

Presented by:

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(ret)

Ms. Dana Clay,
PowerDMS

Guest: Ms. Fran
Moore, CALEA
Regional Program
Manager

2023 SCPAC ACCREDITATION MANAGER TRAINING

Q&A

NOTE.....

**Don't worry about everything we will go over today.
Understanding the accreditation process just takes
time.**



South Carolina Law Enforcement Accreditation, Inc. (SCLEA)

State Accreditation – Established in 1999



Commission on Accreditation for Law Enforcement Agencies, Inc. (CALEA)

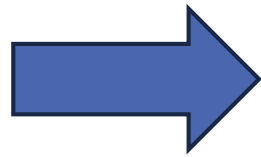
National & International Accreditation – Established in 1979



South Carolina Police Accreditation Coalition (SCPAC)

Accreditation Support Network – Established in 2003

Training Topics

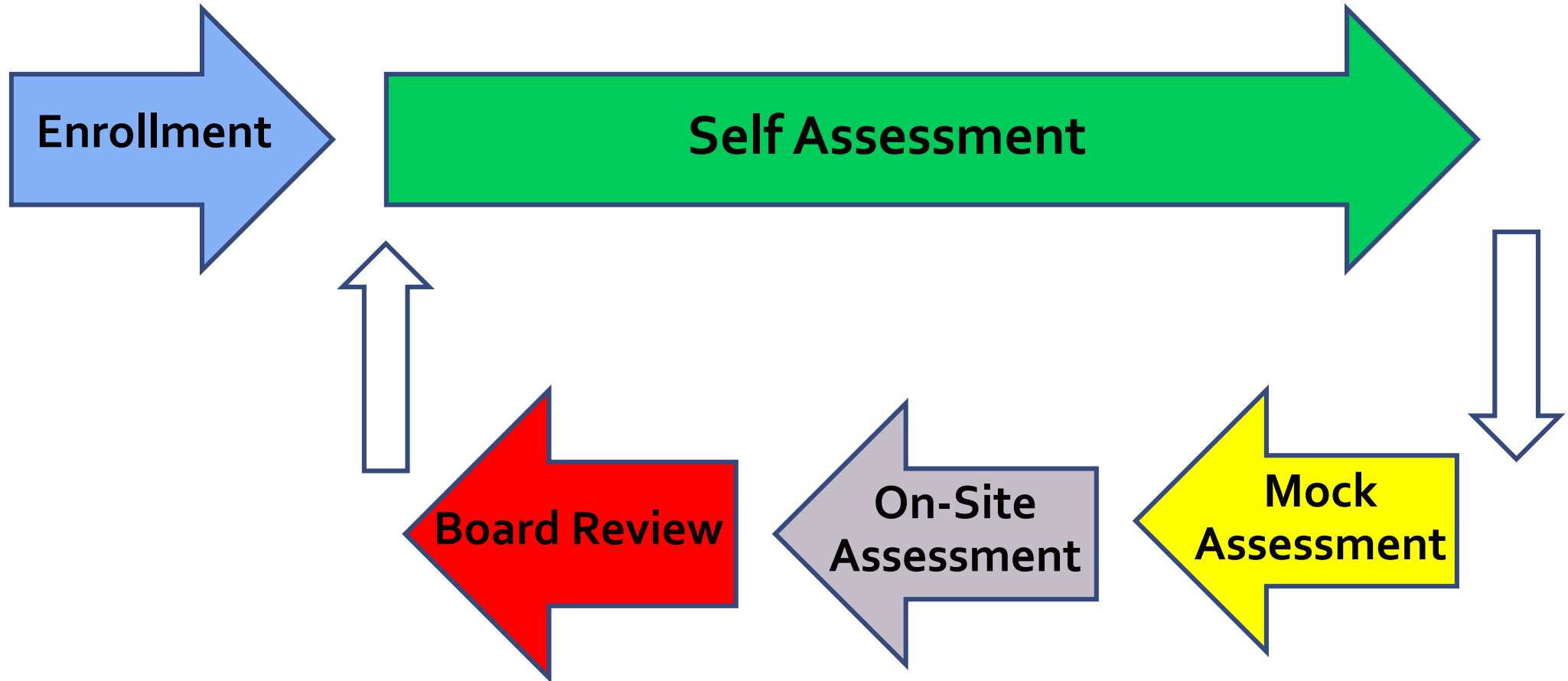


5 Step Accreditation Process

The Standards

Managing the Process

Accreditation Cycle



STEP 1 - ENROLLMENT (CALEA)

- Ms. Fran Moore serves as the Mid Atlantic Regional Program Manager for CALEA.
- Agencies can begin the CALEA accreditation process by creating an account and completing the Enrollment Package Request Form at www.calea.org/enrollment.
- The CALEA fee schedule is located on the website. Initial fees are based on the number of full-time employees. Annual continuation fees are at a lower rate.
- Fran is available to assist agencies throughout the process and answer any enrollment/accreditation questions.

STEP 1 - ENROLLMENT (SCLEA)

- Ms. Angela (Angie) Salley serves as the Accreditation Coordinator for SCLEA. Her office is located at SCLEOA in Columbia.
- Agencies can begin the State Accreditation process by contacting Angie or completing the MOU & Agency Survey at www.sc-lea.org.
- The State fee schedule is located on the website. Initial fees are based on the number of full-time employees. Annual continuation fees are the same as the initial fee.
- SCLEA has established a geographical team of Accreditation Advisors to assist agencies throughout the process.

Piedmont

Byron Snellgrove
bsnellgrove@sc-lea.org
803-518-3433

Midlands

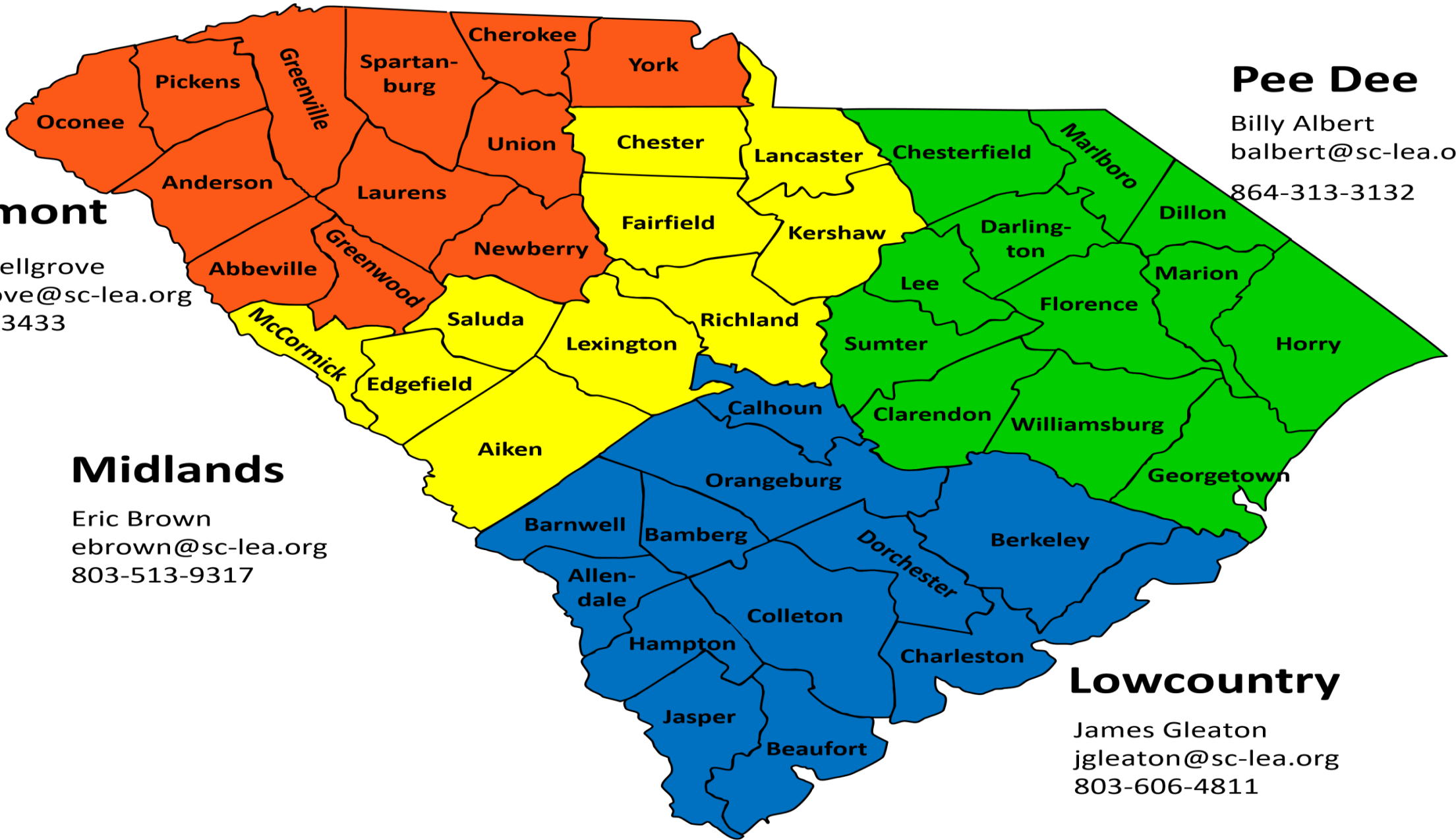
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Lowcountry

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ACCREDITATION CYCLES

CALEA: Initial assessment is 3 years for law enforcement; 2 years for all other programs.

Reaccreditation cycle is 4 years for all CALEA programs, with annual compliance reviews.

SCLEA: Initial assessment is 3 years.

Reaccreditation cycle is 3 years, with annual compliance reviews.

STEP 2 - SELF ASSESSMENT

- Get to know your Program Manager and/or Accreditation Advisor;
- Conduct a comprehensive policy review;
- Create, modify written directive system;
- Ensure practice = policy;
- Attend conferences / training sessions;
- Identify key personnel and provide training for personnel who will be assigned specific responsibilities;

STEP 2 - SELF ASSESSMENT cont.

- Join the SCPAC;
- Monitor standard changes for updates;
- Generate proofs or other evidence to verify compliance with the applicable standards;
- Establish agency systems to ensure accreditation maintenance (inspections, audits, reports, analyses, etc.);
- Create a virtual folder for each standard. SCLEA allows actual paper folders.

Self Assessment

Compare

Compare your Policies to the Standards to determine if they comply with the Standards.

Address

Address any issues by adding / revising Policies.

Identify

Identify what documentation (proof) you will need to verify your agency is following its Policies.

Gather

Gather proofs and enter them into your files.

NOTE.....

Agencies have one calendar year to come into compliance with added/revised standards.

STEP 3 - ASSESSMENT

- Contact SCPAC to arrange for a MOCK assessment;
- Prepare and submit agency information and assessment documents* to lead assessor;
- **CALEA:** Participate in remote web-based documentation review;
- Participate in site-based assessment;
- Review assessment report provided to agency.

NOTE.....

Use the mock to fine-tune your files, not create them!

Mocks are designed to precede an onsite by several months. Don't try to schedule a mock one month and the onsite the next month.

Give yourself enough time to fix errors and omissions identified during the mock.

On-Site Preparations

- Publish a Public Notice at least 30 days prior to the on-site.
- Establish two focus areas.
- Provide the Lead Assessor with:
 - A copy of the Public Notice
 - The agency's most recent Annual Report, if applicable
 - The agency's self assessment logs
 - An on-site agenda
 - Current agency survey

On-Site Preparations cont.

Provide the Lead Assessor with an Agency Profile that includes:

- Description and history of the community
- Background of the jurisdiction/area
- Background or history of the agency
- Organization chart
- Future issues facing the agency and its service community

On-Site Preparations cont.

- Contact on-site assessors prior to arrival to determine food/drink/lodging preferences and any special requirements/requests.
- Provide lodging and meals for the assessors during their stay.
- Ensure access to the Accreditation Manager and CEO, or designee during the on-site assessment.
- Provide an adequate workspace for the assessors.

NOTE.....

Your CEO must notify the Program Manager in writing when your agency has completed self-assessment and is prepared for the onsite review.

On-Site Resources

Staffing:

- CEO / Command Staff
- Accreditation Manager
- Accreditation Team
- Technology
 - Computer
 - Internet Access

Avoid:

- Major Community Events
- Key Staff Vacancies
 - External Training
 - Vacations
 - Holidays

Resource Table



CALEA Site-Based Assessment Cycles

Site-Based Assessment

- Oct 1 thru mid-Dec
- Feb 1 thru mid-Apr
- Jun 1 thru mid-Aug

Award Presentation

- Spring Conference (MAR)
- Summer Conference (JUL)
- Fall Conference (NOV)



SCLEA

On-Site Assessment Cycles

Site-Based Assessment

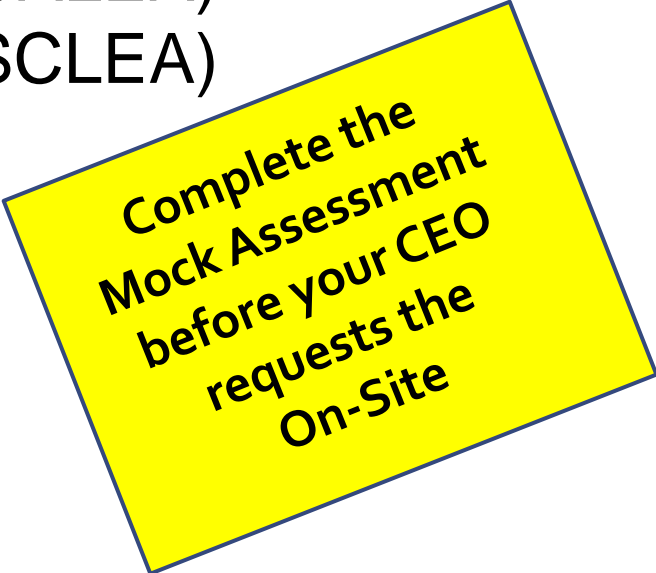
- Nov-Dec-Jan
- Feb-Mar-Apr
- May-Jun-Jul
- Aug-Sep-Oct

Award Presentation

- March Council Meeting
- June Council Meeting
- September Council Meeting
- December Council Meeting

Backward Scheduling

- Mock Assessment
 - Schedule at least 6 months prior to On-Site (CALEA)
 - Schedule at least 3 months prior to On-Site (SCLEA)
- On-Site Assessment
 - Written Request by CEO is required
 - Make Request 6 months in advance (CALEA)
 - Make Request 3 months in advance (SCLEA)
- Remote Web-based Assessment (CALEA)
 - 40 days prior to Site-based Assessment



Complete the
Mock Assessment
before your CEO
requests the
On-Site

On-Site Review - CALEA

- Two assessors for two days; or three days for CALEA Advanced
- Agency Tour, Staff Introductions and an Entrance Interview
- Interviews of Staff / Community (based on focus areas)
- Public Information Session (if required)
- Public Call-in Session
- Debriefing on Last Day

On-Site Review - SCLEA

- Prior to visit: File review conducted by SCPAC assessors
- Two assessors on-site for two days
- Agency tour
- Interviews of staff & community members
- Debriefing on last day

#4 COMMISSION/COUNCIL REVIEW

- The Commission/Council will review the onsite assessors' final report and invite the agency to attend an assessment hearing at the next CALEA conference banquet or the quarterly SCLEA Council meeting.
- If compliance requirements are achieved, the Commission/Council will award accreditation.
- The agency is encouraged to promote their achievement to the community!

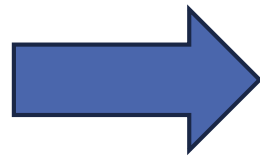
#5 MAINTAINING COMPLIANCE

- At this point, the agency reenters the Self-Assessment Phase and must maintain and prove compliance with applicable standards during each subsequent three (SCLEA) or four-year (CALEA) cycle.
- Accreditation Managers must maintain agency information & statistical tables and participate in annual assessments.
- SCLEA clients must renew their MOU with the Program Manager.

NOTE.....

The agency's reaccreditation cycle begins the day after the onsite assessors leave the agency.

Training Topics



5 Step Accreditation Process

The Standards

Managing the Process

NOTE.....

Read the Standards Manual.

Standards Manual

- Introduction
- The Standards
- The Process
- Responsibilities
- Appendices
 - Time-sensitive Standards
 - Statistical Tables
 - Glossary

Chapter Narratives

NOTE.....

Identify budgetary concerns as you go through each standard:

- Facility changes
- Equipment upgrades
- New programs
- Increased training



Anatomy of a Standard

2.1.1

Standard Number

COMPLIANCE LEVEL

(M M M M)

Geographical Boundaries

Standard Title

(A B C D)

Agency Size

A written directive delineates the specific geographical boundaries of the agency's jurisdiction.

STANDARD STATEMENT

Commentary

It is fundamental that the agency clearly describes, in writing, the geographical boundaries of its jurisdiction. Situations involving overlapping or ambiguous territorial jurisdiction should be avoided. A detailed official map, including the boundaries of the jurisdiction, is standard.

COMMENTARY

Guidance / Recommendations

Is the standard Mandatory or Other than Mandatory for your agency size (MMMM)? *

21.2.4

Print

(N/A Q M M) Workload Assessments

A written directive requires documented workload assessments of all organizational components be conducted at least once every four years and shall include:

- a. designation of position responsible for assessments;
- b. assessment methodology to be used for each component; and
- c. conclusions and recommendations for distribution / allocation of personnel.

300+ Personnel
75-299 Personnel
25-74 Personnel
1-24 Personnel

Personnel = all sworn and non-sworn employees

* All State (SCLEA) Standards are mandatory, unless N/A

Standard Types – **Written Directive**

2.1.1

(M MMM) Geographical Boundaries

A **written directive** delineates the specific geographical boundaries of the agency's jurisdiction.

Commentary

It is fundamental that the agency clearly describes, in writing, the geographical boundaries of its jurisdiction. Situations involving overlapping or ambiguous territorial jurisdiction should be avoided. A detailed official map, including the boundaries of the jurisdiction, may satisfy the requirements of this standard. (M MMM)

Section 3.0 of CALEA's Guiding Principals (Appendix B) provides insight on what constitutes a written directive and when to use a directive (Also refer to chapter 3 of CGSAM)

Written Directives

EXAMPLES ...

- General Orders / State Laws
- Policies and Procedures
- City or County Ordinances
- Standard Operating Procedures / Guidelines
- Personnel Orders
- Special Orders
- Memos

The letters 'WID' are rendered in a bold, purple, 3D font with a slight shadow, positioned to the right of the list of examples.

Standard Types – Written Procedure

14.1.1 (CS)

(M MMM) Grievance Procedure

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

- a. identification of matters that are grievable (scope) and the levels in the agency, institution, or government to which the grievance may be filed and/or appealed;*
- b. establishment of time limitations for filing or appealing the grievance to the next level;*
- c. a description of the type of information to be submitted when filing a grievance;*
- d. establishment of procedural steps and time limitations at each level in responding to grievances or appeals; and*
- e. establishment of criteria for employee representation.*

EXAMPLE.....Grievance Procedure

- a. The Supervisor will address the employee's concern and take the appropriate action.
- b. The Sheriff will be made aware of the situation.
- c. Within the next five working days, the member may appeal the matter to the next Supervisor in the employee's chain of command in a written memorandum.
- d. This process will continue, until resolved. The written appeal must be filed within five working days of the Supervisor's decision.

Standard Types – **Written Plan**

22.3

The agency has a **written plan** for responding to critical incidents (e.g. natural and man-made disasters, pandemics, civil disturbances, mass arrests, bomb threats, active threats, hostage and/or barricaded persons, terrorism, etc.) This plan will follow Incident Command System (ICS) protocols and will include a command, operations, planning, logistics and finance/administration function.

Commentary...

Agencies are encouraged to identify specific areas of risk and hazard which may be unique to their jurisdiction. Agencies should develop plans to address their known risks in addition to other critical risks addressed in the standards.

EXAMPLE.....Deployment Plan

1. Upon receipt, **the employee will** provide a copy of the deployment orders to his / her immediate supervisor, who will act as the agency point of contact.
2. **An interview will also be scheduled** with the agency's Payroll Specialist to determine / recalculate salary compensation, insurance retention and leave benefits, including compensatory and vacation hours.
3. To protect a sworn employee's certification status, **the employee's supervisor will forward a copy of the deployment orders** to the Training Unit for submission to the South Carolina Criminal Justice Academy.
4. **Agency-owned firearms will be retained and stored** at the Training Unit and returned to the employee at the end of the deployment period; however, if needed, firearms may be reassigned to another employee.

Standard Types – **Bulleted**

4.2.4 (LE1)

(M MMM) (LE1) Analyze Reports from Use of Force

Annually, the agency conducts an analysis of its use of force activities, policies and practices. The analysis should identify:

- a. date and time of incidents;
- b. types of encounters resulting in use of force;
- c. trends or patterns related to race, age and gender of subjects involved;
- d. trends or patterns resulting in injury to any person including employees; and
- e. impact of findings on policies, practices, equipment, and training.

Commentary...

...and Time Sensitive

NOTE.....

	SCLEA	Law Enforcement	Communications	Training Academy
Accounting/Inventories	2	1	1	1
Analysis	2	5	3	1
Review	4	15	6	4
Audits	3	3	0	1
Evaluations/Tests	3	2	3	3
Inspections	10	14	3	1
Workload Assessments	0	1	1	0

Keep track of time-sensitive standards

Standard Types - Conditional

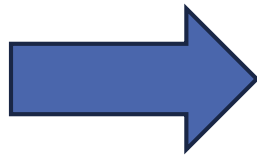
1.3.4

(O O O) Openings for Specialized Assignments

If the agency utilizes specialized assignments, the agency announces anticipated openings for specialized assignments agency-wide and fills those positions through a selection process.

Commentary...

Training Topics



5 Step Accreditation Process

The Standards

Managing the Process

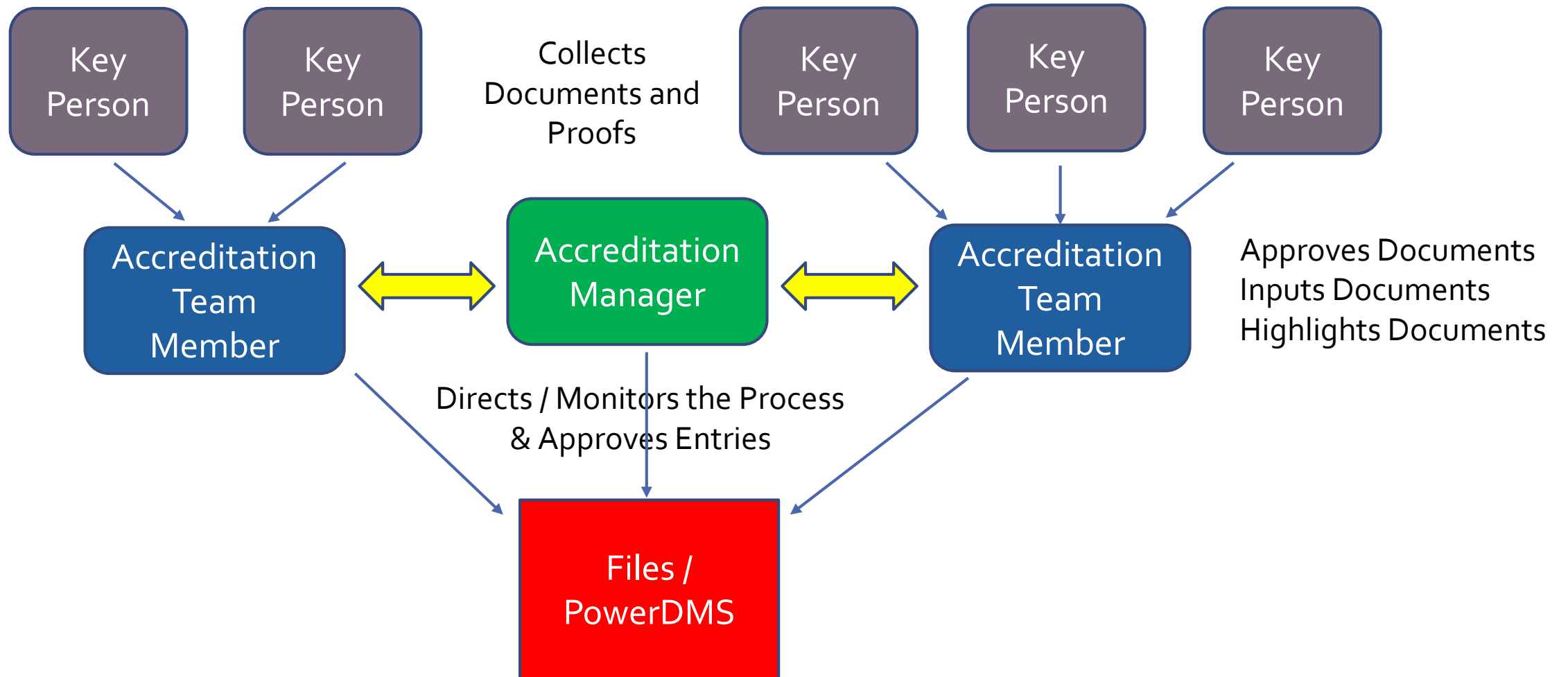
Accreditation Management Team

Identify Key Personnel

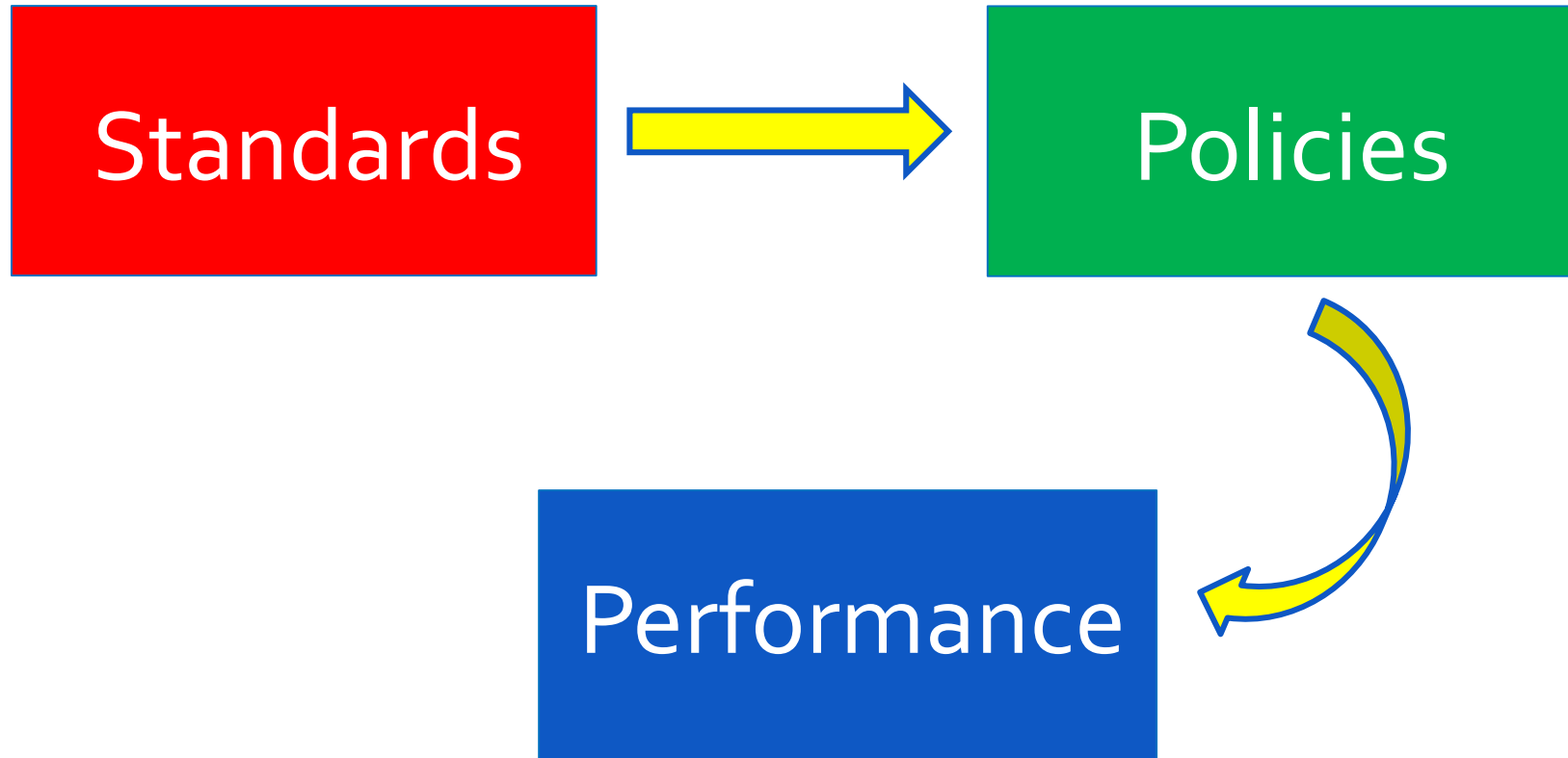
Key personnel are responsible, dependable people with teamwork attitudes,

Properly nurtured, key personnel deliver results – exactly the way you need them.

Team Concept



Gap Analysis



Gap Analysis

Read each standard and bullet literally;
(words have meaning).

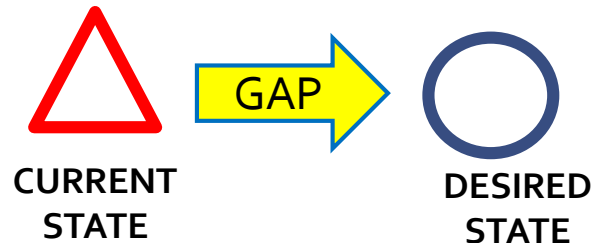
All

Written Report

Analysis

Gap Analysis - CLOSE THE GAP

- Update your policies and/or procedures.
- Always include affected personnel when writing or amending policies and procedures.
- Listen to your operational personnel.
 - Are the procedures practical?
 - Will proof be generated naturally?



Develop Policies

Don't simply
adopt another
agency's SOP
manual

Model Policies

- Accreditation Support Network (SCPAC)
- IACP Policy Center (*for members*)
- Similar State Agency (PD or SO)
- Public Safety Communications Accreditation Support Network ([PSCASN](#))

NOTE.....

Standards state **what** must be accomplished ...
not **how** to achieve compliance.

NOTE.....

- **Initial accreditation**

- proof must be shown from the agency's enrollment date or the date the WD is effective.

- **Reaccreditation**

- proof must be shown for all three/four years for each standard and/or bullet.
- reaccreditation years run from onsite to onsite – NOT calendar years.

- **CALEA Continued Compliance**

- for reaccreditation, copy all WD and Proofs to your new assessment and maintain 4 continuous years of compliance, dropping off a year when you add a year.

Collect Proofs

Incident Reports
Crime Analysis Reports
Completed Forms
Analyses, Reviews, Audits
Photographs
Videos & Audios
News Stories



Collect Proofs

CAD Reports
UOF Reports
Traffic Tickets
Accident Reports
Job Applications
Promotion Packets
Leave Requests



Collect Proofs

Memos

Emails

Tweets

Screen Prints

Handbooks



NOTE.....

Proofs are acceptable if they reasonably satisfy the requirements of the standard AND the agency's policy and practice are equal.

NOTE.....

Agencies can have policies that are more restrictive than the standards BUT policies cannot be less restrictive. If an agency has a policy/directive that is more restrictive it becomes the standard with which the agency must comply.

Example.....

*1.1 A written directive requires all personnel, prior to assuming sworn status, to **take** and subsequently abide by **an oath** of office to enforce the law and uphold the nation's constitution or basic law of the land and, where applicable, those of governmental subdivisions.*

DEPARTMENT POLICY:

All police personnel, before assuming sworn status, shall be required to read and sign the State of South Carolina's Oath for Police Officers.

NOTE.....

If the agency does not have a proof for an applicable year, a NOTE should be added to the file explaining why.

Build Files

PowerDMS

- Attach WDs
- Attach Proofs
- Add Note(s)
 - INT = interview
 - OBSV = observation
 - N/A = not applicable
 - No Occur = did not occur

The most important thing is consistency!

Paper Files (one per standard)

- Individual Standards Status Report (ISSR)
 - List WDs
 - List Proofs
 - Add Agency Notes(s)

Build Files

(no bullets)

- WD.GO 30 Vehicle Pursuit
- WD.GO 43 Use of Force
- Proof.2020(1) Incident Report
- Proof.2020(2) Incident Report
- Proof.2021 CAD Report
- Proof.2022 Note. No Occur


Build Files

(bullets)

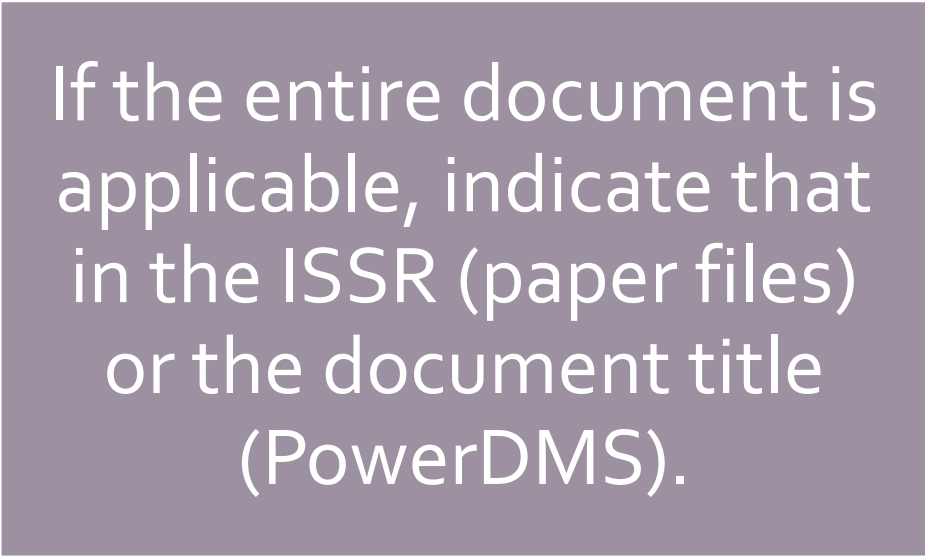
- A.WD.GO 17 Property Control
- A.Proof.2020 Incident Report
- A.Proof.2021 Incident Report
- A. Proof.2022 News Article
- B.WD. GO 21 Evidence Control
- B.Proof.2020 Evidence Form
- B.Proof.2021 Evidence Form
- B.Proof.2022 Evidence Form
- B.INT Evidence Custodian

Build Files

Highlight APPLICABLE
wording only

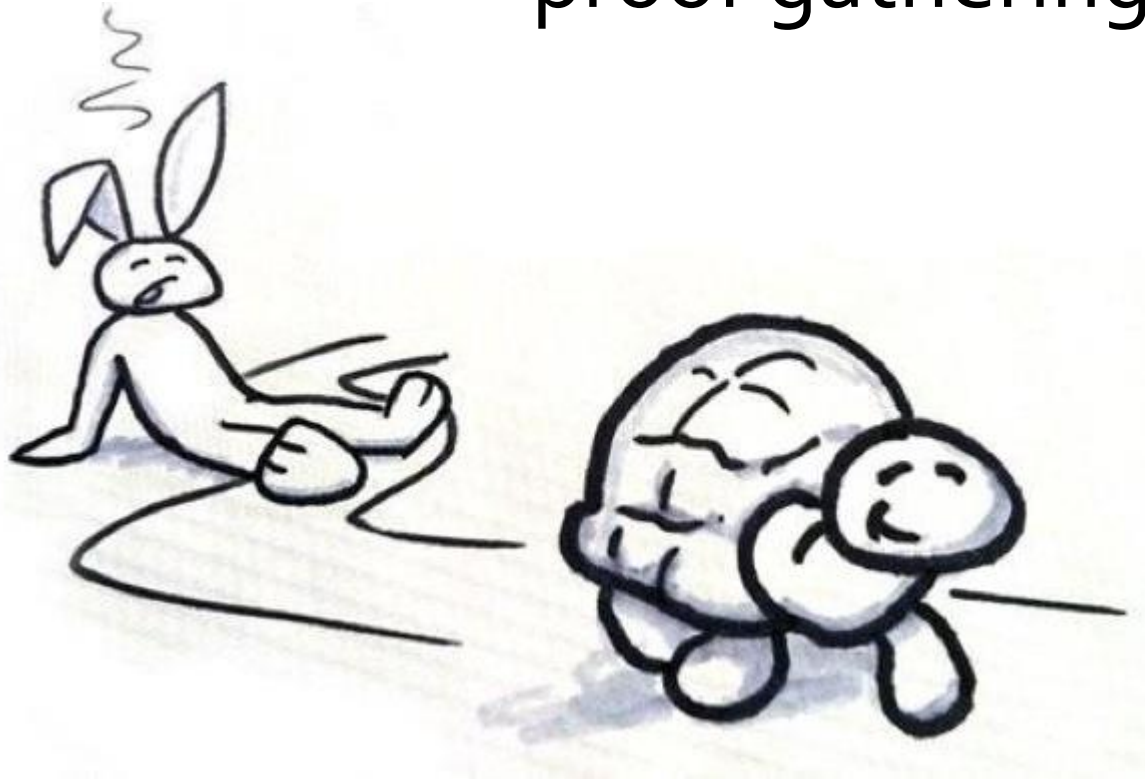


If the entire document is
applicable, indicate that
in the ISSR (paper files)
or the document title
(PowerDMS).



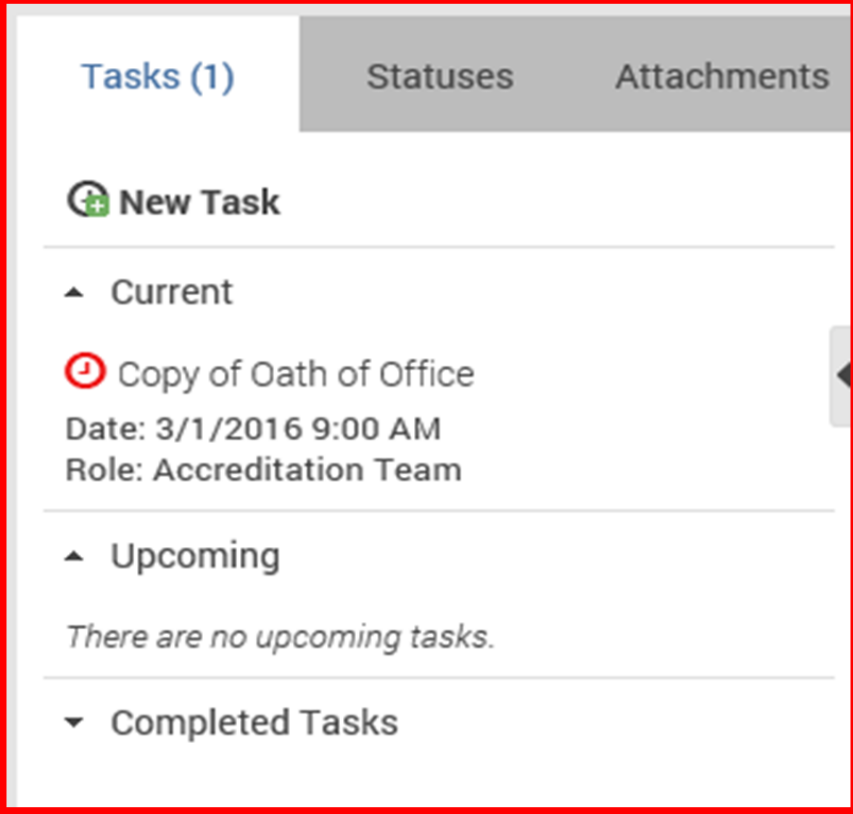
Build Files / DMS Daily

Pace yourself – set goals each day/week/month for proof gathering



NOTE.....

- Calendar
- Outlook Tasks
- Google Tasks
- PowerDMS Tasks



The screenshot displays a task management interface with a red border. At the top, there are three tabs: "Tasks (1)", "Statuses", and "Attachments". Below the tabs is a "New Task" button with a plus icon. The main content area is divided into three sections: "Current", "Upcoming", and "Completed Tasks". The "Current" section contains one task: "Copy of Oath of Office" with a red clock icon, dated "3/1/2016 9:00 AM" and assigned to the "Accreditation Team". The "Upcoming" section is empty, showing the text "There are no upcoming tasks." The "Completed Tasks" section is currently collapsed.

NOTE.....

	A	B	C	D	E	F	G	H	I	J	K
1	LE1	Other than mandatory	Standard	Number	documents	2019	2020	2021	2022	2023	2024
2	X		Oath of Office	1.1.1	Copies of Oaths of Office	X	X	X			
3	X		Code of Ethics	1.1.2	List of signed policy, In-service training, Ethics every two years	X	X	X			
4		O	Diversion Programs	1.1.3	Pre-Trial Intervention Letter from the Solicitors office. Incident Report showing the incident arbitration	X	X	X			
5			Consular Notification	1.1.4	Incident Report showing a consular notification	X	X	X			
6	X		Legal Authority Defined	1.2.1	A warrant completed by a Class I Officer showing the warrant was served by a class 1 officer. A traffic ticket written by an Reserve Deputy	X	X				
7			Legal Authority to Carry/Use Weapons	1.2.2	Copies of Glock & Firearm Policy Test & Fire Arms Qualification logs and screen shot of hire date	X	X				
8	X		Compliance with Constitutional Requirements	1.2.3 a	Public Contact Forms showing field interview. Incident Report showing investigative detention being placed on individual and then released.	X	X	X			

NOTE.....

Get a Mentor! Develop a working relationship with a nearby accredited agency.

NOTE.....

If the standard calls for an Analysis, analyze the data!

- An analysis is a process for identifying and analyzing patterns or trends based on agency records, reports, processes, etc.
- An analysis should include plans of action to address training needs, policy modifications, agency liability and agency successes.

NOTE.....

Treat each bullet as if it were a separate standard. If necessary, track them separately on your proof tracking spreadsheet.

- Include proofs for each year, for each bulleted item.

NOTE.....

Stay consistent!

- Keep proofs in date order.
- Keep WD & proof labels consistent.
- Remember to highlight ...but highlight only the applicable parts of each WD & proof.

ANNUAL REVIEWS

CALEA: conducted by a Compliance Services Member (CSM) around the award anniversary for years 1-3 and 40 days prior to the site-based assessment for year 4.

SCLEA: conducted by the Program Administrator.

File Issues.....

File Maintenance:

- File is generally in compliance but was missing something that was added to strengthen compliance.

Applied Discretion:

- File is in compliance, after on-site adjustments were made.

Not in Compliance:

- The agency's policy and/or proofs do not meet the required standard.

Attendance
certificates will
be emailed to
you.

Q&A

CONTACT
INFORMATION

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