



NEW YORK STATE LAW ENFORCEMENT ACCREDITATION PROGRAM

ANNUAL COMPLIANCE SURVEY FOR ACCREDITED AGENCIES

All accredited law enforcement agencies must demonstrate continued compliance with program standards in order to maintain their accredited status. As such, the accurate completion and timely submission of this Annual Compliance Survey is required of all accredited agencies.

Any agency that is unable to maintain compliance with any of the program standards must notify Office of Public Safety (OPS) program staff within 30 days. Once notified, OPS program staff will work with the agency to determine if they have developed an effective corrective action plan to regain compliance. If the non-compliance persists, OPS program staff may conduct a site-visit to the agency to determine the extent of the problem and what steps must be taken to correct it.

The Accreditation Council may at any time require chief law enforcement officers of accredited agencies to submit documentation which clearly demonstrates the agency's ongoing compliance with selected standards. If the review of these selected files indicate that the agency is out of compliance, OPS may meet with appropriate staff members to discuss ways to improve the agency's maintenance activities.

Note: This report is subject to the provisions of the Freedom of Information Law and may be subject to review by third parties.

Agency Name:

Date of Accreditation:

Date of Reaccreditation:

Annual Report #:

Report Due on:

Sworn Members: **Full Time** **Part-Time**

Program Manager Name:

Email:

Phone:

I. Compliance Monitoring Activities

1. What steps does the chief law enforcement officer (CLEO) take to ensure that the agency is maintaining compliance with accreditation program standards?

2. What formal role does senior staff or supervisory personnel (other than the CLEO) have in ensuring that officers are following procedures required for accreditation?

3. Do agency accreditation staff meet or confer regularly with command staff regarding the program? Yes No If so, please describe.

4. How does the agency program manager ensure the accreditation program files are kept up-to-date and that the agency can demonstrate ongoing compliance with standards?

¹ As required by NYS Law Enforcement Accreditation Council policy *Agency Responsibilities Following Accreditation*.

5. How often are the files updated with supporting documentation?

6. Does the agency program manager have other staff assigned to assist with program maintenance? Please describe.

7. What measures are in place to identify non-compliance and report it to DCJS within 30 days of discovery¹?

¹ As required by NYS Law Enforcement Accreditation Council policy Agency Responsibilities Following Accreditation.

II. Compliance with Program Standards

1. Is your agency currently in compliance with all program standards? Yes No

If no, please list:

- a. The standard number;
- b. Reason(s) for non-compliance;
- c. The length of time for which the agency has not been in compliance; and
- d. A plan and timetable for re-establishing compliance.

2. Has your agency had any problems in the last 12 months that had a substantial impact on your ability to maintain compliance with the standards? (e.g. budget or manpower cuts, major reorganization, other unforeseen circumstances.) Yes No

If so, please explain and indicate how your agency has adjusted to ensure compliance continues to be met.

² For instance, previous collective bargaining agreements prohibited performance evaluations but the newly ratified contract allows them (which would require the agency to now comply with 13.1); or the agency no longer administers aids for detecting deception (which changes the way the agency complies with 50.6).

3. During the last 12 months has your agency made revisions to policies to the extent that it has significantly changed how you meet certain standards? (*Please DO NOT include any revisions made to comply with new or revised standards.*) Yes No
If so, please explain.

4. During the last 12 months, has your agency made any changes to operations, services, or resources that has affected your agency's ability to comply with a certain standard(s)²? Yes No

If so, please explain what steps your agency has taken to begin complying with the standard(s) noted.

5. Is there any other information pertaining to your agency's compliance with program standards that you would like to bring to the attention of the Accreditation Council?

² For instance, previous collective bargaining agreements prohibited performance evaluations but the newly ratified contract allows them (which would require the agency to now comply with 13.1); or the agency no longer administers aids for detecting deception (which changes the way the agency complies with 50.6).

Has your agency completed the following standard requirements within the last 12 months?

STANDARD 5.2 - Quarterly budget/financial Reports:

Yes *Date completed*

No - please explain.

STANDARD 7.3 - Property room inventory and audit:

Yes *Date INVENTORY completed* *Date AUDIT completed*

No - please explain.

Audit due to a change in the evidence custodian:

Yes *Date completed*

No -please explain.

N/A *(no change in
custodian)*

STANDARD 13.1 - Personnel Evaluations

Yes *Date completed*

No *If no, please explain.*

STANDARD 33.1 - Annual In-Service Training

Is the agency on track to complete the required annual in-service training? Yes No

If no, please explain.

STANDARD 34.2 - Annual Supervisory Training

Is the agency on track to complete the required annual supervisory training?
Yes No

If no, please explain.

III. Program Impact

1. Please note any positive (or negative) impact the accreditation program has had on your agency (such as litigation benefits, insurance premium discounts, staff preparedness, agency professionalism, public relations, etc.).

IV. Chief Law Enforcement Officer's Certification:

I hereby certify that this agency can demonstrate ongoing compliance with all applicable accreditation standards during the last 12 months except where indicated above.

Chief Law Enforcement Officer's Signature:

Date:

Survey Prepared By: