is not sufficient for reporting)

Training

- [Conferences](#)
- Recorded Training
- [Online Training](#)
- [Accreditation Support Networks](#)
- [RPM's](#)

EDUCATION

Accreditation Manager Online Training

Webinars

Tools & Tutorials

Manual Subscriptions

PowerDMS Resources

PowerDMS Resources
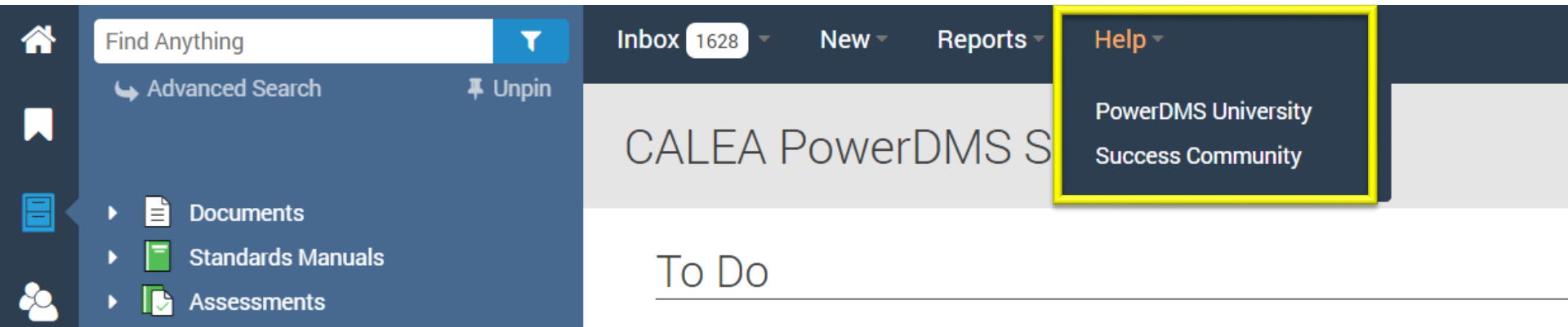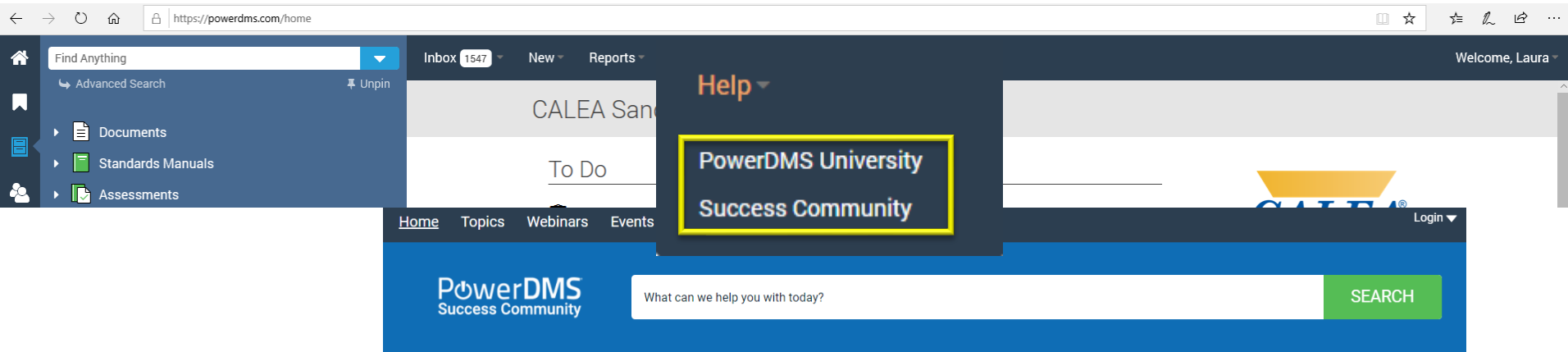
Help on the top toolbar:

University includes self-paced instructional resources

Success Community includes:
- Getting Started
- Articles
- Videos
- Webinars
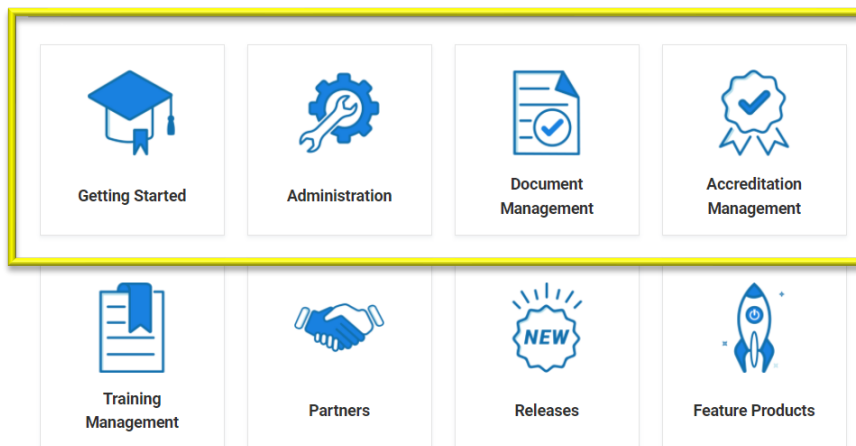
Resources/PowerDMS

PowerDMS Resources: Help button on top toolbar

CEO AND ACCREDITATION MANAGER ROLES

- What does it take to be a successful CEO in the accreditation process?

Accreditation Information

- ## 33.5.3 (LE1) Law Enforcement

- ## 5.2.9 Communications

- ## 4.7.4 Training Academy

- ## 18.5.3 (CS1) Campus Security

Commentary
The intent of this standard is twofold. First, it ensures that all employees are familiar with accreditation and what it entails during the self-assessment process. Second, familiarizing new employees with the process will provide a historical perspective and emphasize the importance of accreditation to the organization. It is recommended that familiarization include the history and background of accreditation and the agency's involvement in the process, the accreditation process, the goals and objectives of accreditation, and the advantages of accreditation and its impact on the agency. Familiarization may be achieved by such means as classroom instruction, newsletter, memo, and periodic attendance by command staff at conferences of the Commission on Accreditation for Law Enforcement Agencies, Inc.

- What are the key qualities that make a good accreditation manager?
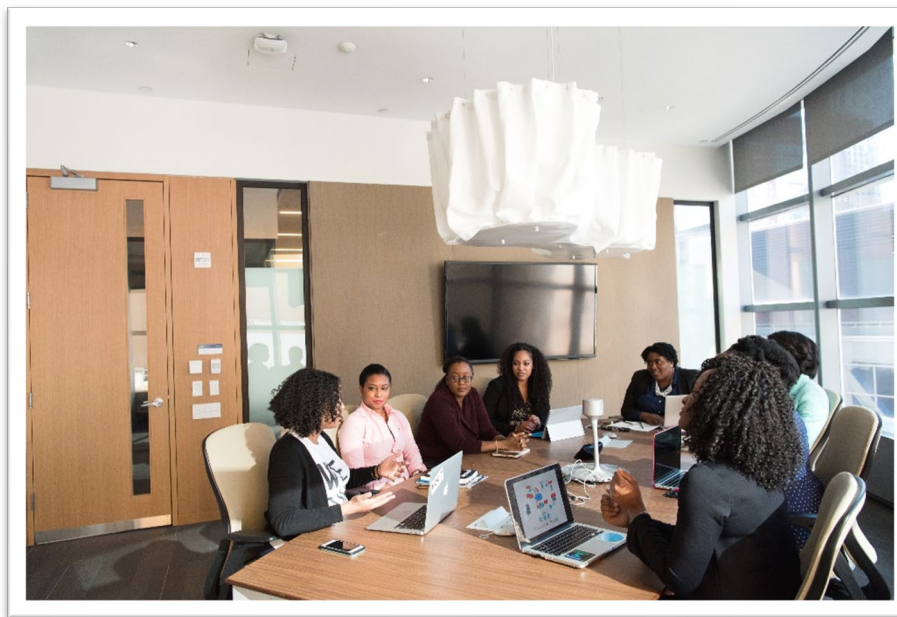
*A sample **Accreditation Manager** [Job Description](#) can be found in CGSAM Chapter 3, Role of Agency Personnel*

Self-Assessment

🔵 Self-Assessment

2

SELF-ASSESSMENT

- Create, modify, and evaluate written directives
- Verify compliance
- Consult w/RPMs ✓
- Attend CALEA conference ✓
- Identify network and internal/external contacts to support the process ✓
- Utilize w/local PAC ✓
- Monitor standards for updates
- PowerDMS™ access/training ✓
- *Initial informal accreditation review
- Contact RPM when ready to conduct assessment

Self-Assessment Purpose

- Self Assessment has 4 basic purposes

  - Achieve compliance with applicable standards

  - Establish proofs of compliance for those standards

  - To prepare for the assessment review

  - Institutionalize the processes and best practices for the current operations and future growth of the agency

There is always room for improvement throughout each year of the process as you review those best practices and operations and how they apply to your organization

Available Resources

- Staffing
  - Accreditation Manager
  - Accreditation "Team"
- **Agency Support**
  - Understand importance
  - Prompt Responses
- Technology
  - Computer & Internet
  - Scanner

Management Model

- Accreditation Manager Only

- Accreditation Manager with Assistance

- Accreditation Team ✓

Management Model

PowerDMS Assessment Tool
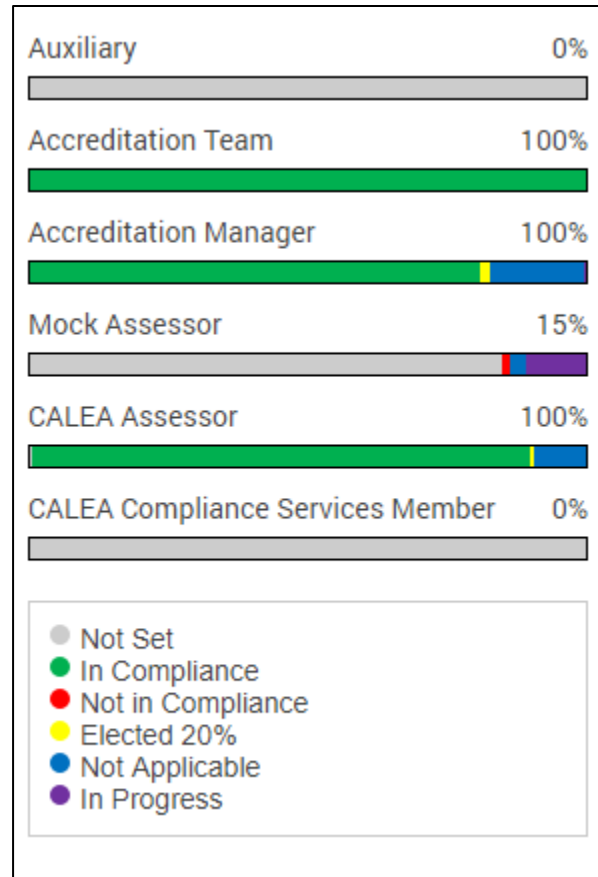
Self-Assessment Plan

- Establish your Timeline
  - CALEA Agreement Timeframes
  - CALEA Assessment Cycles
  - Agency or "Community Calendar"
  - Available Resources
  - Backward Scheduling

Backward Scheduling

- Site-based Assessment
  - Written Request by CEO Required
  - Recommended to make request 6 months in advance
  - *Reaccreditation – dates already assigned*
- Remote Web-based Assessment
  - **40 days prior** to Site-based Assessment
  - *Reaccreditation – dates already assigned*
- Pre-Assessment Review/Mock Assessment
  - Recommend AT LEAST 6 months prior to Initial Site-based Assessment *(consider longer)*
  - *Should be before CEO's Request for Site-Based*
  - *Reaccreditation – prior to web-based assessments?*

Site-based Assessment Cycles

Site-Based Assessment time-frame	Conference
October 1 – mid-December	**Spring Conference**
February 1 – mid-April	**Summer Conference**
June 1 – mid-August	**Fall Conference**

Initial Timeline

January 2022
- Enrollment
- Begin Self-assessment
- Prepare policies to align with the standards & applicable proofs of compliance

At least 6 months and up to 12 months prior to SBA

Request assessment
Use form letter submitted to Regional Program Manager

Early 2024

Use qualified reviewers for Mock*
Conduct Follow up after mock

2024

Web based assessment (WBA)
40 days prior to site-based assessment

Fall 2024

Site-based Assessment (SBA)
2 assessors visit agency

Self-Assessment	Request Assessment	Pre-assessment Review (Mock)	Web-based assessment	Site-based Assessment

Contract runs for 36 months.

Extensions are available

Expires January 2025

Contract extension possible

Request assessment by submitting form letter to RPM. This will generate invoice for Initial Assessment ($5500). Once payment received, assessment will be scheduled

*Mock not mandatory but highly recommended

CIMRS access available prior to Web Based Assessment

Site-Based team not scheduled until **successful** WBA

Agency would attend the **Spring 2025** Conference for Commission Review for Award

Self-Assessment Plan

Facility

Equipment

Directive

In Compliance

- **Review the Standards**
  - Will you need to plan for facility updates?
  - Equipment updates?
  - Do you have written directives in place?
  - Can you document compliance with those written directives?

Self Assessment Plan

- **Written Directive System**
  - General Orders
  - Rules and Regulations
  - Policy and Procedure
  - Standard Operating Procedures
  - Standard Operating Guidelines
  - Personnel Orders
  - Special Orders
  - Memoranda

Refer to CGSAM Chapter 3, Written Directive System

Written Directive (WD)

Read each standard carefully to determine if a specific **type** of written directive is required. Does the standard require a policy, plan, or procedure? Determining the proper category of directive is important to obtaining adequate documentation.

A written directive can be a policy, plan, procedure, rule, order, training directive, or any other document that is binding upon agency personnel.

Continually review written directives throughout your accreditation process or self assessment process each year.

CGSAM, Chapter 3: Written Directive Systems

Self Assessment Plan

- Written Directives sources
  - [CALEA Policy Resource Library](#) is just one resource for some **sample** written directives (*LE1 examples*)
  - Accreditation Support Networks
  - Google Search
  - IACP resources
  - Internal Subject Matter Experts
  - Other?

As with any sample policy – it is your responsibility to ensure it is in compliance with the standard

Written Directive System

- Review the CALEA Standard and compare to your current written directives
  - Read each standard and bullet <u>literally</u>
  - Use CALEA Definitions – Appendix A
  - Review "Guiding Principles" – Appendix B

Agency Size

● Position represents size

Law Enforcement Standards

There are four agency-size categories: A (1-24 personnel), B (25-74), C (75-299), and D (300 or more). (ABCD) Levels of compliance may be the same for all agency sizes, e.g., (M M M M), or may vary according to size, e.g., (O O M M).

Public Safety Communications Standards

There are three agency-size categories: A (1-15 personnel), B (16-75), and C (76+). (A B C) Levels of compliance may be the same for all agency sizes, e.g., (M M M), or may vary according to size, e.g., (N/A O M).

Public Safety Training Academy Standards

There is one size category for all agencies, (M) or (O).

Campus Security Standards

There are four agency-size categories: A (1-24 personnel), B (25-74), C (75-299), and D (300 or more). (A B C D). Levels of compliance may be the same for all agency sizes, e.g., (M M M M), or may vary according to size, e.g., (N/A O O M).

45.1.1
(O O M M) Crime Prevention Activities

45.1.
(O O   O) Organizing Community Groups

45.1.3
(O O O O) Prevention Input

Standards

- Basic Structure
  - Standard Number
  - Program Level (if applicable) LE1/CS1
  - Agency Size / Compliance Level (A B C D) (A B C)
    - M = Mandatory: Must be in compliance unless "NA" by function
    - O = Other than Mandatory or 20% **(Advanced Accreditation, Comm and TA only)** Agencies must be in compliance with at least 80% of the **applicable** Other than Mandatory standards
    - NA = Not applicable by size or function
  - Standard Title
  - Standard Language
  - Standard Commentary

Standards

- ## Standard Number

1.2.1

(M M M M) (LE1) Legal Authority Defined

A written directive defines the legally mandated authority and responsibilities vested in all categories of sworn agency personnel. If the agency has more than one category of sworn personnel, each shall be identified.

Commentary

The written directive should define and elaborate on the scope and limits of law enforcement authority as it pertains to the enforcement of laws, statutes, ordinances, and arrests. Some agencies have more than one category of sworn agency personnel. For example, warden, fire marshal, commercial vehicle enforcement officer, or other special class of officer having sworn duties, but limited arrest authority. Standards in this manual applicable to sworn officers are applicable to each category. Generally, sworn status includes the authority to make a full custody arrest. (M M M M) (LE1)

Standards

- Program Level (LE1/CS1)
- Agency Size is position /Level of Compliance is M

(A B C D) (LE1)

1.2.1

(M M M M) (LE1) Legal Authority Defined

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Commentary

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Bulk set non LE1 standards to NA: https://success.powerdms.com/success/s/article/CALEA-Tier-1-Accreditation-Setup?language=en_US

Standards

- ## Standard Title

1.2.1

(M M M M) (LE1) Legal Authority Defined

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Commentary

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Standards

- Standard Language: This portion is binding on the agency

6.1.1 (CS1)

(M M M M) (CS1) Organizational Structure Available to Personnel

A written directive describes the agency's organizational structure and functions, is depicted graphically on an organizational chart that is reviewed and updated as needed, and is available to all personnel.

Commentary

The agency may determine its own organizational structure. In organizing/reorganizing, the agency should consider applicable standards within the various chapters of the standards manual. The intent of this standard is to provide a written description of the agency's organization. The agency's organizational chart should coincide with this description. Agencies may make the chart available to the public at their discretion.

Functional responsibility may be assigned to an individual position or a component specifically created and staffed. Functional responsibility for several activities could also be assigned to a single position or component, as needed. (M M M M) (CS1)

Standards

- Commentary Language: This is guidance and provides insight into the intent or interpretation of the Commission

4.1.1 (LE1)

(M M M M) (LE1) Use of Reasonable Force

A written directive states personnel will only use reasonable force to accomplish lawful objectives and apply de-escalation techniques when possible.

Commentary

Consideration should be given to the agency's position on the application of firearms with regard to shooting at or from moving vehicles. Specific circumstances should be identified within policy where such action is permissible and prohibited.

It is understood personnel not having sworn status may be prohibited from using force in situations other than self-defense. Therefore, policy and training should recognize these differences.

05/03/19 The Standards Review and Interpretation Committee (SRIC) determined that the use of the word "objectively" in an agency's directive concerning "reasonable force" will not hinder the compliance with the standard, nor will the absence of the word. (M M M M) (LE1)

Standards

- Written Directive Standard

6.1.2

(M M M) FCC Requirements

A written directive requires that the agency's radio operations be conducted in accordance with Federal Communications Commission (FCC) procedures and requirements or other appropriate legal requirements.

Commentary

None. (M M M)

The accreditation manager should supply a sufficient number of proofs to ensure the tasks or activities described in a written directive are actually completed and the methods used are effective for the agency. Appendix G in the standards manual must be used to determine the number of proofs in each file.

Standards

🔵 Policy/Plan/Procedure

22.4.1 (LE1)

(M M M M) (LE1) Grievance Procedures

A written directive establishes a grievance procedure, which includes the following:

a. identification of matters that are grievable;

b. levels in the agency or government to which the grievance may be filed and/or appealed;

c. time limitations for filing or appealing the grievance to the next level;

d. type of information to be submitted when filing a grievance;

e. establishment of procedural steps and time limitations at each level in responding to grievances or appeals; and

f. criteria for employee representation.

Commentary

Since a formal grievance procedure is designed to resolve differences between the employee and employer, it follows logically that such procedures be written in clear, concise terms. If grievance procedures are part of a collective bargaining agreement, such agreement would meet the definition of "written directive" as used in this standard. This standard applies to all agency employees. If more than one procedure exists, each should be described.

Standards

Bulleted/Activity Standard (Multiple Requirements)

5.1.1

(M) Recruitment Plan

The agency has a recruitment plan which outlines steps to achieve the goal of an ethnic, racial, and gender workforce composition in approximate proportion to the makeup of the agency's service community. The plan shall include the following elements:

a. statement of objectives;

b. plan of action designed to achieve the objectives identified in bullet (a);

c. annual analysis to evaluate the progress toward objectives;

d. identify employees, inside and outside the agency, responsible for the plan administration; and

e. revise/reissue the plan as needed.

*Agencies are to provide proof of compliance for **each bullet each year per Appendix G**. A single document may be used if that document satisfies compliance and/or various examples may be used. **For Initial Accreditation, the emphasis is to have all required written directive and proofs for the most recent 12 months. Previous years proof documentation as determined.***

Standards

- Time Sensitive

84.1.6 (LE1)

(M M M M) (LE1) Inspections and Reports

In order to maintain a high degree of evidentiary integrity over agency controlled property and evidence, the following documented inspections, inventory, and audits shall be completed:

a. an inspection to determine adherence to procedures used for the control of property and evidence is conducted semi-annually by the person responsible for the property and evidence control function or his/her designee;

b. an audit of property and evidence in compliance with Appendix I occurs whenever the property and evidence custodian is assigned to and/or transferred from the position and is conducted jointly by the newly designated property and evidence custodian and a designee of the CEO to ensure that records are correct and properly annotated;

c. an annual audit of property and evidence in compliance with Appendix K is conducted by a person not routinely or directly connected with control of property and evidence as directed by the agency's chief executive officer; and

d. unannounced inspections of property and evidence storage areas are conducted, as directed by the agency's chief executive officer, at least once a year.

Time Sensitive standards are often a priority as they require Proofs at certain time intervals (See Appendix E)

Written Directives and Proofs

- Annual = every 12 months
- Semi Annual – every 6 months
- Biennial – every 24 months
- Quarterly – every 3 months

4.3.3 (LE1) — Print

(M M M M) (LE1) Annual/Biennial Pr...

At least annually all agency personnel authorized to carry weapons are required to receive in-service training on the agency's use of force policies and demonstrate proficiency with all approved lethal weapons and electronic controlled weapons that the employee is authorized to use. In-service training for other less lethal weapons and weaponless control techniques shall occur at least biennially. In addition:

a. proficiency training must be monitored by a certified weapons or tactics instructor;

b. training and proficiency must be documented; and

c. the agency must have procedures for remedial training for those employees who are unable to qualify with an authorized weapon prior to resuming official duties.

> This needs to occur generally every 12 months and cannot occur in Feb one year and Sept the next as that would be 18 months apart and considered not in compliance.

81.3.2 (LE1) — Print

(M M M M) (LE1) Alternate Power Source

The agency has an alternate source of electrical power ... sufficient to ensure continued operation of emergency communication equipment in the event of the failure of the primary power source. A documented inspection and test of the alternate power source is completed at least monthly, or in conformance with manufacturer recommendations, and tested or operated under full load at least once a year.

> This can occur anytime in a 12 month period

- Conditional

21.3.7 (CS1)

(M M M M) (CS1) In-Car and/or Body-Worn Audio/Video

If the agency employs in-car and/or body-worn cameras, a written directive includes:

  a. policy statement on purpose and organization philosophy regarding use;

  b. requirements and restrictions for activation and deactivation of the device;

  c. criminal and administrative use of camera captured data;

  d. data storage and retention requirements;

  e. equipment maintenance and inspection procedures;

  f. training requirements for users and supervisors; and

  g. requirements for documented review of camera captured data including frequency and quantity.

Conditional Standards

A number of standards contain a conditional requirement. A conditional standard statement begins with if. For example:
If the agency has hostage negotiators, a written directive specifies criteria for selection to those positions.
This standard would not be applicable if the agency does not have hostage negotiators.

Standards

- NOT Conditional

4.3.8

(M M M) Psychological Fitness Examination

An emotional stability and psychological fitness examination of each candidate is conducted and assessed by a qualified professional prior to appointment to probationary status.

Commentary

None. (M M M)

- Additional Tips

4.1.2 (LE1)

(M M M M) (LE1) Use of Deadly Force

A written directive states that an officer may use deadly force only when the officer reasonably believes that the action is in defense of any human life in imminent danger of death or serious bodily injury. Definitions of conditional terms, such as those for reasonable belief, serious physical injury, or similarly used terms that are used to qualify the directive, shall be included.

Commentary

The intent of this standard is to establish a policy on the use of deadly force that provides officers with guidance in the use of force in life-and-death situations and to prevent loss of life to include that of the officer. (M M M M) (LE1)

Language underlined is hyper-linked to Appendix A / Glossary

Reasonable Belief

The facts or circumstances the officer knows, or should know, are such as to cause an ordinary and prudent person to act or think in a similar way under similar circumstances.

Standards

- Additional Tips

When a standard is deleted, the number(s) are deleted.

35.1 Administration

35.1.1
(M M M M) Performance Evaluation System

35.1.2 (LE1)
(M M M M) (LE1) Annual Evaluation

35.1.4
(M M M M) Evaluation Criteria

35.1.5
(M M M M) Evaluation Components

35.1.6
(M M M M) Unsatisfactory Performance

35.1.7
(M M M M) Employee Consultation

35.1.8
(O O O O) Rater Evaluation

35.1.9 (LE1)
(M M M M) (LE1) Personnel Early Intervention System

Standard 35.1.3 has been deleted.

Written Directives

- Review the CALEA Standard
- Review Current Directive/Practice
    - Do you have a directive?
        - Agency Directives
        - Statutes, Ordinance
    - Is it accurate?
    - Reflect actual practice?

Written Directives

- Review the CALEA Standard   [Desired State]
- Review Current Directive/Practice [Current State]
- Compare Directive to Standard   Does it Comply with Standard?
  - What needs to be modified?
  - Can it be improved / clarified?
  - How do you document compliance?

- Proofs of Compliance: Demonstrate you follow your written directives *(CGSAM Chapter 3 Accreditation Electronic Documentation)*

Proof of Compliance (Proof)

Since most standards are written directive oriented, the directives typically require a myriad of activities and tasks that lend themselves to other written documentation to prove compliance. This includes log entries, reports, audits, inspections, or other documental activity.

Proofs of Compliance are best prepared by attaching a copy of the document(s) to the file so an individual can see the entire directive and consider the highlighted text in context with other text in the document. When attaching a document, video file, PowerPoint, etc. as a proof of compliance, it is suggested that agencies title the document with the prefix of "Proof" to indicate it is a proof of compliance and then the year it represents. Subsequent highlights should also be titled in a similar manner; however, for bulleted standards, the bullet letter being address should be listed first (i.e. "A.Proof.2013", "B.WD.2014", etc.).

The accreditation manager should supply a sufficient number of proofs to ensure the tasks or activities described in a written directive are actually completed and the methods used are effective for the agency. Appendix G in the standards manual must be used to determine the number of proofs in each file.

- Collect documents to verify compliance
  - Incident / CAD Reports
  - Completed Forms *(can redact if needed)*
  - Analysis, Reviews, Audits, Evaluations, Reports
  - Photographs
  - Video & Audio Files
  - Screen shots
  - Other….

- Proof collection periods
  - Initial Self Assessment
    - Enrollment Date (already in compliance)
    - Effective Date (upon coming into compliance)
  - Re-accreditation Self Assessment
    - Annually as required by the standard and per Appendix G
    - Continued Compliance – 4 year history

Self Assessment

- Review the CALEA Standard   [Desired State]
- Review Current Directive/Practice [Current State]
- Compare Directive to Standard
- Does it Comply with Standard?
  - What needs to be modified?
  - Can it be improved / clarified?
  - How do you document compliance?
  - **Assign a Priority**

Identify Priority Standards

1. Standards that affect the written directive system
2. Standards that affect organizational structure
3. Standards for which an extended amount of time may be required for compliance
4. Standards requiring internal agency change
5. Time Sensitive Standards [Appendix E]
6. Human Resource Standards
7. Property And Evidence
8. Standards With Data Tables

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

- It takes a TEAM

Self-Assessment Planning

For the best results, the agency should have a written plan which includes setting short- and long-term goals in steps or stages; conducting a comprehensive review of the applicable standards; ranking the self-assessment activities according to importance; and identifying any associated costs.

Prioritizing Self-Assessment Activities
The best way for the accreditation manager to identify priority issues is to have agency personnel who are responsible for the material in specific chapters, review those chapters and seek their input concerning the agency's ability to comply with those standards. Begin listing any problem areas that may require calls to CALEA for clarification. Note tasks that may require additional time, effort, or staff meetings to complete. Include these items in the self-assessment plan and begin to prioritize them according to their complexity or estimated length of correction time.

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

- Internal and EXTERNAL
- Consider functions Performed / Delegated

Meetings should be scheduled early in self-assessment with organizational entities outside the agency that will be involved in the process, such as city or county personnel boards, civil service commissions, or regional communications or training centers. Directors of these organizations need information early in the process to help achieve compliance with applicable standards.

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

- Improvements?

Areas identified by some agencies for improvement during the early stages of self-assessment have included: holding facilities, immediate playback capabilities in the communications center, documentation in recruitment, selection and promotion, and training curriculum for reserve officers when compared to full-time sworn officers. These areas obviously require time to correct and should receive priority in planning.

Establishment of specific priorities is an individual decision, varying from agency to agency. Experience has shown, however, that the following considerations should be given to any written self-assessment plan:

Refer to CGSAM Chapter 3, Self Assessment Planning

Budgetary Considerations

- Budgetary Considerations
  - Facility changes in central records, property/evidence, communications, holding facility
  - Equipment such as body armor, play back recording capabilities or other agency needs
  - Recruitment activities or brochures
  - New software programs, if determined necessary
  - Increased training requirements

Refer to CGSAM Chapter 3 Self Assessment, Budgetary Considerations

Budgetary Considerations

- Facility
  - Security
  - Storage
  - Backup
  - Minimum conditions
  - Fire Alarm System
  - Panic Alarms
  - Audio/visual observation
  - Other?

Budgetary Considerations

- Facility

Chapter 81	Communications	
81.3.1 (LE1)	Communications Center Security	Security measures for the communications center are in place
81.3.2 (LE1)	Alterate Power Source	The agency has an alternate source of electrical power that is sufficient to ensure continued operation of emergency communication equipment in the event of the failure of the primary power source. A documented inspection and test of the alternate power source is completed at least monthly, or in conformance with manufacturer recommendations, and tested or operated under full load at least once a year.
Chapter 82	Central Records	
82.1.1 (LE1)	Privacy and Security	A written directive establishes privacy and security precautions for the agency's central records
82.1.6 (LE1)	Computer File Backup and Storage	The agency has a process for maintaining security of central records computer systems,
Chapter 84 Intro	Property and Evidence Control	The property and evidence control function should provide for the security and control of seized, recovered, evidentiary, abandoned, lost, or found property in the custody of the agency. This is critically important in supporting investigations, in helping to guarantee successful prosecution at criminal/civil trials, in facilitating the timely return of property to its rightful owners, and in establishing the agency's reputation as an honest, reputable agency worthy of the public's confidence and trust. It is critical that a law enforcement agency's property and evidence control function develop and maintain strict measures for the receipt, handling, security, and disposition of property.
84.1.1 (LE1)	Evidence/Property Control System	A written directive establishes procedures for receiving all in-custody and evidentiary property obtained by employees into agency control,
84.1.2 (LE1)	Storage and Security	All in-custody and evidentiary property is stored within designated, secure areas with access limited to authorized personnel.
84.1.3 (LE1)	Temporary Security	Secure facilities are provided for storage of in-custody or evidentiary property during periods when the property room is closed.
84.1.4 (LE1)	Security of Controlled Substances, Weapons for Training	A written directive establishes procedures to ensure security and accountability for controlled substances, weapons, or explosives used for investigative or training purposes.

From: [redacted] <[redacted]@[redacted].gov>
Sent: Thursday, February 3, 2022 9:17 AM
To: Laura Saunders <lsaunders@calea.org>
Subject: CALEA Question

Good Morning Laura,

I have a question that I am not sure you can answer or refer me to someone that I can ask. The question is in regards to Standard 84.1.2 Storage and Security. Two rooms inside our property and evidence storage rooms have drop down ceilings. I'm concerned that the assessors will not consider these rooms secure with this type of ceiling. Guns and drugs are sometimes left in one of these rooms during processing before being stored in a room with a solid ceiling.

Any referral sources would be greatly appreciated.

Identify Priority Standards

- Standards that affect agency WD system

- Standards that affect the agency's written directive system:
  - Most standards are oriented to a written directive.
  - A deficiency in the written directive system will have a negative effect on the entire self-assessment process.
  - A decision to update, revise, or implement a completely new directive system should be made early in self-assessment regardless of the type of agency (Law Enforcement, Public Safety Communications, Public Safety Training Academy, or Campus Security).

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

🔵 Standards that affect organizational structure

- Standards that affect organizational structure:
    - Written directives should describe each component of the agency accurately.
    - Functional responsibilities described in the directives should not conflict with other information.
    - If the agency is planning a significant re-organization this can have a major effect on specific standards, particularly with regard to functional responsibilities. For example, a law enforcement agency converting from a regional training academy or communications center to supporting its own academy or communications center will have a profound effect on standards relevant to those organizational components.

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

🔵 Standards that may require time

- Standards for which an extended amount of time may be required for compliance:
  - Areas typically found in this category are proposed new programs and facility changes such as those in property and evidence, holding facilities, communications security or training program development.

  - Also included in this category are budgetary items such as purchasing body armor, communications equipment or training aids or safety equipment.

Refer to CGSAM Chapter 3, Self Assessment Planning

Training – search "train" or "training"

	A	B	C	D	E	F	G
1	Standard	Title	Training	Frequency	Required	Last time conducted	Due
2	1.1.2 (LE1)	Code of Ethics	Ethics Training	Initial and biennially	All personnel		
3	1.2.9 (LE1)	Bias Policing	Prohibition against biased based policing	Initial and annual	Affected personnel		
4	4.3.3 (LE1)	Annual/Biennial Proficiency Training	UOF policies and demonstrate proficiency on lethal and less lethal	Initial, annual and biennally	All authorized agency personnel		
5	4.3.4 (LE1)	Prerequisitew to carrying lethal/less lethal weapons	Instruction on uof policies	Prior to authorization to carry	All authorized agency personnel		
6	4.3.5	Firearms Range	Training and certification requirments for range supervisors to include emergency medical response training for firearms instructors	Initial and as required	Range supervisors and firearms instructor		
7	11.3.4						

	A	B
	Standard	Title
	5.2.2	New Hire Training Program
	5.2.6	Annual Retraining
	5.2.7	Shift Training
	5.2.8	Remedial Training
	5.2.10	Specialized Training
	5.2.11	Training Officer Requirements

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May require time

- Training

Standard	Action	Frequency
40.2.3.e	Review	Annual
41.2.2.k	Review	Incident
41.2.2.l	Analysis	Annual
41.2.2.n	Review	Annual
41.2.3.e	Review	Incident
41.2.7.e	Training	Annual
44.1.3	Review	Annual
45.1.1.c	Evaluation	Biennial
45.2.1	Report	Quarterly
45.2.2	Survey	Biennial
46.1.3.i	Report	Incident
46.1.8	Inspection	Quarterly
46.1.9.a	Training	Annual
46.1.9.b	Training	Biennial
46.1.10.e	Review	Annual
53.2.1.e	Inspection	Quadrennial
55.1.2	Review	Biennial

Identify Priority Standards

- Standards that require agency change

- Standards requiring internal agency change:
    - Areas in this category may include time sensitive activities such as inspections, audits, reports, analyses, and reviews.
    - A complete list of time sensitive activities is found in Appendix E of the individual standards manual.
    - Some agencies have reported significant time is expended providing additional training, implementing new personnel procedures or updating contingency plans.

Refer to CGSAM Chapter 3, Self Assessment Planning

Identify Priority Standards

🔵 Statistical Table – full year of information

- Statistical Table information:

    ○ For each Accreditation Program, there are specific data tables used to provide information to the Commission.

    ○ Accreditation Managers should keep these in mind when the agency changes policies, procedures, etc., as those changes may affect the information captured in the data tables.

    ○ Accreditation Managers should review the tables annually to determine the type of information to report.

    ○ The amount of relevant information to be reported in the tables will vary from initial assessment to reaccreditation (e.g., an initial accreditation may only capture one or two years, while a reaccreditation is expected to have four years).

Refer to CGSAM Chapter 3, Self Assessment Planning

Priority Standards -Statistics

🔵 Client Resources: Client Resources | CALEA® | The Commission on Accreditation for Law Enforcement Agencies, Inc.

Data Tables

Law Enforcement

Communications

Training Academy

Campus Security

Number of External Complaints

	Year 1	Year 2	Year 3
Compliant			
Sustained			
Not Sustained			
Unfounded			
Exonerated			

Number of Internal Complaints

	Year 1	Year 2	Year 3
Compliant			
Sustained			
Not Sustained			
Unfounded			
Exonerated			

- ## Least priority

> - Standards for which compliance documentation is straightforward:
>   - The accreditation manager should identify standards that readily lend themselves to compliance.
>   - Work need not proceed on these until the more time consuming standards have been addressed. Examples of these include the observation standards listed in the individual standards manual.

Refer to CGSAM Chapter 3, Self Assessment Planning

Be flexible

Once standards are prioritized and included in a written self-assessment plan, the accreditation manager should remain flexible, shifting priorities as the need arises. Always have several projects in progress simultaneously to the degree that they can be managed effectively. The accreditation manager should listen closely for any feedback from agency personnel. Set realistic goals and timetables for all activities. A written plan can always be modified, if necessary. The absence of a written plan, however, leads to a lack of focus during self-assessment.

Refer to CGSAM Chapter 3, Self Assessment Planning

Prioritize Standards

STND	Assign	Desc	Due	Notes
1.1.2	Training	Update SOP	9/1/2019	New Training requirement
3.1.1	Administration	Ensure written agreements for SRO's are up to date	5/1/2019	Bullet requirements need to be included in agreements
4.2.1	Administration	Use of Force Reporting - Revise SOP	8/1/2018	Review form and make updates
4.3.3	Training	Time Sensitive weapons training	12/31/2018	Ensure scheduled as required
15.2.1	All	Draft agency goals and objectives	11/1/2018	Includes each major organizational component
46.1.10	Em Mgmt & PIO	Active Threats - annual review needed & Policy review	1/1/2020	Time sensitive
71.3.1	Operations	Facility modificaiton needed?	6/30/2019	Sight & sound separation by gender
71.3.3	Operations	Operational change - face to face observation	6/1/2019	Verify weapons control
81.3.2	Facility	Generator operated under full load	9/1/2018	Follow up with contractor to budget for
82.1.1	IT	Password audit & draft new procedures	12/1/2018	Time sensitive

Self-Assessment Plan

- Create Management System
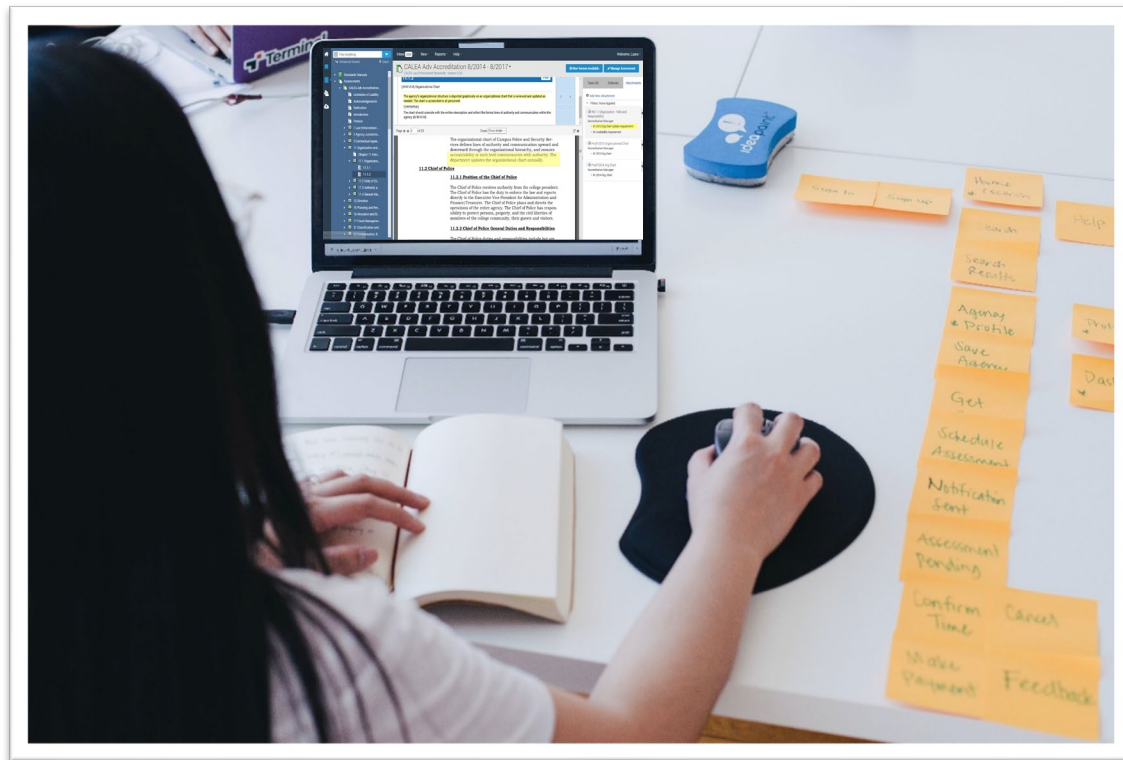
Track Progress

- What do you have?
- What do you need?
- Track progress

Track Progress

Track Progress

Track Progress

Track Progress

- Standards Status Timeline

Track Progress

LE 1 CALEA Standard	Policy Completed?	LE 1 Standard Completed?	General Order # and Title	Chapter	Policy
1.1.1	Yes	Yes	201 Limits of Authority	Organization	Oath of Office
1.1.2	Yes	Yes	301 Standards of Conduct	Personnel Management	Code of Ethics
1.2.1	Yes	Yes	201 Limits of Authority	Organization	Legal Authority Defined
1.2.3	Yes	Yes	707 Interviews and Interrogations	Operations	Compliance with Constitutional Requirements
1.2.4	Yes	Yes	703 Search, Seizure and Arrest	Operations	Search and Seizure
1.2.5	Yes	Yes	703 Search, Seizure and Arrest	Operations	Arrest with/without Warrant
1.2.8	Yes	Yes	702 Strip and Body Cavity Searches	Operations	Strip/Body Cavity Search
1.2.9	Yes	Yes	706 Bias Based Policing Activities	Operations	Bias Policing
1.2.10	Yes	Yes	701 Use of Force	Operations	Duty to Intervene
3.1.1	Yes	Yes	204 Mutual Aid and Contractual Agreements	Organization	Written Agreement for Services Provided
4.1.1	Yes	Yes	701 Use of Force	Operations	Use of Reasonable Force
4.1.2	Yes	Yes	701 Use of Force	Operations	Use of Deadly Force
4.1.3	Yes	Yes	601 Issued and Authorized Firearms & 701 Use of Force	Equipment & Operations	Warning Shots
4.1.4	Yes	Yes	607 Less Lethal Instruments & 701 Use of Force	Equipment & Operations	Use of Authorized Less Lethal Weapons
4.1.5	Yes	Yes	601 Issued and Authorized Firearms & 607 Less Lethal Instruments	Equipment	Rendering Aid
4.1.6	Yes	Yes	701 Use of Force	Operations	Vascular neck restrictions
4.1.7	Yes	Yes	701 Use of Force	Operations	Choke holds
4.2.1	Yes	Yes	701 Use of Force	Operations	Reporting Uses of Force
4.2.2	Yes	Yes	701 Use of Force	Operations	Written Use of Force Reports and Administrative Review
4.2.3	Yes	Yes	701 Use of Force	Operations	Operational Assignment
4.2.4	Yes	Yes	701 Use of Force	Operations	Analyze Reports from Use of Force
4.3.1	Yes	Yes	601 Issued and Authorized Firearms & 607 Less Lethal Instruments (Baton and DTs)	Equipment	Authorization: Weapons and Ammunition
4.3.2	Yes	Yes	601 Issued and Authorized Firearms & 607 Less Lethal Instruments (Baton and DTs)	Equipment	Demonstrating Proficiency with Weapons
4.3.3	Yes	Yes	601 Issued and Authorized Firearms & 607 Less Lethal Instruments (Baton,DTs, UOF Training)	Equipment	Annual/Biennial Proficiency Training
4.3.4	Yes	Yes	601 Issued and Authorized Firearms, 607 Less Lethal Instruments & 701 Use of Force	Equipment & Operations	Prerequisites to carrying lethal / less lethal weapons
11.1.1	Yes	Yes	205 Command Authority	Organization	Description of Organization
11.3.1	Yes	Yes	205 Command Authority	Organization	Responsibility/Authority

Track Progress

	A	B	C	D	E	F	G
1		**Standard Title**	**Chapter Title**	**WD Complete**	**WD Effective Date**	**Proof**	**Proof**
2		**Law Enforcement Role and Authority**					
3		1.1.1 (LE1)	Oath of Office (LE1)				
4		1.1.2 (LE1)	Code of Ethics* (LE1)				
5		1.1.3	Agency's Role in Criminal Justice Diversion Programs				
6		1.1.4	Consular Notification				
7		1.2.1 (LE1)	Legal Authority Defined (LE1)				
8		1.2.2	Legal Authority to Carry/Use Weapons				
9		1.2.3 (LE1)	Compliance with Constitutional Requirements (LE1)				
10		1.2.4 (LE1)	Search and Seizure (LE1)				
11		1.2.5 (LE1)	Arrest with/without Warrant (LE1)				
12		1.2.6	Alternatives to Arrest				
13		1.2.7	Use of Discretion				
14		1.2.8 (LE1)	Strip/Body Cavity Search (LE1)				
15		1.2.9 (LE1)	Bias Policing* (LE1)				
16		1.2.10 (LE1)	Duty to Intervene (LE1)				
17							
18							
19		**Agency Jurisdiction and Mutual Aid**					
20		2.1.1	Geographical Boundaries				
21		2.1.2	Concurrent Jurisdiction				
22		2.1.3	Written Agreements for Mutual Aid				
23		2.1.4	Requesting Assistance: Federal LE/National Guard				
24							
25							
26		**Contractual Agreements for Law Enforcement Services**					
27		3.1.1 (LE1)	Written Agreement for Services Provided (LE1)				
28		3.1.2	Employee Rights				

● Self-Assessment

2
SELF-ASSESSMENT

- Create, modify, and evaluate written directives ✓
- Verify compliance ✓
- Consult w/RPMs ✓
- Attend CALEA conference ✓
- Identify network and internal/external contacts to support the process ✓
- Utilize w/local PAC ✓
- Monitor standards for updates ✓
- PowerDMS™ access/training ✓
- *Initial informal accreditation review
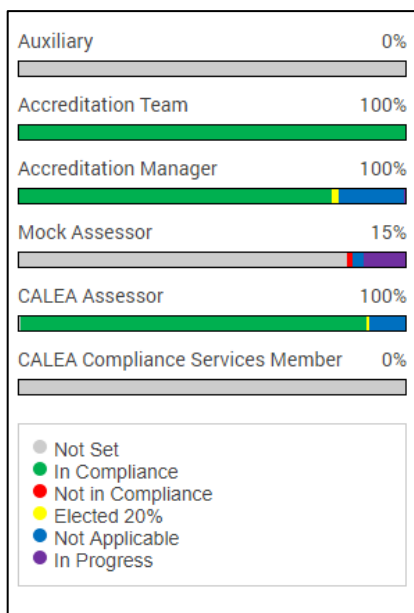- Contact RPM when ready to conduct assessment

- Seek feedback **EARLY**

Do not wait until you think you are ready for your files to be reviewed.

Once you complete several files or a chapter, ask a member of your network to look at those files to make sure you are on the right track and lessen the need to make corrections that can be identified early on.

(CGSAM Chapter 4 Pre-Assessment Review)

Pre-Assessment Review (Mock)

- Pre-Assessment Review of files by:
  - Accreditation Support Networks, Experienced AM's, Assessors, etc.
- Strongly Recommended, *but not required*

(CGSAM Chapter 4, Pre-Assessment Review)

Pre-Assessment Review (Mock)

🔵 Pre-Assessment Review can happen frequently

Year 4 Assessment and Mock Assistance Thank you note

artin, ...
to ncl...@googlegroups.com

... completed our Year 4 assessment with no findings this week. I wanted to thank those who assisted with the mock assessment in December:

... Buchanan

Mary ... Wojtak

...nie Wagner

... Silberman

Also for the allied agency assistance we received from ... and ...

The feedback and assistance I received was very helpful, and even cleared a few standard issues from my last assessment.

If you are new to ... I highly encourage you to reach out to the PAC for assistance with a Mock assessment.

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(CGSAM Chapter 4 Pre-Assessment Review)

Web-based Assessment

- Web-based Assessment *(Often referred as CSM Review, Annual Review, Off site Review)*
  - Initial: conducted approximately **40 days** prior to site-based assessment
  - Reaccreditation: conducted annually Years 1-3 around award anniversary and Year 4 - 40 days prior to site-based assessment
  - Conducted by CSM or Compliance Services Member

Site-based Assessment

- Web-based Assessment *(often referred as CSM Review, Annual Review, Off site Review)*
  - Initial: conducted approximately **40 days** prior to site-based assessment
  - Reaccreditation: conducted annually Years 1-3 around award anniversary and Year 4 – 40 days prior to site-based assessment
  - Conducted by CSM or Compliance Services Member
- Site-based Assessment
  - Conducted onsite by Site-based Assessment team
  - Areas of focus, Interviews and Observations
  - Initial and then every four years
  - Results shared with CEO in CIMRS

Standards Issue

- Web-based Assessment *(often referred as CSM Review, Annual Review, Off site Review)*
  - Initial: conducted approximately **40 days** prior to site-based assessment
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  - Conducted by CSM or Compliance Services Member
- Site-based Assessment
  - Conducted onsite by Site-based Assessment team
  - Areas of focus, Interviews and Observations
  - Initial and then every four years

- ## Standards Issue
  - Follow up issues with the provided proofs of compliance or written directive

🔵 Self-Assessment
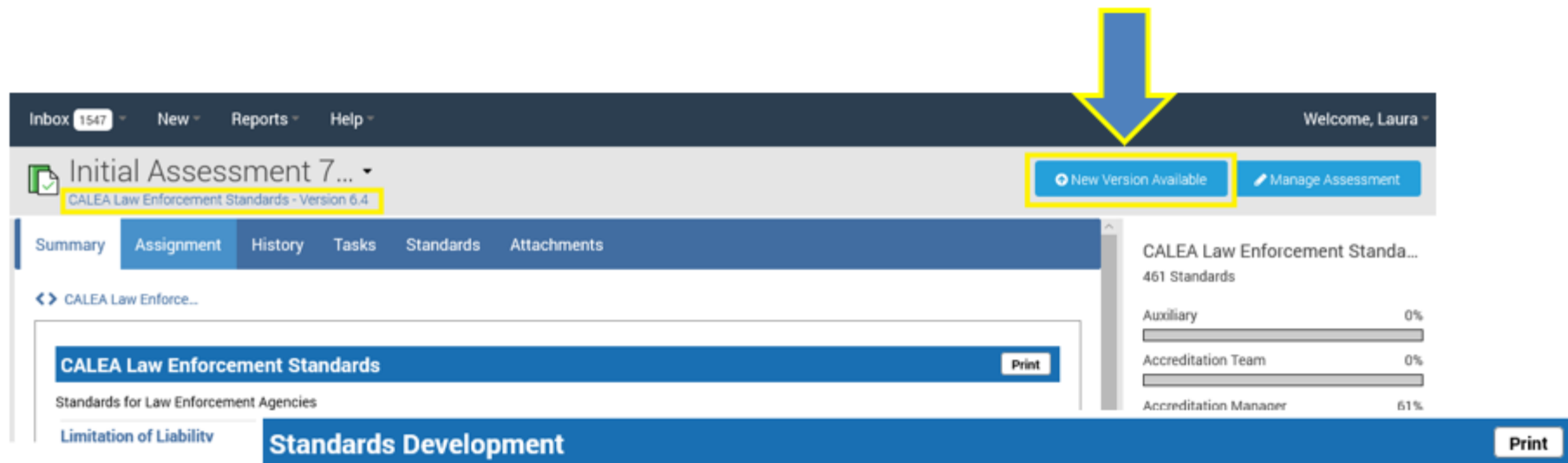
2

SELF-ASSESSMENT

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- *Initial informal accreditation review ✓
- Contact RPM when ready to conduct assessment ✓

Standards Manual Updates

- Updating an Assessment to a newer standards manual
- Comparing versions of a standards manual

Tips for a Good Start

- Appoint an accreditation manager with the requisite skills

- **Don't delay the Getting Started call with RPM or request a meeting with the RPM for a New AM Orientation**

- Read the Standards Manual and Guide to Successful Accreditation Management

- Create a Self-Assessment Plan & modify as needed

- Prioritize the Standards

- Continue to self-assess, even after awarded

Tips for a Good Start

- Involve others for best outcomes (TEAM)

- Attend CALEA Conferences

- **Get involved in Accreditation Support Network (PAC)**

- Visit neighboring or close by CALEA accredited agencies

- Use the Appendices

- Ensure final quality control of files before assessment (mock)

- CALEA Moments and Lessons Learned (video)

Closing TIPS

- Provide Regular Reports To CEO
  - Use their "hammer" when needed
- Keep Team and Agency Informed
- STAY INFORMED
  - Accreditation Support Networks (PAC's)
  - CALEA Website
  - **Communicate with RPM**
  - CALEA Conferences

- Keep the RPM informed of changes of CEO and AM positions *(CGSAM Chapter 5, Reporting Requirements)*