

RETURN  
TO

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**2012 LAW ENFORCEMENT MANAGEMENT  
AND ADMINISTRATIVE STATISTICS SURVEY**



FORM CJ-44  
2012 SURVEY OF STATE AND LOCAL  
LAW ENFORCEMENT AGENCIES  
U.S. Department of Justice  
Bureau of Justice Statistics

In correspondence about this survey, please refer to the number at the top left of the address label. (On the label, please correct any error in name and mailing address. If the label is correct, please check the box in the bottom right hand corner.)

The label is correct

**INFORMATION SUPPLIED BY**

NAME				TITLE		
TELEPHONE	Area Code	Number	Extension	FAX	Area Code	Number
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**Instructions**

1. Please answer all questions with reference to the law enforcement agency specified on the label above. This survey is directed to a sample of General Purpose Law Enforcement Agencies in the United States.
2. It may be necessary to gather information from multiple departments within your agency in order to complete this survey. Please review the whole survey and submit any requests for information to the appropriate staff prior to beginning your responses.
3. For additional information, please refer to the **Help Text in Appendix A**. Item-specific directions are provided. A **glossary of terms** is provided in **Appendix B** for your reference. A **list of retirement programs in your agency's state** is also provided in **Appendix C** for your reference.
4. If you are unable to complete an item according to the directions, call the Help Line or make a note in the comments portion (Section J) to explain how you handled the item.
5. Please complete and return the survey **by MM/DD/YYYY**.
6. Please retain a copy of the completed survey for your records.
7. Data collected through this project will be used for research and statistical purposes only (Title 42 USC 3725 and 3789g). Your participation is voluntary.
8. If you have questions or concerns, or if you need assistance completing the survey, please contact the Urban Institute at **lemas@urban.org** or call **202-261-5804**. Please call between 9:00 a.m. and 5:00 p.m. EST.

**Burden Statement**

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 4 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street NW, Washington, DC 20531.

Please do not leave any items blank. All "Yes/No" items require an answer. Blanks will not be accepted as "No" and may trigger a follow-up phone call for clarification. For assistance with any item, see the Help Text in Appendix A for item-specific guidance. A glossary of terms is provided in Appendix B for your reference. Please contact the Help Line if you have any questions or you are unable to complete a question as instructed. Document any instances where you were unable to complete items as requested in the comments portion (Section J).

**SECTION A: CURRENT PERSONNEL**

This section includes personnel questions for both sworn and non-sworn employees. Do not include seasonal or unpaid reserve officers until Question A6 and A7.

**A1. As of July 1, 2012, how many male and female full-time and part-time PAID sworn personnel worked in your agency?** *Full-time employees are those regularly scheduled for 35 or more hours per week. If none, enter '0.'* *Do not include employees whose positions are regularly added during peak months of the year and dropped after the peak season.*

	Full-Time	Part-Time
a. MALE sworn personnel with general arrest powers	1 _____ 2 _____	2 _____
b. FEMALE sworn personnel with general arrest powers	1 _____ 2 _____	2 _____
c. TOTAL sworn personnel with general arrest powers	1 _____ 2 _____	2 _____

**A2. As of July 1, 2012, how many FULL-TIME SWORN personnel with general arrest powers performed the following duties as their PRIMARY job responsibility?** *Count each officer only once. If none, enter '0.'*

- |  |          |
|--|----------|
| a. Patrol duties (including community policing officers) | a. _____ |
| b. Investigative duties (e.g., detectives)               | b. _____ |
| c. Jail related duties                                   | c. _____ |
| d. Court-related duties                                  | d. _____ |
| e. Other duties  | e. _____ |

**A3. As of July 1, 2012, how many FULL-TIME SWORN individuals held the following SUPERVISORY positions?** *If a position does not exist in your agency, check N/A. If there are no employees in a particular option, enter '0.'*

	Male	Female	N/A
a. Chief Executive (i.e., Chief, Commissioner, Sheriff)	1 _____ 2 _____	2 _____	
b. Any intermediate supervisor, below Chief Executive	1 _____ 2 _____	2 _____	<input type="checkbox"/> 3
c. Sergeant or equivalent first-line supervisor	1 _____ 2 _____	2 _____	<input type="checkbox"/> 3

**A4. As of July 1, 2012, how many FULL-TIME SWORN personnel with general arrest powers were there in each of the following racial / ethnic categories? If none, enter '0.'**

- |  |          |
|--|----------|
| a. White, Not of Hispanic Origin                                     | a. _____ |
| b. Black or African American, Not of Hispanic Origin                 | b. _____ |
| c. Hispanic or Latino  | c. _____ |
| d. American Indian or Alaskan Native Not of Hispanic Origin          | d. _____ |
| e. Asian, Not of Hispanic Origin                                     | e. _____ |
| f. Native Hawaiian or Other Pacific Islander, Not of Hispanic Origin | f. _____ |
| g. Two or more races   | g. _____ |
| h. Not known   | h. _____ |
| i. Total personal (sum of a through h)                               | i. _____ |

**A5. During the 12 month period ending June 30, 2012, how many SWORN personnel worked in your agency whose employment was seasonal (e.g., worked only a few months in the summer or winter)? Please include both part-time and full-time seasonal sworn personnel in your response. If none, enter '0.'**

\_\_\_\_\_ Seasonal sworn personnel

**A6. As of July 1, 2012, how many UNPAID reserve or auxiliary officers with general arrest powers did your agency have? If none, enter '0.'**

\_\_\_\_\_ Number of sworn reserve / auxiliary personnel

**A7. As of July 1, 2012, how many PAID NONSWORN personnel did your agency have? Please include both part-time and full-time nonsworn personnel in your response. If none, enter '0.'**

\_\_\_\_\_ Paid nonsworn personnel

**A8. As of July 1, 2012, what types of job duties are provided by your agency's NONSWORN personnel?**

1 Agency does not employ any NONSWORN personnel.

**Yes No**

- |   |   |
|---|---|
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | a. Administrative or clerical             |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | b. Building cleaning and maintenance      |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | c. Legal services                         |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | d. Accounting or financial management     |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | e. Forensic sciences                      |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | f. Research, statistics or crime analysis |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | g. Personnel /human resources management  |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | h. Information technology specialist      |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | i. Vehicle maintenance                    |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | j. Call dispatcher                        |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | k. Court-related functions                |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | l. Jail-related functions                 |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 | m. Other, please specify                  |

\_\_\_\_\_

**SECTION B: CURRENT PAY AND BENEFITS**

**B1.** As of July 1, 2012, what was your agency's annual salary schedule for FULL-TIME SWORN positions? If no fixed salary schedule exists, list the lowest current pay as the minimum and the highest current pay as the maximum for each position below. If a position does not exist in your agency, check the "No Such Position" box.

	Minimum	Maximum	No Such Position
a. Chief Executive (e.g., Chief, Sheriff, Commissioner)	\$_____00	\$_____00	
b. Sergeant or equivalent first-line supervisor	\$_____00	\$_____00	<input type="checkbox"/>
c. Entry-level officer or deputy (Post Academy)	\$_____00	\$_____00	<input type="checkbox"/>

**B2.** As of July 1, 2012, which types of achievements or skills could result in increased pay for FULL-TIME SWORN Personnel? Check either 'yes' or 'no' for each item. Incentives could come in the form of increased salary or additional paid leave.

Yes No

- 1 2 a. Educational achievement
- 1 2 b. Special skills or vocational training
- 1 2 c. Bi-lingual or Multi-lingual ability pay
- 1 2 d. Special duty assignments (e.g., K-9, horse patrol)
- 1 2 e. Hazardous duty assignments
- 1 2 f. Shift differential pay
- 1 2 g. Residential pay
- 1 2 h. Merit pay
- 1 2 i. Other, please specify: \_\_\_\_\_

**B3.** As of July 1, 2012, which of the following types of educational or equipment costs did your agency provide to or reimburse expenses for FULL-TIME SWORN personnel in your agency? Check either 'yes' or 'no' for each item.

Yes No

- 1 2 a. Tuition costs
- 1 2 b. Uniform costs
- 1 2 c. Body armor or other safety equipment
- 1 2 d. Firearms

**B4.** As of July 1, 2012, did your agency allow sworn personnel assigned to patrol duties to take agency-owned vehicles to their home?

All Some None

- 1 2 3 a. Marked vehicles
- 1 2 3 b. Unmarked vehicles

**B5.** As of July 1, 2012, was there an organization certified to bargain on behalf of sworn personnel in your agency?

- 1 Yes 2 No → Skip to B7

**B6.** As of July 1, 2012, what was the status of the COLLECTIVE BARGAINING AGREEMENT with this organization?

- 1 Active 2 Expired 3 No agreement

**B7.** During the 12-month period ending June 30, 2012, how many FULL-TIME SWORN personnel SEPARATED from your agency? If none, enter '0.'

Full-Time

- a. Voluntary-retired a. \_\_\_\_\_
- b. Voluntary-other separation b. \_\_\_\_\_
- c. Involuntary-laid off due to reduction-in-force c. \_\_\_\_\_
- d. Involuntary- removed or fired by agency d. \_\_\_\_\_
- e. Other type of separation, please specify: e. \_\_\_\_\_  
\_\_\_\_\_
- f. Reasons unknown f. \_\_\_\_\_
- g. Total number of sworn personnel separated g. \_\_\_\_\_

**B8.** During the 12-month period ending June 30, 2012, how many NONSWORN personnel SEPARATED from your agency? If none, enter '0.'

Full-Time

- a. Involuntary-laid off due to reduction-in-force a. \_\_\_\_\_
- b. Other type of separation b. \_\_\_\_\_
- c. Total number of personnel separated c. \_\_\_\_\_

**B9.** At any time between January 1, 2009 and June 30, 2012, did your agency implement agency-wide reductions in the base salary for SWORN or NONSWORN personnel?

- 1 Yes 2 No → Skip to B11

**B10.** If yes to Question B9, how much was the base salary reduced?

% Reduction

- a. Sworn Personnel \_\_\_\_\_
- b. Nonsworn Personnel \_\_\_\_\_

**B11.** At any time since January 1, 2010 did your agency FURLOUGH (reduce the number of hours or days for which any employees were paid) ANY employees? Do not include reductions in overtime.

- 1 Yes 2 No → Skip to B13

**B12.** How many SWORN and NONSWORN employees were FURLOUGHED during any pay period in 2010, 2011 and 2012 (Do not include reductions in overtime)? If no employees were furloughed in a particular year, enter '0.'

	2010	2011	2012
a. Sworn employees	1_____	2_____	3_____
b. Nonsworn employees	1_____	2_____	3_____

**B13.** During the 12-month period ending June 30, 2012, did your agency COMPENSATE any personnel for OVERTIME work?

Yes No

- 1 2 a. Nonsworn personnel
- 1 2 b. Sworn personnel

If No to B13b, skip to question B16.

**B14. For what law enforcement functions was overtime work authorized for SWORN PERSONNEL? Check either 'yes' or 'no' for each item. Only include overtime work paid by your agency with no reimbursement from other agencies.**

Yes No

- <sub>1</sub> <sub>2</sub> a. Court testimony
- <sub>1</sub> <sub>2</sub> b. Extended shifts
- <sub>1</sub> <sub>2</sub> c. Increased patrol
- <sub>1</sub> <sub>2</sub> d. Investigations
- <sub>1</sub> <sub>2</sub> e. Administrative duties
- <sub>1</sub> <sub>2</sub> f. Emergence response
- <sub>1</sub> <sub>2</sub> g. Security or traffic assistance at planned events (e.g., parades, concerts, sporting events)
- <sub>1</sub> <sub>2</sub> h. Other functions, please specify:  
\_\_\_\_\_

**B15. During the 12-month period ending June 30, 2012, did your agency limit the number of overtime hours individual sworn personnel can work for your agency?**

- <sub>1</sub> Yes                      <sub>2</sub> No

**B16. During the 12-month period ending June 30, 2012, did your agency allow sworn personnel to work outside your agency in a law enforcement capacity (e.g., off duty / extra duty job)? Include overtime employment arranged by your agency.**

- <sub>1</sub> Yes                      <sub>2</sub> No → Skip to C1

**B17. During the 12-month period ending June 30, 2012, what types of limits were placed on SWORN PERSONNEL for working outside your agency in a law enforcement capacity? Check one.**

Yes No

- <sub>1</sub> <sub>2</sub> a. No limits
- <sub>1</sub> <sub>2</sub> b. Amount of hours of work
- <sub>1</sub> <sub>2</sub> c. Type of establishment
- <sub>1</sub> <sub>2</sub> d. Other criteria, please specify:  
\_\_\_\_\_

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**SECTION C – NEW PERSONNEL**

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**C1. At any time between January 1, 2010 and June 30, 2012, did your agency have a HIRING FREEZE (i.e., implement a policy of not hiring new personnel when existing personnel leave) in effect for either SWORN OR NONSWORN PERSONNEL?**

- <sub>1</sub> Yes                      <sub>2</sub> No → Skip to C3

**C2. For how many months during this 30-month period did your agency have a policy of not filling vacancies for SWORN or NONSWORN personnel? If there was no such policy for a given year, enter '0.'**

Number of Months with  
a Freeze in Hiring during  
2010      2011      2012

- a. Sworn employees                      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_
- b. Nonsworn employees                      1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

**C3. During the 12-month period ending June 30, 2012, how many SWORN personnel were HIRED? If none, enter '0.'**

check here is no Sworn personnel were hired during the 12-month period ending June 30, 2012 and skip to Question C4.

- |  | Full-Time | Part-Time |
|--|-----------|-----------|
| a. Direct hires<br>(Hires with no law enforcement certification or experience)       | 1 _____   | 2 _____   |
| b. Pre-Service Hires<br>(Hires with certification but no law enforcement experience) | 1 _____   | 2 _____   |
| c. Lateral hires<br>(Hires with certification and law enforcement experience)        | 1 _____   | 2 _____   |
| d. Total New Hires   | 1 _____   | 2 _____   |

**C4. What types of additional law enforcement TRAINING were required for LATERAL OR PRE-SERVICE hires?**

Lateral Pre-service

- <sub>1</sub>                      <sub>2</sub> a. None
- <sub>1</sub>                      <sub>2</sub> b. Abbreviated courses on departmental policies and practices
- <sub>1</sub>                      <sub>2</sub> c. Abbreviated field supervision
- <sub>1</sub>                      <sub>2</sub> d. Similar training or field supervision as direct hires
- <sub>1</sub>                      <sub>2</sub> e. Other, please specify:  
\_\_\_\_\_
- <sub>1</sub>                      <sub>2</sub> e. No new hires of this type

**C5. As of July 1, 2012, what was your agency's minimum education requirement for new hires? Check one.**

- <sub>1</sub> No minimum requirement
- <sub>2</sub> High school diploma or equivalent (e.g., GED)
- <sub>3</sub> Some college but no degree
- <sub>4</sub> Associate's Degree or equivalent
- <sub>5</sub> Bachelor's Degree or equivalent
- <sub>6</sub> Other requirement, please specify:  
\_\_\_\_\_

**C6. Does your agency consider military service as an alternative to its minimum educational requirement?**

- <sub>1</sub> Yes                      <sub>2</sub> No                      <sub>3</sub> Not Applicable

**C7. During the 12-month period ending June 30, 2012, how many employees hired for FULL-TIME SWORN positions had a 4-year college degree? If none, enter '0.'**

\_\_\_\_\_ Full-time sworn hires with a bachelor's degree

**C8. What types of RETIREMENT PROGRAMS were available to all FULL-TIME SWORN EMPLOYEES HIRED during the 12-month period that ended June 30, 2012?**

Yes No

- <sub>1</sub> <sub>2</sub> a. Defined Benefits Retirement Plan (see Appendix C for a list of your state's retirement plans) → Answer C9
- <sub>1</sub> <sub>2</sub> b. Defined Contribution Plan (e.g., IRA, 401k) → Answer C10
- <sub>1</sub> <sub>2</sub> c. U.S. Social Security Program
- <sub>1</sub> <sub>2</sub> d. Other type of program, please specify the nature of this retirement program:  
\_\_\_\_\_

If C8a AND C8b responses are No, please skip to Question C11.

C9. If your agency has a DEFINED BENEFITS RETIREMENT PROGRAM what is the name of your agency's program or system?

\_\_\_\_\_

C10. If your agency has a DEFINED CONTRIBUTION PLAN (E.G., IRA, 401K), what is the range of the EMPLOYER'S contribution to this plan as a percent of the employee's salary?

Minimum \_\_\_\_\_% Maximum \_\_\_\_\_%

C11. During the 12-month period ending June 30, 2012, how many NONSWORN personnel were HIRED?

If no NONSWORN personnel were hired in the 12 months that ended June 30, 2012, check here  and skip to question D1

Number of nonsworn personnel hired Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_

**SECTION D: BUDGET and INCOME SOURCES**

D1. In what month does your fiscal year begin? Month Fiscal Year Begins: \_\_\_\_\_

D2. What is your agency's total operating budget for the 12-month period that includes July 1, 2012? Check the box below if you are unable to provide the exact amount. Do not include constructions costs, major equipment expenditures or other capital expenditures.

Operating Budget: \$ \_\_\_\_\_ .00

Check here if the figure above is an estimate

D3. During the 12-month fiscal period that includes July 1, 2012, what were the sources of funding for the operational expenses of your agency? Include funds received through grants in your agency's response. Do not include capital expenditures.

Yes No

- a. One or more municipal governments
- b. One or more county governments
- c. One or more state government agencies
- d. One or more Federal government agencies
- e. Payment for contracted law enforcement services
- f. Asset Forfeiture Program
- g. User fees
- h. Other, please specify: \_\_\_\_\_

**SECTION E – COMMUNITY POLICING**

E1. As of July 1, 2012, what best describes your agency's WRITTEN MISSION STATEMENT?

- No written mission statement
- Written mission statement with NO community policy component
- Written mission statement with a community policy component

E2. During the 12-month period ending June 30, 2012, did your agency actively encourage PATROL OFFICERS to engage in SARA-TYPE PROBLEM-SOLVING PROJECTS?

Yes  No → Skip to E5

E3. During the 12-month period ending June 30, 2012, how many PATROL OFFICERS were engaged in SARA-TYPE PROBLEM-SOLVING PROJECTS? If none, enter '0.'

\_\_\_\_\_ Number of patrol officers

E4. As of July 1, 2012, did your agency include COLLABORATIVE PROBLEM-SOLVING PROJECTS in the evaluation criteria of PATROL OFFICERS?

Yes  No

E5. During the 12 month period ending June 30, 2012, did your agency have a PROBLEM-SOLVING PARTNERSHIP or WRITTEN AGREEMENT with any local civic, business or governmental organizations? This could include Memoranda of Understanding.

Yes  No

E6. During the 12-month period ending June 30, 2012, did your agency on a regular basis assign the same patrol officers primary responsibility for a particular area or beat within your agency's jurisdiction?

Yes  No → Skip to E8

E7. How many PATROL OFFICERS were on a regular basis given primary or exclusive responsibility for particular AREAS OR BEATS? If none, enter '0.'

\_\_\_\_\_ Number of patrol officers

E8. During the 12-month period ending June 30, 2012, did your agency utilize information from a SURVEY OF LOCAL RESIDENTS about crime, fear of crime or satisfaction with law enforcement?

Yes  No

E9. During the 12-month period ending June 30, 2012, what proportion of FULL-TIME SWORN PERSONNEL received at least 8 HOURS of training on community policing issues, such as problem solving, SARA, and community partnerships? Check one for both 'a' and 'b.'

a. Recruit Training:

- All
- Half or More
- Less than Half
- None
- Not Applicable

b. In-service Training:

- All
- Half or More
- Less than Half
- None

**SECTION F – INFORMATION COLLECTION,  
ACCESS AND REPORTING**

**F1. As of July 1, 2012, did your agency use any of the following methods to collect information?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Gunshot detection system
- <sub>1</sub> <sub>2</sub> b. License plate readers
- <sub>1</sub> <sub>2</sub> c. Smartphones
- <sub>1</sub> <sub>2</sub> d. Video surveillance of public areas
- <sub>1</sub> <sub>2</sub> e. Video cameras in patrol vehicles
- <sub>1</sub> <sub>2</sub> f. Video cameras on patrol officers
- <sub>1</sub> <sub>2</sub> g. Video cameras on weapons
- <sub>1</sub> <sub>2</sub> h. Other types of video cameras

**F2. As of July 1, 2012, did any of your patrol officers have DIRECT ELECTRONIC ACCESS (e.g., via computer, smart phone, etc.) to the following types of information while in the field?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Motor vehicle records
- <sub>1</sub> <sub>2</sub> b. Driver license records
- <sub>1</sub> <sub>2</sub> c. Outstanding warrants
- <sub>1</sub> <sub>2</sub> d. Individual criminal history
- <sub>1</sub> <sub>2</sub> e. Prior agency experience with specific location
- <sub>1</sub> <sub>2</sub> f. Protection orders

**F3. As of July 1, 2012, what was the PRIMARY METHOD for transmitting CRIMINAL INCIDENT REPORTS from the field to your agency's central information system? Check one.**

- <sub>1</sub> Paper report
- <sub>2</sub> Voice transmission (e.g, radio, phone)
- <sub>3</sub> Computer, smartphone, or other device
- <sub>4</sub> Other, please specify: \_\_\_\_\_

**F4. As of July 1, 2012, did your agency maintain a COMPUTERIZED RECORDS SYSTEM for criminal incidents?** <sub>1</sub> Yes <sub>2</sub> No → Skip to F7

**F5. What types of COMPUTERIZED RECORDS of criminal incidents are maintained by your agency?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Incident-based statistical records
- <sub>1</sub> <sub>2</sub> b. Summary statistics
- <sub>1</sub> <sub>2</sub> c. Officer narratives
- <sub>1</sub> <sub>2</sub> d. Other, please specify: \_\_\_\_\_

**F6. What TYPES OF DATA are included in your COMPUTERIZED RECORDS of criminal incidents?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Narrative descriptions of offenses
- <sub>1</sub> <sub>2</sub> b. Offense coding (NCIC, UCR, etc.)
- <sub>1</sub> <sub>2</sub> c. State statutes or municipal codes of offenses
- <sub>1</sub> <sub>2</sub> d. Victim characteristics
- <sub>1</sub> <sub>2</sub> e. Suspect characteristics
- <sub>1</sub> <sub>2</sub> f. Offense location
- <sub>1</sub> <sub>2</sub> g. Geocoded address of offense (X,Y coordinates)
- <sub>1</sub> <sub>2</sub> h. Offense date

**F7. During the 12-month period ending June 30, 2012, did your agency conduct or arrange for others to conduct RESEARCH OR STATISTICAL ANALYSES (including geospatial analyses) using your agency's computerized records of criminal incidents?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Analyses conducted by agency staff
- <sub>1</sub> <sub>2</sub> b. Analyses conducted by external organizations

*If no analyses were conducted, check here  (Please skip to Question F10.)*

**F8. If yes to F7a, during the 12-month period ending June 30, 2012, how many personnel conducted RESEARCH OR STATISTICAL ANALYSES using your agency's computerized records of criminal incidents? If none, enter '0.'**

Assigned	Sworn	Nonsworn
a. Full-time	1_____ 2_____	
b. Part-time	1_____ 2_____	

**F9. If yes to F7b, what types of outside organizations or individuals conduct RESEARCH OR STATISTICAL ANALYSIS of your agency's computerized records of criminal incidents? Check all that apply.**

- <sub>1</sub> Another law enforcement agency
- <sub>2</sub> Another government agency
- <sub>3</sub> A college, university, or non-profit organization
- <sub>4</sub> A commercial vender
- <sub>5</sub> Other source, please specify: \_\_\_\_\_

**F10. As of July 1, 2012, did your agency use its website as a way to report crime statistics to the public? Check all that apply.**

- Agency has no website (skip to Question F12).

**Yes No**

- <sub>1</sub> <sub>2</sub> a. Provides jurisdiction-wide summaries of crime statistics
- <sub>1</sub> <sub>2</sub> b. Provides summaries of crime statistics by districts, beats, neighborhoods or other areas within your jurisdiction
- <sub>1</sub> <sub>2</sub> c. Provides street level maps that report the location and nature of a variety of specific crimes
- <sub>1</sub> <sub>2</sub> d. Provides street level maps with details about the residential location of sex offenders
- <sub>1</sub> <sub>2</sub> e. Uses other ways to report crime statistics, please specify: \_\_\_\_\_

**F11. As of July 1, 2012, did your agency's use its website to receive input from local residents in any of the following way?**

**Yes No**

- <sub>1</sub> <sub>2</sub> a. To report crimes or other problems
- <sub>1</sub> <sub>2</sub> b. To ask questions about the agency
- <sub>1</sub> <sub>2</sub> c. To complain about the department or about specific officers
- <sub>1</sub> <sub>2</sub> d. To provide other opportunities for input from residents. If yes, please specify: \_\_\_\_\_

**F12. As of July 1, 2012, did your agency make it possible for RESIDENTS report crime or any other problem by EMAIL OR TEXTING?**

- 1 Yes      2 No

**F13. Can LOCAL RESIDENTS arrange to receive information about crime or other issues via email, recorded phone calls, cell phone texts, or other electronic means?**

- 1 Yes      2 No

**F14. Does your agency use any of the electronic SOCIAL MEDIA listed below?**

**Yes No**

- 1 2 a. Twitter  
1 2 b. Facebook, Google+, or similar service  
1 2 c. Blogs  
1 2 d. YouTube or similar video sharing service  
1 2 e. Cell phone text alerts (e.g., Nixle)  
1 2 f. Other, please specify: \_\_\_\_\_

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**SECTION G – VEHICLES AND PURSUITS**

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**G1. As of July 1, 2012, how many MARKED AND UNMARKED MOTORIZED VEHICLES were operated by your agency? Include all owned, rented, leased and confiscated vehicles that your agency USES. If none, enter '0.'**

- a. Marked cars (SUVs, vans, trucks, etc.)      a. \_\_\_\_\_  
b. Unmarked cars (SUVs, vans, trucks, etc.)      b. \_\_\_\_\_

**G2. As of July 1, 2012, did your agency operate other types of motorized vehicles?**

**Yes No**

- 1 2 a. Motorcycles  
1 2 b. All-terrain vehicles (ATVs)  
1 2 c. Fixed-wing aircraft  
1 2 d. Helicopters  
1 2 e. Boats  
1 2 f. Unmanned aerial drones  
1 2 g. Other, please specify: \_\_\_\_\_

**G3. As of July 1, 2012, which of the following options best describes your agency's WRITTEN PURSUIT DRIVING POLICY? Check one.**

- 1 Agency has no written policy on pursuit driving  
2 Permitted – left to the judgment of the pursuing officers  
3 Permitted – restricted by policy to certain circumstances  
4 Permitted – subject to supervisory review before initiation  
5 Discouraged - all vehicle pursuits discouraged  
6 Prohibited – all pursuits prohibited  
7 Other, please specify: \_\_\_\_\_

**G4. How does your agency document VEHICLE PURSUIT INCIDENTS? Check one.**

- 1 Separate report  
2 Use of force form  
3 Offense or arrest reports  
4 Other, please specify: \_\_\_\_\_

5 No formal records of pursuit incidents maintained  
**G5. During the 12-month period ending June 30, 2012, how many VEHICLE PURSUITS occurred in your agency?**

\_\_\_\_\_ Number of vehicle pursuits (if none, enter 0)

- a. Check here if the figure above is an estimate.  
 b. Check here if the number is not known.

**G6. As of July 1, 2012, according to your agency's WRITTEN POLICY ON FOOT PURSUITS which of the following situations would restrict initiating or continuing a foot pursuit?**

- Agency has no written policy on foot pursuits (skip to Question H1).

**Yes No Situations where foot pursuits are limited by policy**

- 1 2 a. A lone officer enters an isolated location or structure  
1 2 b. An officer loses contact with fellow officers and the agency's communication center  
1 2 c. An officer loses visual contact with the suspect  
1 2 d. A suspect is thought to be armed and no back up is currently available  
1 2 e. Other, please specify: \_\_\_\_\_

**G7. Does your agency's WRITTEN FOOT PURSUITS POLICY encourage the use of CONTAINMENT TACTICS?**

- 1 Yes      2 No

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**SECTION H – OFFICER SAFETY AND USE OF FORCE**

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**H1. As of July 1, 2012, according to your agency's WRITTEN POLICY, who is responsible for selecting BODY ARMOR FOR SWORN PERSONNEL? Check one.**

- 1 Agency has no written policy on body armor (skip to H3)  
2 The agency selects body armor  
3 The individual officer selects body armor  
4 The individual officer selects with restrictions set by the department on the armor type or manufacturer  
5 Other, please specify: \_\_\_\_\_

**H2. Does your agency's WRITTEN POLICY include any of the following requirements?**

**Yes No**

- 1 2 a. Uniformed field/patrol officers must have access to body armor at all times  
1 2 b. Uniformed field/patrol officers must wear body armor in certain high risk conditions, such as when serving warrants.  
1 2 c. Uniformed field/patrol officers must wear body armor in the field at all times  
1 2 d. The body armor worn must be custom-fitted to the officer  
1 2 e. Officers must be trained for the proper wear, care and maintenance of the armor  
1 2 f. Supervisors are required to inspect personnel for compliance with the body armor policy  
1 2 g. The body armor must be purchased in compliant with the most current NIJ ballistic-resistant body armor standard

**H3. As of July 1, 2012, who PAYS FOR OR CONTRIBUTES to the purchase of BODY ARMOR used by agency personnel? Please check one.**

**Yes No**

- 1 2 a. The department
- 1 2 b. The individual officer/deputy
- 1 2 c. Grant funds
- 1 2 d. Other sources, please specify: \_\_\_\_\_
- 1 2 e. Agency personnel does not use body armor.

**H4. As of July 1, 2012, which of the following types of FIREARMS were authorized for use by your agency's SWORN FIELD/PATROL OFFICERS?**

**Authorized for:**

**All Sworn Personnel    Some Sworn Personnel    Not Authorized**

- 1 2 3 a. Handgun
- 1 2 3 b. Patrol Rifle
- 1 2 3 c. Shotgun

**H5. As of July 1, 2012, which of the following types of WEAPONS were authorized for use by your agency's SWORN FIELD/PATROL OFFICERS?**

**Authorized for:**

**All Sworn Personnel    Some Sworn Personnel    Not Authorized**

- 1 2 3 a. Batons
- 1 2 3 b. Other Impact weapons
- 1 2 3 c. Soft projectiles (e.g., bean bag)
- 1 2 3 d. OC spray/foam
- 1 2 3 e. Conducted energy device (e.g., Taser™, Stinger™)

**H6. As of July 1, 2012, which of the following types of TACTICS were authorized for use by your agency's SWORN FIELD/PATROL OFFICERS?**

**Authorized for:**

**All Sworn Personnel    Some Sworn Personnel    Not Authorized**

- 1 2 3 a. Neck restraint (e.g., lateral vascular restrain)
- 1 2 3 b. Takedown tactics (e.g., straight arm bar tactic)
- 1 2 3 c. Open hand techniques
- 1 2 3 d. Closed-hand techniques
- 1 2 3 e. Leg hobble or other severe restraints

**H7. How does your agency document USE OF FORCE INCIDENTS? Check which option best describes your agency's policy and practices.**

- 1 Use of force form
- 2 Use of force documented in arrest/offense report
- 3 No formal records of use of force incidents maintained
- 4 Other method of documentation

**H8. Does your agency require documentation when the following types of WEAPONS OR TACTICS are used?**

**Yes No N/A**

- 1 2 3 a. Display of firearm
- 1 2 3 b. Discharge of firearm
- 1 2 3 c. Baton
- 1 2 3 d. Other Impact weapon
- 1 2 3 e. Soft projectile (e.g., bean bag)
- 1 2 3 f. OC Spray
- 1 2 3 g. Other chemical agent
- 1 2 3 h. Display of conducted energy device
- 1 2 3 i. Discharge of conducted energy device
- 1 2 3 j. Neck Restraint (e. g. Lateral Vascular Restraint)
- 1 2 3 k. Takedown Tactics (e.g. arm bar takedown)
- 1 2 3 l. Open hand techniques
- 1 2 3 m. Closed-hand techniques
- 1 2 3 n. Leg hobble or other severe restraints

**H9. During the 12-month period ending June 30, 2012, how did your agency record USES OF FORCE?**

3 Not applicable – did not record uses of force

**Yes No**

- 1 2 a. One report per incident
- 1 2 b. One report per officer involved
- 1 2 c. Other method used, please specify: \_\_\_\_\_

**H10. During the 12-month period, ending June 30, 2012, how many INCIDENTS did your agency record where one or more types of force were used DURING THE PROCESS OF ARREST? (If possible, do not include incidents that occurred within a holding cell or jail.)**

\_\_\_\_\_ Number of INCIDENTS of use of force

Check here if the number of INCIDENTS includes force used inside holding cells or jails

Check here if number of INCIDENTS is unknown

**H11. During the 12-month period ending June 30, 2012, how many separate REPORTS from individual officers or deputies were recorded where one or more types of force were used DURING THE PROCESS OF ARREST?**

\_\_\_\_\_ Number of REPORTS of use of force

Check here if number of REPORTS force used inside holding cells or jails

Check here if number of SEPARATE REPORTS is unknown



**SECTION I – ORGANIZATIONAL RESPONSES TO ISSUES / PROBLEMS**

**I1. As of July 1, 2012, how did your agency address the following issues, problems or tasks? For each issue, please check the column that best describes your agency’s approach to each issue.**

**For each issue or problem, check only one of the following options: 1) Specialized Unit, 2) Dedicated Personnel, 3) No Dedicated Personnel or 4) Issue / Problem not formally addressed. For issues or problems addressed by specialized unit, check whether the unit has any personnel assigned full-time or any assigned part-time or both.**

		Specialized Unit		Dedicated Personnel	No Dedicated Personnel	Issue not formally addressed
		Personnel Assigned Full-time	Personnel Assigned Part-time			
		<i>Check if any personnel were assigned to this unit on a full-time basis</i>	<i>Check if any personnel were assigned to this unit on a part-time basis</i>	<i>Check if at least one person was assigned to this issue /problem at least part-time but the agency has no specialized unit</i>	<i>Check if the agency has specialized policies, procedures, or training but no dedicated personnel or specialized unit</i>	
a.	Bias/Hate crime	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b.	Bomb/Explosive disposal	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c.	Child abuse/endangerment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d.	Cybercrime	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e.	Domestic / Intimate partner violence	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f.	Terrorism/homeland security	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g.	Traffic enforcement	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h.	Drug/alcohol impaired driving	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i.	Juvenile crime	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j.	Gangs	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
k.	Re-entry surveillance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
l.	Fugitives / warrants	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
m.	Victim assistance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
n.	Special Operations Unit	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

(e.g., SWAT, SRT)

**I2. As of July 1, 2012, how many total specialized units did your agency have that addressed the KINDS of issues or problems listed in Question I1?**

\_\_\_\_\_ Number of specialized units

**I3. During the 12-month period that ended June 30, 2012, did your agency participate in any multijurisdictional task forces? (Include only ongoing efforts. Do not include *ad hoc* or single event collaborations.)**

1 Yes      2 No

**I4. If yes to Question I3, which of the following issues were addressed by these task forces?**

**Yes No**

1 2 a. Special Operations Unit (e.g., SWAT, SRT)

1 2 b. Drugs/Counternarcotics

1 2 c. Gangs

1 2 d. Human Trafficking

1 2 e. Other, please specify (up to 3): \_\_\_\_\_