1-9 COMPLIANCE AND OVERSIGHT DIVISION

Related SOP(s), Form(s), Other Resource(s), and Rescinded Special Order(s):

A. Related SOP(s)
   
   3-33 Performance Evaluation and Management System (PEMS) (Formerly 3-20 and 3-49 Early Intervention and Recognition System)
   3-50 Forms Control (Formerly 3-22 and 3-27)
   3-52 Policy Development Process (Formerly 3-29 and 3-65)

B. Form(s)
   
   Policy and Procedure Unit Manual

C. Other Resource(s)
   

D. Rescinded Special Order(s)
   
   None

1-9-1 Purpose

The purpose of this policy is to outline the roles and responsibilities of Compliance and Oversight Division personnel who are tasked with compliance oversight and ensuring that the Albuquerque Police Department (Department) continues to progress as an organization.

1-9-2 Policy

It is the policy of the Department to track, assess, and implement process improvements to ensure ongoing compliance with Standard Operating Procedures (SOP) that memorialize the provisions of the Department’s consent decree. It is also the policy of the Department to ensure that supervisors are provided with the resources that they need to promote the efficient and effective utilization of time and Department personnel.

1-9-3 Definitions

A. Audit
   
   Internal inspections by Performance Metrics Unit (PMU) personnel, or management of Department processes and Department programs that further the Department’s mission.

B. Performance Evaluation and Management System (PEMS)
A process that analyzes employee data that are derived from City of Albuquerque and Department systems that enable the Department to define performance ranges and thresholds.

D. Policy Development Process

A rigorous process that enables stakeholders to provide recommendations for improvement and enhancement of the Department’s SOPs. This process serves as one of the Department’s mechanisms to promote ongoing community participation, including participation by members of the CPOAB, MHRAC, and the Community Policing Councils, and facilitates compliance with CASA provisions governing policy development, review, and implementation.

6 1-9-4 Performance Evaluation and Management System (PEMS) Section

A. PEMS Section Personnel

1. PEMS Section personnel shall:
   a. Be responsible for managing the Department’s Performance Evaluation and Management System;
   b. Track performance assessments and monitoring plans to ensure that they are consistent with SOP Performance Evaluation and Management System (PEMS) (refer to SOP Performance Evaluation and Management System for sanction classifications and additional duties);
   c. Assist Department supervisors in completing a PEMS Assessment as required; and
   d. Assist Department supervisors in the development of PEMS monitoring plans as required.

B. PEMS Section Lieutenant

1. The PEMS Section Lieutenant shall:
   a. Be responsible for the effective supervision and management of PEMS Unit personnel;
   b. Submit the annual PEMS report by the 25th day of January; and
      i. If the 25th falls on a non-work day, the PEMS Section Lieutenant shall submit the annual report by the next business day.
   c. Submit a quarterly status report by the 15th day of April, July, and October.  
      i. If the 15th day falls on a non-work day, the PEMS Section Lieutenant shall submit the quarterly status report by the next business day.

6 1-9-5 Compliance Section

A. Performance Metrics Unit (PMU)
1. PMU personnel shall:
   a. Implement inspections in accordance with the inspection schedule or as directed by the PMU Manager;
   b. Submit inspection reports to the PMU Manager for review and approval; and
   c. Retain and archive all documentation of audits for five (5) years.

2. The PMU Manager shall:
   a. Be responsible for the effective supervision and management of PMU personnel;
   b. Track and develop monthly and/or annual inspection schedules;
   c. Distribute inspection reports to Department personnel; and
   d. Prepare monthly reports for the Compliance Division as required.

B. Implementation Unit

1. Implementation Unit personnel shall:
   a. Facilitate process improvement initiatives with input from internal and external stakeholders;
   b. Assist in identifying and designing new processes and/or addressing process-related issues to improve efficiency and effectiveness within a specified area;
   c. Establish a Department-wide approach for business processes to ensure successful delivery of project outcomes aligned with organizational strategic priorities;
   d. Track progress for assigned project or process improvement initiatives through the use of a task management tool;
   e. Work with Department personnel to define the current state of business operations and processes, identify opportunities for improvement, and make recommendations in support of the Department’s mission, vision, and strategic goals;
   f. Consult with PMU personnel to provide feedback on internal controls proposed as new processes and/or procedures are developed; and
   g. Receive final inspection reports from PMU personnel to review and determine whether business processes need to be re-evaluated.

2. The Implementation Unit Manager shall:
   a. Supervise Implementation Unit personnel;
   b. Lead process improvement and/or problem-solving efforts with internal and external stakeholders;
   c. Be responsible for maintaining data systems used by Implementation Unit personnel; and
   d. Be responsible for reporting Implementation Unit activity to the chain of command as needed.
C. Policy and Procedure Unit

1. Policy and Procedure Unit personnel shall:

   a. Serve as the City and the Department’s central point of contact for the policy development process;
   b. Adhere to the requirements outlined in SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties);
   c. Adhere to the requirements outlined in the Policy and Procedure Unit Manual; and
   d. Assist in the development of Special Orders as outlined in SOP Department Orders (refer to SOP Department Orders for sanction classifications and additional duties).

2. The Policy Manager shall:

   a. Manage Policy and Procedure Unit personnel;
   b. Function as an advisor to Policy and Procedure Unit personnel when applicable;
   c. Assign a specific list of SOPs to the Policy Coordinator, SOP Liaison, or themselves to act as a lead who oversees the SOP as it goes through the policy development process;
   d. For each SOP, track and analyze policy development process start and end dates to assess the effectiveness and efficiency of the process; and
      i. If the data suggest there are areas for improvement, such as steps in the process that go beyond the average time for completion, the Policy Manager continually shall collaborate with Policy and Procedure Unit personnel to identify, then implement potential changes.
      ii. The Policy Manager shall manage and track process improvement activities.
   e. Function as the Policy and Procedure Unit representative and liaison between internal and external stakeholders and the Policy and Procedure Unit during:
      i. CPOA meetings and its subcommittee meetings;
      ii. Force Review Board (FRB) meetings;
      iii. MHRAC meetings; and
      iv. Meetings between the U.S. Department of Justice, Independent Monitoring Team, and the Department.

3. The Policy Coordinator shall facilitate the Policy Owner or their designee, Department personnel, and external stakeholders' review and development of an SOP while it goes through the policy development process, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties).

4. The SOP Liaison shall:
a. Perform Unit operations that facilitate the review, development, and implementation of an SOP while it goes through the policy development process, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties);
b. Maintain policy drafts and SOPs that have been implemented in the Department’s document management system, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties); and
c. Be responsible for the control of Department forms, consistent with SOP Forms Control (refer to SOP Forms Control for sanction classifications and additional duties).
Related SOP(s), Form(s), Other Resource(s), and Rescinded Special Order(s):

A. Related SOP(s)

- 3-33 Performance Evaluation and Management System (PEMS) (Formerly 3-20 and 3-49 Early Intervention and Recognition System) (Formerly 3-20 and 3-49)
- 3-50 Forms Control (Formerly 3-22 and 3-27)
- 3-52 Policy Development Process (Formerly 3-29 and 3-65)
- 3-53 Self-Assessments and Inspections

B. Form(s)

- Community Policing Council Recommendation Form
- Policy and Procedure Unit Manual
- Policy and Procedure Unit SOP Recommendation Form

C. Other Resource(s)

- None

D. Rescinded Special Order(s)

- None

1-9-1 Purpose


8-2 PERFORMANCE METRICS UNIT

Policy Index

8-2-1 Purpose
8-2-2 Policy Statement
8-2-3 Definitions
8-2-4 General Information
8-2-5 Creating an Audit
8-2-6 Executing an Audit
  Process Map of an Audit
8-2-7 Assessments
  Appendix: Audit Plan Template
8-2-1 Purpose

The purpose of this policy is to outline the roles and responsibilities of Compliance and Oversight Division personnel who are tasked with compliance oversight and ensuring that the Albuquerque Police Department (Department) continues to progress as an organization. This policy provides guidance, oversight, accountability, and transparency in an effort to continuously improve the quality of law enforcement services to the community members of Albuquerque. This policy outlines the functions and responsibilities of the sections and Performance Metrics Unit (PMU). In addition, it outlines the department responsibility for cooperation during these engagements.

8-2-2 Policy Statement

The Performance Metrics Unit (PMU), by the authority of the Chief of Police, is responsible for ensuring independent and objective review of procedures and practices to proactively identify risk for the department. To accomplish this, the PMU coordinates and conducts audits in accordance with the Generally Accepted Government Auditing Standards (GAGAS) and assessments. The unit is charged with reporting recommendations or observations identified by audits and assessments. Compliance and Oversight Division.

Exception: Line inspections and video review shall be handled by unit/squad sergeants and by the Performance Review Unit.

1-9-2 Policy

It is the policy of the Albuquerque Police Department (Department) to track, assess, and implement process improvements to ensure ongoing compliance with Standard Operating Procedures (SOP) that memorialize the provisions of the Department’s consent decree. The Department is committed to ensuring that supervisors are provided with the resources that they need to promote the efficient and effective utilization of resources, time and personnel.

8-2-3 1-9-3 Definitions

A. Audits

Audits generally fall into three categories: financial, attestation (process of validating that something is true) and compliance/performance audits. Conducted internally both at random or directed Internal inspections by the PMU.

B. Auditor

A term to describe an individual, regardless of job title, performing work in accordance with GAGAS within the PMU.
8-2-4 General Information

A. In order to maintain independence and objectivity, the PMU function has no direct responsibility or any authority over the activities or operations that are subject to review, nor should the PMU develop or install procedures, prepare records or engage in activities that would normally be subject to review. However, the Implementation Unit may consult the PMU when new systems or procedures are designed to ensure they adequately address internal controls.

B. Threats to Independence may be attempts by management, staff, elected officials, or others outside the PMU, to interfere with or limit the scope of audit work. Auditors who encounter internal or external efforts to interfere with or limit the scope of audit work while conducting an assignment must immediately notify the Performance Metrics Manager, who will attempt to resolve any issues. The interference, if not resolved, will be evaluated for severity of the threat, noted in the work papers and disclosed in the conclusion section of the audit report.

C. The Compliance Division Lieutenant has the sole authority to initiate audits. Unit (PMU) personnel, or management of Department processes and unit or

The Performance Metrics Manager will submit a list of audits to the Compliance Division Lieutenant each December that are planned for the upcoming year for review and approval. The Lieutenant may also delegate this approval to a designee. The list is subject to change based on needs and priorities throughout the year.

D. The PMU shall have full and unrestricted access to all department functions, data, records (manual or electronic), physical property and personnel who may be relevant to an audit, unless specifically authorized in writing by the Chief of Police for matters of homeland security requiring a security clearance. All documentation and information given to auditors during an engagement will be handled confidentially in accordance with GAGAS and department policy.

E. Sources that initiate audits, include but are not limited to:

a. Requests by division Department commanders programs that further the Department’s mission of the Department

Requirements and responsibilities to the Court

b. Court-Approved Settlement Agreement (CASA)

In 2014, the United States of America and the City of Albuquerque entered into an agreement, sharing a mutual interest in officer safety and accountability; constitutional, effective policing; and high-quality police services. The Department shall abide by the CASA in its improvement efforts.

Organizational Process Assets
Plans, processes, policies, procedures, and knowledge bases specific to and used by the performing organization. These assets influence the management of the project.

B. Performance Evaluation and Management System (PEMS)

A process that analyzes employee data that are derived from City of Albuquerque and Department systems that enable the Department to define performance ranges and thresholds.

D. Policy Development Process

A rigorous process that enables stakeholders to provide recommendations for improvement and enhancement of the Department’s SOPs. This process serves as one of the Department’s mechanisms to promote ongoing community participation, including participation by members of the CPOAB, MHRAC, and the Community Policing Councils, and facilitates compliance with CASA provisions governing policy development, review, and implementation.

Problem-Solving Process

The process of working through details of a problem to reach a solution. Problem solving may include mathematical or systematic operations and can be a gauge of critical thinking skills.

Project Leads

The person assigned as the leader of a specific project. This person can identify team members to assist in the project; however, the project lead is accountable for the project(s).

Requirement

Represents something that can be met by a product or service and can be used to address a need of the business, person, or group of people. When a specific type of requirement is under discussion, the term requirement is preceded by a qualifier such as a stakeholder, business, or solution.

c. Threats to Independence
   Internal SOP requirements
d. Statutory requirements
e. Other external requirements

F. Types of evidence collected for audits:
b. Testimonial evidence. Based on interviews and statements from involved persons.
c. Documentary evidence. Consists of legislation, ledgers, reports, minutes, memoranda, contracts, extracts from accounting records, formal charts and specifications of process maps, systems design, or operational structure.

Analytical evidence. Secured

d. Attempts by analysis of information collected by the auditor.

G. Roundtable Discussions

1. Roundtable discussions are non-adversarial in nature and for the purpose of discussing issues identified during the audit or providing review of the draft findings. Any issues of concern, which cannot be reconciled during a roundtable discussion between the auditor and the affected management, staff, will be forwarded to elected officials, or others outside the Compliance and Oversight Division Lieutenant, Compliance Division Commander, or the Compliance Deputy Chief of Police for resolution, to interfere with or limit the scope of audit work.

2. The affected commander(s) may request to have a roundtable discussion during three stages of the audit:

   a. Pre-audit
      After the initial notification is sent and before the audit begins.
   b. Post-audit
      After the analysis is complete and results are in, but before the audit report is drafted.
   c. Closing
      After the audit report is drafted and before it is finalized by the Compliance Division Lieutenant and Compliance Division Commander.

3. The Performance Metrics Manager may, at any stage of the audit, decide to have a roundtable discussion with the lead auditor and the affected command staff.

H. If an audit report includes recommendations, a formal response is required from the affected commander(s), including target dates for implementation for the recommendation to the PMU within 15 calendar days after receiving a copy of the audit report. The response is documented within the draft audit report. The affected unit will forward a copy of the draft audit report that includes their final response to
1-9-4 Performance Evaluation and Management System (PEMS) Section

The PEMS Section Lieutenant will shall:

- Be responsible for the effective supervision and management of the PEMS Unit personnel assigned to the PEMS Unit.

- Submit the annual PEMS report by the 25th day of January; and

- If the 25th falls on a non-work day, the PEMS Section Lieutenant shall submit the annual report shall be submitted by the next business day.

- Submit a quarterly status report, by the 15th day of April, July and October. If the 15th falls on a non-work day, the report shall be submitted the next business day.

A. PEMS Section Personnel shall:

1. PEMS Section personnel shall:

   a. Be responsible for managing the Department’s Performance Evaluation and Management System for the Department;

   b. Track performance assessments and monitoring plans to ensure that they are consistent with SOP Performance Evaluation and Management System (PEMS) (refer to SOP Performance Evaluation and Management System for sanction classifications and additional duties);

   c. Assist Department supervisors, as required, in completing a PEMS Assessment as required, and;

   d. Assist Department supervisors, as required, in the development of PEMS monitoring plans as required.

B. The PEMS Section Lieutenant shall:

1. The PEMS Section Lieutenant shall:

   a. Be responsible for the effective supervision and management of PEMS Unit personnel;

   b. Submit the annual PEMS report by the 25th day of January; and

      i. If the 25th falls on a non-work day, the PEMS Section Lieutenant shall submit the annual report by the next business day.

   c. Submit a quarterly status report by the 15th day of April, July, and October.
i. If the 15th day falls on a non-work day, the PEMS Section Lieutenant shall submit the quarterly status report by the next business day.

### Compliance Section

#### A. Performance Metrics Unit (PMU)

1. **The Performance Metrics Manager.** The Unit personnel will:
   a. Implement inspections in accordance with the inspection schedule or as directed by the PMU Supervisor.
   b. Submit inspection reports to the PMU Manager for review and approval; and
   c. Retain and archive all documentation of audits for five (5) years.

2. **The PMU Manager shall:**
   a. Be responsible for the effective supervision and management of PMU personnel;
   b. Track and develop monthly and/or annual inspection schedules;
   c. Distribute inspection reports to Department personnel; and
   d. Prepare monthly reports for the Compliance Division as required.

3. **The PMU Supervisor will:**
   a. Be responsible for the effective supervision and management of PMU personnel;
   b. Track and develop monthly and/or annual inspection schedules;
   c. Distribute inspection reports to the affected unit and the Implementation Unit Manager Department personnel;
   d. Prepare monthly reports, as required, for the Compliance Division.

#### Records Retention

1. **Records Retention and Peer Reviews**
   a. The PMU personnel will:
   b. Implementation Unit The PMU will use a recommendation tracking matrix to compile all recommendations and the corresponding units/squads for reporting purposes.
   c. The PMU will be peer reviewed by an independent external department or organization every three years.

#### B. Duty to Report

1. **Implementation Unit personnel shall:**
   a. Facilitate process improvement initiatives with input from internal and external stakeholders;
b. Assist in identifying and designing new processes and/or addressing process-related issues to improve efficiency and effectiveness within a specified area;
c. Establish a Department-wide approach for business processes to ensure successful delivery of project outcomes aligned with organizational strategic priorities;
d. Track progress for assigned project or process improvement initiatives through the use of a task management tool;
e. Work with Department personnel to define the current state of business operations and processes, identify opportunities for improvement, and make recommendations in support of the Department’s mission, vision, and strategic goals;
   Consult with Performance Metrics Manager immediately and the affected commander in writing.

8-2-5 Creating an Audit

A. When creating an audit plan, auditors will use the audit plan template. The template contains the following elements:

1. Audit Agenda
2. Audit Plan
3. Audit Program
4. Work Papers
5. Audit Report
   Consult with PMU personnel to include recommendations, if any
6. Manager’s response (excluded if there is feedback on internal controls proposed as new processes and/or procedures are no recommendations)

B. Each audit receives a category assignment. Audits fall into one of the following categories. These categories are listed as checkboxes on the audit plan template:

1. Single
   This is a one-time audit.

2. Recurrent
   This type of audit is executed multiple times a year and may be random or directed. Only one recurrent audit agenda and plan is necessary to cover the multiple audits for the year.

3. Amendment
   This type of audit uses the date from a previously completed audit to complete different, usually more specific objectives.

C. Set Format for Audit Report Numbering
Audit report numbers will appear in this format: 18–AU001

18 – AU 001
[Year] ——— [Type]
[Report#] Types: AU = Audit

Recurring audits may have two report numbers that are not sequential, for example, 18-AU003 and 18-AU0015. The first audit report number was the third audit generated by the PMU for the year. The accompanying report number indicates the fifteenth audit of the year, although it is the same audit.

8-2-6 Executing an Audit (see Process Map of an Audit)

A. Performance Metrics Manager

1. Logs the audit, assigns an audit report number and a lead auditor, and places the audit on the calendar.
2. Meets with the lead auditor to determine logistical needs, audit agenda, and the notification date.

B. Auditor

1. Sends notification e-mail(s) to include the audit agenda. If requested, a roundtable discussion is conducted.
2. Collects responses and information needed for field work and analysis.
3. Conducts field inspections and interviews, if necessary.
4. Prepares rough draft of findings based on supporting evidence. If requested, a roundtable discussion is conducted to present draft findings and results.
5. Forwards the draft audit report with revisions (if any) to the manager. If requested, a roundtable discussion is conducted.

C. Performance Metrics Manager

1. Reviews the audit report and returns it for additional work or correction.
   OR
   Forwards the report to the Compliance Division Lieutenant.

D. Lieutenant

1. Reviews the audit report and returns it for additional work or correction.
   OR
Discusses the report with the Compliance Division Commander prior to returning it to the auditor to be released

Or

Permits the report to be released to the affected division’s command for review.

E. Auditor

1. Distributes the final audit report and collects responses (14 calendar days).
2. Prepares the audit report, incorporating the command review responses.
3. Forwards the audit report for additional work or correction. OR

  g. Forwards the audit report to Receive final inspection reports from the Performance Metrics Manager. PMU personnel to review and determine if business processes need to be re-evaluated.

F. Performance Metrics Manager

1. Review and returns it for additional work or correction. OR

  Signature of approval and forwards the audit report to the Compliance Division Lieutenant.

G. Lieutenant

1. Review and returns it for additional work or correction. OR

  Signature of approval and forwards the audit report to the Compliance Division Commander.

H. Commander

1. Reviews and returns it for additional work or correction. OR

  Signature of approval for the final audit report and forwards it to the manager and lieutenant.

I. Auditor

1.2. Distributes the final report to the command staff and the The Implementation Unit Manager electronically. shall:

2. Updates Supervise the Implementation Unit audit log and recommendations tracking matrix.
3. a. Archives personnel assigned to the reports, work papers, both electronic and hardcopy. Implementation Unit.
J. Performance Metrics Manager

b. Prepares a monthly summary of lead process improvement and/or problem-solving efforts with internal and external stakeholders;

c. Be responsible for maintaining data systems used by the Implementation Unit personnel and updates for them;

d. Be responsible for reporting Implementation Unit activity, as needed, to the Lieutenant’s chain of command as needed.

PROCESS MAP OF AN AUDIT

1. Logs the audit.
2. Meets with the lead auditor and the Compliance Division Commander to determine notification criteria.
3. Sends notification e-mail(s)
4. Collects responses and information
5. Conducts field inspections/interviews, if necessary.
6. Prepares rough draft of findings
7. Forwards the draft with revisions (if any) to the manager.
8. Reviews it and returns it
   OR
   Forwards the report
9. Reviews the audit report and returns
   OR
   Discusses the report with the Compliance Division Commander
   OR
   Permits the report to be released
10. Distributes the report and collects responses
11. Prepares the audit report
12. Forwards the audit report
13. Reviews and returns it
   OR
   Forwards the audit report
14. Review and returns it
   OR
   Approves the final audit report
15. Reviews and returns
   OR
   Approves the final audit report
16. Distributes the final report
17. Updates the audit log and recommendations tracking matrix.
18. Archives the audit both electronic and hardcopy.
# APPENDIX: AUDIT TEMPLATE

## ALBUQUERQUE POLICE DEPARTMENT
PERFORMANCE METRICS UNIT

### AUDIT AGENDA

<table>
<thead>
<tr>
<th>Audit Subject/SOP:</th>
<th>Audit Number:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit/Division, Audited:</td>
<td>Commander, Audited</td>
<td></td>
</tr>
<tr>
<td>Lead Auditor:</td>
<td>Lead Auditor Phone:</td>
<td>Lead Auditor Email:</td>
</tr>
<tr>
<td>Audit Category</td>
<td>Notice Date:</td>
<td>Notice To:</td>
</tr>
<tr>
<td>□ SINGLE</td>
<td>☐ RECURRENT</td>
<td>☐ AMENDMENT</td>
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<tr>
<td>Audit Notification:</td>
<td>Performance Metrics Manager Signature:</td>
<td>Date:</td>
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<tr>
<td></td>
<td>Compliance Division Lieutenant Signature:</td>
<td>Date:</td>
</tr>
</tbody>
</table>
ALBUQUERQUE POLICE DEPARTMENT COMPLIANCE BUREAU ORDERS


ALBUQUERQUE POLICE DEPARTMENT PERFORMANCE METRICS
UNIT AUDIT PLAN AND AUDIT PROGRAM

Audit Subject/SOP:  
Audit Number:  
Date:  

SOP effective date:  
Last Compliance Audit:  
Commander, Audited Entity:  

PLANNING:

Background:

Gain an understanding:

Review SOP X-XX [enter SOP title].

Visit with the following individual(s) and areas to gain an understanding of the area under review and internal controls in place that mitigate risk.

C. Name of the Policy and Procedure Unit shall:

1. Policy and Procedure Unit personnel shall:

   a. Serve as the City and the Department’s central point of contact for the policy development process;
   b. Adhere to the requirements outlined in SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties);
   c. Adhere to the requirements outlined in the Policy and Procedure Unit Manual; and
      - Serve as the City and the Department’s central point of contact, title of POC, e-mail of POC for the policy development process; and
      - Develop fieldwork steps based on high risk areas assessed in SOP X-XX

   Ask [enter POC name] what they would consider to be high risk areas addressed in SOP X-XX. Would they recommend auditors place particular emphasis and/or perform additional work in any given area? Could there be ways to commit fraud, breach confidentiality, or abuse as it relates to SOP X-XX?
FIELDWORK:

Criteria Under Audit:

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ALBUQUERQUE POLICE DEPARTMENT
COMPLIANCE BUREAU ORDERS

Assist the Policy Owner or their designee in their review of new Department SOPs six (6) months after they are implemented, then annually thereafter.

The Unit shall assist the Policy Owner or their designee in their review of all existing Department SOPs, at a minimum, on an annual basis;

Prioritize the review, development, and implementation of SOPs that are related to the CASA, which incorporate the requirements of the CASA;

Provide public access to Policy and Procedure Unit meetings to enable community participation;

Provide the opportunity for community members to comment on SOPs through the Community Policing Council Recommendation Form and the SOP Recommendation Form;

Assist the Policy Owner or their designee with the review, development, and publication of the Department’s SOPs;

Assist the Policy Owner or their designee gather information on best practices and, in turn, shall assist with the integration of such findings into Department SOPs, where appropriate;

Maintain the Policy and Procedure Unit’s web-based project management system for conscientious tracking of policy development process activities and deliverables;

Maintain a list of all SOPs that identifies:
Whether the SOP is/is not related to the CASA;
The Policy Owner and Policy Designee for each SOP;
The Unit lead for each SOP 8-2 Effective: 8/29/2018;
Policy revision due dates;
Utilize and adhere to the Policy and Procedure Unit Manual for procedures that are not outlined in this SOP; and

Assist in the development of Special Orders as outlined in, consistent with SOP Department Orders (refer to SOP Department Orders for sanction classifications and additional duties).

2. The Policy Manager shall:

a. Manage the Policy and Procedure Unit’s personnel;
b. Function as an advisor to Policy and Procedure Unit personnel when applicable;
c. Assign a specific list of SOPs to the SOP Policy Coordinator, SOP Liaison, or themselves to act as a lead who shall oversees the policy SOP as it goes through the policy development process;
d. For each SOP, track and analyze policy development process starting and ending dates, in order to assess the effectiveness and efficiency of the process; and
i. If the data suggest there are areas for improvement, such as steps in the process that go beyond the average time for completion, the Policy Manager continually shall collaborate with Policy and Procedure Unit personnel to identify, then implement potential changes.

ii. The Policy Manager shall manage and track the process improvement activities.

e. Function as the Policy and Procedure liaison Unit representative and liaison between internal and external stakeholders and the Policy and Procedure Unit during:

i. CPOA meetings and its subcommittee meetings;

ii. Force Review Board (FRB) meetings;

iii. MHRAC meetings; and

iv. Meetings between the U.S. Department of Justice, Independent Monitoring Team, and the Department.

__The Policy Coordinator shall:

3. Facilitate the Policy Owner or their designee, Department personnel, and external stakeholders’ review and development of an SOP while it goes through the policy development process, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties).

4. The SOP Liaison shall:

a. Perform Unit operations that facilitate the review, development, and implementation of an SOP while it goes through the policy development process, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties);

b. Maintain policy drafts and SOPs that have been implemented in the Department’s document management system, consistent with SOP Policy Development Process (refer to SOP Policy Development Process for sanction classifications and additional duties); and

c. Be responsible for the control of Department forms, consistent with SOP Forms Control (refer to SOP Forms Control for sanction classifications and additional duties).

4-9/8/2016 - Reporting

ALBUQUERQUE POLICE DEPARTMENT PERFORMANCE METRICS UNIT
AUDIT REPORT

<table>
<thead>
<tr>
<th>Audit Subject/SOP:</th>
<th>Audit Number:</th>
<th>Date:</th>
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<tr>
<th>Last Compliance</th>
<th>Commander, Audited</th>
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<td>TO:</td>
<td>FROM:</td>
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RECOMMENDED ACTIONS:

Recommendation
TABLE OF CONTENTS
1. Purpose
2. Prior Audits
3. Summary of Findings
4. Methodology
5. Detailed Findings

PURPOSE

PRIOR AUDITS

SUMMARY OF FINDINGS

METHODOLOGY

DETAILED FINDINGS

MANAGEMENT RESPONSE

<table>
<thead>
<tr>
<th>Performance Metrics Manager</th>
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<tr>
<td>Compliance Bureau Lieutenant</td>
<td>Date:</td>
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<td>Compliance Division Commander</td>
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ALBUQUERQUE POLICE DEPARTMENT COMPLIANCE BUREAU ORDERS


IAFD personnel shall produce an annual use of force report that examines trends and findings in the use of force events as it relates to:

- Arrest data and calls for service;
- Demographics of individuals;
- Number and locations of force events; and
- Injuries and hospitalizations related to force events.

The annual force report shall be published for transparency.

Quarterly

IAFD personnel shall provide quarterly reports to the Academy Division in an effort to improve performance Department-wide in January, April, July, and October with the following information:

- Force trends: type of force applied, where, and when;
- An assessment of compliance with policy; and
- Training deficiencies and implications.
IAFD shall provide quarterly reports to the Force Review Board (FRB) in an effort to assess both trends in force as well as performance metrics of the FRB itself. This report shall be presented to the FRB in January, April, July and October with the following information:

Force trends: types of force applied, where, and when; and
FRB performance metrics: number of cases reviewed, number of deficiencies identified by the FRB, and the number and type of referrals made.

Neither of these reports shall be published outside the Department or the FRB.

Monthly

1. IAFD personnel shall produce monthly reports to be shared with the CPOAB and the Community Policing Councils (CPC), including the number and area command of force events in the previous month.

Weekly

IAFD shall provide a weekly update to the Executive Director of the CPOA on all open internal misconduct investigations. This report shall contain, but is not limited to:

Investigator assigned:
Case number:
Investigation open date:
Employee subject of the investigation:
Alleged violations:
Investigator findings:
The ninety (90) due date; and
The thirty (30) chain of command review due date.