

## Monitor's 21st Report

### Compliance Levels of the Albuquerque Police Department and the City of Albuquerque with Requirements of the Court-Approved Settlement Agreement

No. 1:14-CV-1025-JB-JFR

April 14, 2025

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## 1.0 Introduction

This Independent Monitor's Report (IMR) follows the same format as all previous reports. That format is organized into five sections:

- 1.0 Introduction;
- 2.0 Executive Summary;
- 3.0 Synopsis of Findings;
- 4.0 Compliance Findings; and
- 5.0 Summary.

The purpose of the monitor's periodic compliance reports is to inform the Court of the monitor's findings related to the progress made by APD in achieving compliance with the individual requirements of the Court Approved Settlement Agreement (CASA). This report covers the compliance efforts made by APD during the 21<sup>st</sup> reporting period, which covers August 1, 2024, through January 31, 2025.

## 2.0 Executive Summary

The City has completed the majority of the requirements established by the CASA. APD now routinely follows the CASA requirements. Compliance ratings remain the same as in IMR-20, with Primary Compliance at 100 percent, Secondary Compliance at 100 percent, and Operational Compliance at 99%.

We note that the level 2 and level 3 investigations completed by APD are now industry-standard work. Further, the Performance Evaluation Management System (PEMS) is being used by APD as designed and serves as a solid oversight system for APD. Finally, the CPOA Board is functioning well and meets the objectives established by the CASA.

The major compliance issue remaining is the timeliness of CPOA investigations. The City has provided for additional positions for CPOA. We note that it simply takes time to assess, select, train, and field investigators for CPOA. This lack of adequate staffing is a threat to continued compliance and, as such, represents a major issue. We note that the City is aware of this issue and is working to staff CPOA adequately.

## 3.0 Synopsis of Findings for the 21<sup>st</sup> Reporting Period

As of the end of the IMR-21 reporting period, APD's compliance levels are as follows:

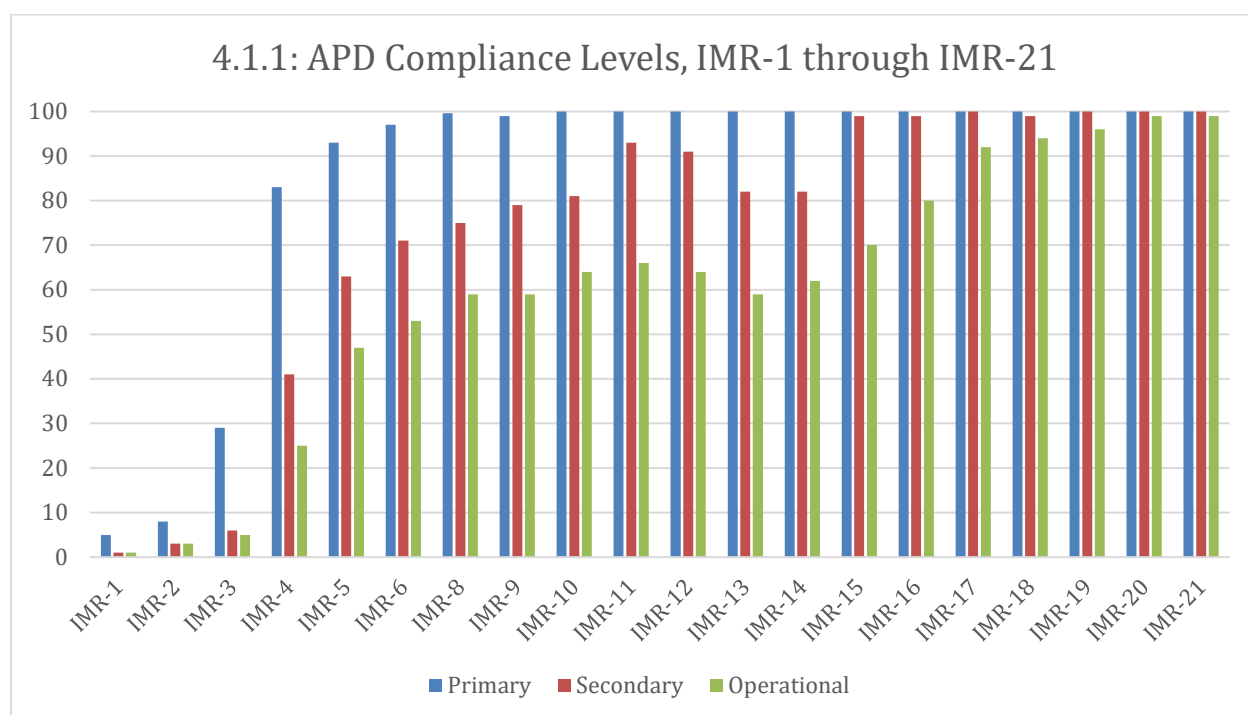
|                        |          |
|------------------------|----------|
| Primary Compliance     | 100%     |
| Secondary Compliance   | 100% and |
| Operational Compliance | 99%      |

## 4.0 Current Compliance Assessments

As part of the monitoring team's normal course of business, it established a baseline assessment of all paragraphs of the CASA for the Independent Monitor's first report (IMR-1)<sup>1</sup>. This was an attempt to provide the Parties with a snapshot of existing compliance levels and, more importantly, to identify issues confronting compliance as APD continues to work toward full compliance. As such, the baseline analysis was considered critical to future performance in APD's reform effort, as it clearly depicts the issues standing between the APD and full compliance. This report, IMR-21, provides a similar assessment and establishes a picture of progress on APD goals and objectives since the last monitor's report. Overall compliance levels are depicted in Figure 4.1.1.

### 4.1 Overall Status Assessment

APD remained consistent with its Primary Compliance and Secondary Compliance levels, which were determined to be 100 percent for this reporting period. During this reporting period, APD's Operational Compliance remained at 99 percent.



### 4.2 Project Deliverables

The 3<sup>rd</sup> Amended Court-Approved Settlement Agreement defines the project deliverables of the CASA. Each deliverable is identified in detail in section 4.7, beginning on page 5.

<sup>1</sup> Available at [www.AbqMonitor.org/documents/Appendix](http://www.AbqMonitor.org/documents/Appendix), pp. 1-306.

### 4.3 Format for Compliance Assessment

There are 24 paragraphs monitored in this report. Three paragraphs in the 3<sup>rd</sup> Amended CASA were intentionally left blank, and two were updated to indicate they were non-rated introductory paragraphs. The remaining paragraphs have either been terminated or are being self-monitored by APD and the City of Albuquerque. We note these CASA paragraphs have been moved to APD self-monitoring or terminated based on the Parties' agreement and the monitor's concurrence<sup>2</sup>.

The monitor's reports are structured into nine major sections, following the structure of the CASA:

- I. Use of Force;
- II. Specialized Units;
- III. Crisis Intervention;
- IV. Policies and Training;
- V. Misconduct Complaint Intake, Investigation, and Adjudication;
- VI. Staffing, Management, and Supervision;
- VII. Recruitment, Selection, and Promotions;
- VIII. Officer Assistance and Support; and
- IX. Community Engagement and Oversight;

The twenty-first monitor's report does not address in detail any Paragraphs terminated by the Court or moved into self-assessment.

### 4.4 Structure of the Monitoring Assessment Process

Members of the monitoring team have collected data concerning APD's compliance levels in several ways: through on-site observation, review, and data retrieval; through off-site review of more complex items, such as policies, procedures, testing results, and through review of documentation provided by APD or the City which constituted documents prepared contemporaneously during the normal daily course of business. While the monitoring team did collect information provided directly by APD in response to the requirements of the CASA, those data were never used as a sole source of determining compliance. Still, they were used by the monitoring team as an explanation or clarification of process. All data collected by the monitoring team were one of two types:

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<sup>2</sup> Final 3<sup>rd</sup> Amended CASA, paragraph 302.

- Data that were collected by using a structured random sampling process; or
- Selecting *all* available records of a given source for the “effective dates” of the monitoring period.

Under no circumstances were data selected by the monitoring team based on provision of records of preference by personnel from the City or APD. In every selection of random samples, APD personnel were provided lists of specific items, date ranges, and other specific selection rules. The samples were drawn throughout the monitoring period and on-site by the monitor or his staff. The same process continues for all following reports until the final report is written.

#### 4.5 Operational Definition of Compliance

For the purposes of the APD monitoring process, “compliance” consists of three parts: primary, secondary, and operational. These compliance levels are described below.

- **Primary Compliance:** Primary compliance is the “policy” part of compliance. To attain primary compliance, APD must have in place operational policies and procedures designed to guide officers, supervisors, and managers in the performance of the tasks outlined in the CASA. As a matter of course, the policies must be reflective of the requirements of the CASA, must comply with national standards for effective policing policy, and must demonstrate trainable and evaluable policy components.
- **Secondary Compliance:** Secondary compliance is attained by providing acceptable training related to supervisory, managerial, and executive practices designed to (and effective in) implementing the policy as written, e.g., sergeants routinely enforce the policies among field personnel and are held accountable by managerial and executive levels of the department for doing so. By definition, there should be operational artifacts such as reports, disciplinary records, remands to retraining, follow-up, and even revisions to policies if necessary, indicating that the policies developed in the first stage of compliance are known to, followed by, and important to supervisory and managerial levels of the department.
- **Operational Compliance:** Operational compliance is attained at the point that the adherence to policies is apparent in the day-to-day operation of the agency, e.g., line personnel are routinely held accountable for compliance, not by the monitoring staff, but by their sergeants, and sergeants are routinely held accountable for

compliance by their lieutenants and command staff. In other words, the APD “owns” and enforces its policies.

## **4.6 Operational Assessment**

APD and the City (including the CPOA and CPOA Board) have agreed to comply with each articulated element of the CASA. The monitoring team provided the Parties with copies of the team’s monitoring methodology (a 299-page document), asking for comment. That document was then revised based on comments by the Parties. This document reflects the monitor’s decisions relative to the Parties’ comments and suggestions on the proposed methodology and is congruent with the final methodology included in Appendix One of the monitor’s first report<sup>3</sup>. The first operational paragraph, under this rubric, is paragraph 14, as paragraph 13 is subsumed under paragraph 14’s requirements. We note that some paragraphs were changed in the 3<sup>rd</sup> Amended CASA.

### **4.6.1 Methodology**

The monitor assessed the City and APD’s compliance efforts during the 21<sup>st</sup> reporting period using the *Monitor’s Manual*, included as Appendix A in the monitor’s first report (see footnote 3 for a link to that methodology). We note that the original methodology was periodically revised based on the availability of records (or lack thereof) and related organizational processes. The manual identifies each task required by the CASA and stipulates the methodology used to assess compliance. The reader will note that, as of IMR-21, additional CASA Paragraphs are being monitored by APD or have been terminated, as provided for by the CASA, once long-term compliance is established by APD, as per the monitor’s findings.

## **4.7 Assessing Compliance with Individual Tasks**

APD’s compliance with individual tasks for the 21<sup>st</sup> reporting period is described in the following sections.

### **4.7.1- 4.7.3 Assessing Compliance with Paragraphs 14 - 45.**

**Paragraphs 14 – 17 are self-monitored by APD. Paragraph 38 was intentionally left blank in the 3<sup>rd</sup> Amended CASA. Paragraphs 18 - 37 and 39 - 45 have been terminated.**

### **4.7.28 – 4.7.46 Assessing Compliance with Paragraphs 46-59: Supervisory Review of Use of Force Reporting**

**Paragraphs 46 – 59 are self-monitored by APD.**

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<sup>3</sup> Available at: <https://www.justice.gov/usao-nm/file/796891/download>

#### 4.7.47 - 4.7.64 Assessing Compliance with Paragraphs 60-77: Force Investigations by the Internal Affairs Division

Case reviews and random checks of use of force investigations by the monitoring team reflect numerous examples of IAFD and supervisory personnel requesting Internal Affairs (IA) investigations related to policy violations. These requests have historically been referred to as an Internal Affairs Request (IAR). Level 2 and Level 3 use of force cases reviewed during this reporting period contained appropriate requests for IARs for alleged policy violations. These IARs continue to be examined by the monitoring team to the point of their logical conclusions to determine if APD is properly administering its IA oversight functions. During the IMR-21 reporting period, APD's tracking data indicated that IAFD issued 119 requests for IA review of alleged policy violations associated with the use of force investigations.<sup>4</sup>

Table 4.7.28a below, illustrates the trend of IARs originating from the use of force cases.

Table 4.7.28a  
Comparison of Use of Force Cases with Internal Affairs Requests (IARs)

| Reporting Period (RP) | Level 1 UoF     | Level 2 UoF | Level 3 UoF | Total UoF | Internal Affairs Requests (IARs) |
|-----------------------|-----------------|-------------|-------------|-----------|----------------------------------|
| IMR-12                | 173             | 232         | 79          | 484       | 534                              |
| IMR-13                | 111             | 244         | 54          | 409       | 424                              |
| IMR-14                | 116             | 216         | 91          | 423       | 199                              |
| IMR-15                | 79              | 169         | 43          | 291       | 90 <sup>5</sup>                  |
| IMR-16                | 83              | 161         | 51          | 295       | 154                              |
| IMR-17                | 52 <sup>6</sup> | 185         | 47          | 284       | 153                              |
| IMR-18                | 45              | 190         | 44          | 279       | 170                              |
| IMR-19                | 79 <sup>7</sup> | 148         | 49          | 276       | 185                              |
| IMR-20                | 85 <sup>8</sup> | 185         | 58          | 328       | 249                              |
| IMR-21                | -- <sup>9</sup> | 195         | 71          | 266       | 119 <sup>10</sup>                |

<sup>4</sup> The IARs are for Level 2 and Level 3 cases that occurred during IMR-21 as well as for cases occurring in previous monitoring periods.

<sup>5</sup> The 90 IARs for IMR-15 reflect IARs between the period of August 1, 2021, and December 31, 2021.

<sup>6</sup> The 52 Level 1 UoF cases opened during IMR-17 represent a 37% decrease from the 83 Level 1 UoF cases opened during IMR-16. This is the largest percentage decrease in Level 1 cases since the category of Level 1 cases was created in January 2020.

<sup>7</sup> This represents a 76% increase over the reported Level 1 uses of force during IMR-18.

<sup>8</sup> This represents a 7% increase over the reported Level 1 uses of force during IMR-19.

<sup>9</sup> Pursuant to Court Order, the paragraphs associated with Level 1 uses of force are now self-monitored by APD. Thus, no data was provided to the monitoring team regarding Level 1 uses of force.

<sup>10</sup> The 119 IARs initiated during IMR-21 represents the lowest level of IARs initiated during a monitoring since the 15<sup>th</sup> monitoring period. It should be noted that for the 15<sup>th</sup> monitoring period, the 90 IARs

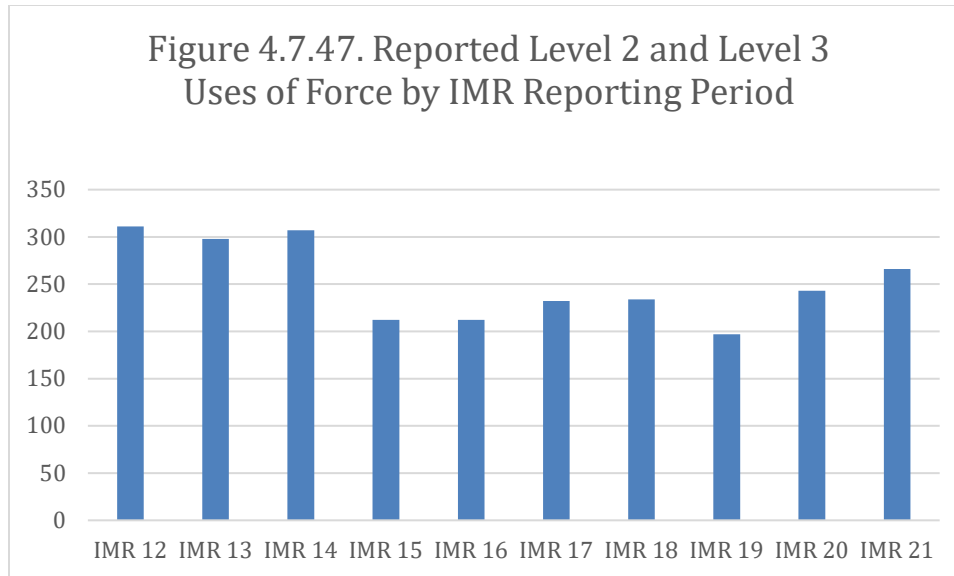


Since all potential policy violations observed during use of force incidents have been reported to IAPS via IARs, this aggregate data provides a rich resource for APD to analyze in determining alleged misconduct trends. Much of the training conducted by the APD Academy now uses these data as contextually appropriate for the course being designed as part of its needs assessment phase of curriculum development.

During the IMR-21 reporting period (data current through February 2025), APD recorded a combined 266 Level 2 and Level 3 use of force cases, an increase of 23 cases from the 243 Level 2 and Level 3 use of force cases recorded in IMR-20. This represents the largest number of Level 2 and Level 3 cases initiated during a monitoring period since IMR-14. During IMR-19, APD recorded a combined 197 Level 2 and Level 3 use of force cases. During the IMR-18 reporting period, APD recorded a total combined 234 Level 2 and Level 3 use of force cases, an increase of two cases from IMR-17. During IMR-17, APD recorded a combined 232 Level 2 and Level 3 use of force cases, an increase of 20 cases from IMR-16. During IMR-16, APD recorded a combined 212 Level 2 and Level 3 use of force cases, the same number of cases as in IMR-15. Figure 4.7.47 on the following page depicts the numbers of Level 2 and Level 3 cases generated by APD during the IMR-12 through IMR-21 reporting periods. These data indicate a significant reduction in the levels of more serious uses of force by APD over a multi-year period through IMR-19 before the number of Level 2 and Level 3 cases began to increase to the present numbers. Data for this multi-year period indicate that for the IMR 12 – IMR 14 reporting periods, the number of uses of force held relatively steady between 298-311 uses of force. Then, the number of reported uses of force by APD personnel decreased dramatically, dropping by 95 cases to 212 uses of force in the 15<sup>th</sup> and 16<sup>th</sup> reporting periods, compared to 307 uses of force in the 14<sup>th</sup> reporting period. Through IMR-19, this was a welcome change to the earlier data, which held steady in the 300+ range. These data are depicted in Figure 4.7.47 on the following page.

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initiated were only for five months of that six-month period. It is also noted that for all of the periods prior to IMR-21, the number of IARs included IARs associated with Level 1 uses of force.



One of the CASA implementation requirements to reach an operational compliance finding is that use of force cases must be completed within 120 days. While APD has historically struggled to complete cases within the allotted time, the past five monitoring periods generated excellent completed case timelines. During IMR-21, IAFD opened 195 Level 2 cases and 71 Level 3 cases. IAFD completed 219 Level 2 cases during the monitoring period, and all of the cases were completed within 90 days.<sup>11</sup> IAFD completed 71 Level 3 cases within the monitoring period; all but nine were completed within 90 days of the use of force. Seven of the cases were completed within 90 days of IAFD receiving the cases (primarily after cases were misclassified in the field). Two cases were completed at 107 and 118 days after permissible 30-day extensions were approved. One of these cases was an officer-involved shooting (OIS), and the other case involved out-of-policy uses of force. The monitoring team notes these two cases were completed within the authorized 120-day period.

At the close of the 21st monitoring period, IAFD had completed 127 of the 195 Level 2 use of force cases opened during the monitoring period. There were still 68 open Level 2 cases that had not been completed when the monitoring period closed on January 31, 2025. These cases will be examined during the 22nd reporting period. We note that the cases still open at the end of the IMR-20 reporting period were closed within this reporting period and that all of the cases were closed within 90 days of the use of force. At the close of the 21st monitoring period, IAFD completed 38 of the 71 Level 3 use of force cases opened during the period. There were still 33 cases that were opened during the monitoring period but had not been completed. These cases will be examined during the 22nd reporting period. We note that the cases that were still open

<sup>11</sup> Two cases were completed more than 90 days after the use of force. One of these cases was originally misclassified in the field and was discovered through a PMU audit. This case was then temporarily suspended due to a military leave matter. The other case was misclassified in the field before it was turned over to IAFD. Nonetheless, IAFD completed the case within 90 days of receiving it.

at the end of the last reporting period were all closed within IMR-21 reporting period and that all of the cases were closed within 90 days of the occurrence of the use of force.

These data are shown in tabular form in Tables 4.7.47a and b on the following pages.

Table 4.7.47a Investigations of  
Level 2 Use of Force Investigations: IMR-12 – IMR-21

| Reporting period | # of Level 2 UoF Cases Initiated (Months 1-3) of the Rep. Period | # of Level 2 UoF Cases (Months 1-3) Completed within 90 days | Total # of Level 2 UoF Cases Initiated during the Rep. Period | Total # of Level 2 UoF Cases Opened, Investigated, & Completed within the Rep. Period |
|------------------|--|--|---|---|
| IMR-21           | 114  | 114 (100%)   | 195   | 127 (65%) <sup>12</sup>   |
| IMR-20           | 92   | 92 (100%)  | 185   | 109 (59%) <sup>13</sup>   |
| IMR-19           | 53   | 53 (100%)  | 148   | 57 (39%) <sup>14</sup>  |
| IMR-18           | 79   | 79 (100%)  | 190   | 85 (45%) <sup>15</sup>  |
| IMR-17           | 96   | 96 (100%)  | 185   | 101 (55%) <sup>16</sup>   |
| IMR-16           | 79   | 79 (100%) <sup>17</sup>                                      | 161   | 81 (50%) <sup>18</sup>  |
| IMR-15           | 99   | 97 (98%) <sup>19</sup>                                       | 169   | 101 (60%) <sup>20</sup>   |
| IMR-14           | 117  | 1 (0.9%)   | 216   | 1 (0.5%)  |
| IMR-13           | 126  | 3 (2%)   | 244   | 3 (1%)  |
| IMR-12           | 108  | 97 (90%)   | 232   | 106 (46%)   |

<sup>12</sup> IAFD completed a total of 219 cases during IMR-21 (regardless of when the cases were opened) with all of the cases completed within 90 days of the use of force.

<sup>13</sup> IAFD completed a total of 206 cases during IMR-20 (regardless of when the cases were opened) with all of the cases completed within 90 days of the use of force.

<sup>14</sup> IAFD completed a total of 165 cases during IMR-19 (regardless of when the cases were opened) with 164 of the cases completed within 90 days of the use of force. The one case not completed within 90 days of the use of force occurring was more particularly discussed in IMR-18 and noted above in this current report. It should be noted that irrespective of when IAFD received this case, the case was completed within 90 days of IAFD's receipt of the case.

<sup>15</sup> IAFD completed a total of 169 cases during IMR-18 (regardless of when the cases were opened) with 166 of the cases completed within 90 days of the use of force. Two of the three cases not completed within 90 days of the use of force occurring were misclassified initially by Field Services personnel. The third case was not a matter of a misclassification of force, but a case of alleged unreported use of force. It should be noted that irrespective of when IAFD received these three cases, each of these three cases were completed within 90 days of IAFD's receipt of the cases.

<sup>16</sup> IAFD completed a total of 180 cases during the IMR-17 reporting period (regardless of when the case was opened), and 177 were closed within 90 days. The three cases not completed within 90 days were misclassified initially by Field Services personnel, which contributed to the case not being completed within 90 days of the occurrence of the use of force. IAFD completed the cases within 90 days of receiving the cases. This is addressed pursuant to Paragraph 50.

<sup>17</sup> IAFD closed one case within 90 days of receiving the case, but a classification error made by Field Services personnel contributed to the case not being completed within 90 days of the occurrence of the use of force. This is addressed pursuant to Paragraph 50.

<sup>18</sup> IAFD completed a total of 151 cases during IMR-16 (regardless of when the case was opened) and 148 were closed within 90 days. The three cases not completed within 90 days were misclassified initially by Field Services personnel, which contributed to the case not being completed within 90 days of the occurrence of the use of force. This is addressed pursuant to Paragraph 50.

<sup>19</sup> One case was determined to not be a force case and one case involved a criminal referral handled by IAPS from the onset outside of the purview of IAFD and EFIT.

<sup>20</sup> Sixty-eight of the 73 cases that were still active (not completed) at the end of the monitoring period had not yet reached their respective 90-day threshold.

Table 4.7.47b depicts tabular data for investigations of Level 3 uses of force.

Table 4.7.47b Investigations of  
Level 3 Use of Force Investigations: IMR-12 – IMR-21

| Reporting period | # of Level 3 UoF Cases Initiated (Months 1-3) of the Rep. Period | # of Level 3 UoF Cases (Months 1-3) Completed within 90 days | Total # of Level 3 UoF Cases Initiated during the Rep. Period | Total # of Level 3 UoF Cases Opened, Investigated, & Completed within the Rep. Period |
|------------------|--|--|---|---|
| IMR-21           | 40   | 35 (88%) <sup>21</sup>                                       | 71  | 38 (54%) <sup>22</sup>  |
| IMR-20           | 29   | 29 (100%)  | 58  | 38 (66%) <sup>23</sup>  |
| IMR-19           | 22   | 22 (100%)  | 49  | 22 (45%) <sup>24</sup>  |
| IMR-18           | 18   | 18 (100%)  | 44  | 18 (41%) <sup>25</sup>  |
| IMR-17           | 27   | 27 (100%) <sup>26</sup>                                      | 47  | 28 (60%) <sup>27</sup>  |
| IMR-16           | 26   | 26 (100%) <sup>28</sup>                                      | 51  | 26 (51%) <sup>29</sup>  |
| IMR-15           | 30   | 30 (100%)  | 43  | 30 (70%) <sup>30</sup>  |
| IMR-14           | 42   | 0 (0%)   | 91  | 0 (0%)  |
| IMR-13           | 37   | 2 (5%)   | 54  | 2 (4%)  |
| IMR-12           | 25   | 21 (84%)   | 79  | 24 (30%)  |

<sup>21</sup> Two cases are suspended due to FMLA considerations (these two cases stem from the same CAD incident), one case was misclassified in the field (IAFD is scheduled to complete this case within 90 days of receiving the case), and two cases (both of which are officer-involved shootings) have approved extensions.

<sup>22</sup> IAFD completed a total of 71 Level 3 cases during IMR-21 (regardless of when the cases were opened).

<sup>23</sup> IAFD completed a total of 65 Level 3 cases during IMR-20 (regardless of when the cases were opened).

<sup>24</sup> IAFD completed a total of 56 Level 3 cases during IMR-19 (regardless of when the cases were opened).

<sup>25</sup> IAFD completed a total of 37 Level 3 cases during IMR-18 (regardless of when the cases were opened).

<sup>26</sup> IAFD closed two cases within 90 days of receiving them, but the classification errors made by Field Services personnel contributed to one case not being completed within 90 days of the occurrence of the use of force, and the other case was originally closed within 90 days by IAFD, but was reopened, which resulted in its actual completion date extending to 125 days after the use of force occurred.

<sup>27</sup> IAFD completed a total of 54 Level 3 cases during IMR-17 (regardless of when the case was opened).

<sup>28</sup> IAFD closed one case within 90 days of receiving the case, but a classification error made by Field Services personnel contributed to the case not being completed within 90 days of the occurrence of the use of force. This is addressed pursuant to Paragraph 50.

<sup>29</sup> IAFD completed a total of 37 cases during IMR-16 (regardless of when the case was opened).

<sup>30</sup> One case was delayed due to an involved officer being injured and unable to be interviewed and another case involved a criminal referral handled by IAPS from the onset outside of the purview of IAFD and EFIT. Neither of these cases were counted against IAFD/EFIT.

As noted, evidence reveals that productivity levels from earlier monitoring periods have completely reversed and stabilized at acceptable case completion levels. We are aware that this reversal started when the External Force Investigation Team (EFIT) was working with IAFD. APD has continued to sustain these levels after EFIT's departure in December 2023 (during the IMR-19 reporting period).

*Appendices 1, 2, and 3 contain the results of the monitoring team's review of 31 Level 2 and Level 3 UoF cases.*

#### Observations and Comments

The monitoring team reviewed several Level 2 and Level 3 cases in which ECWs were utilized. In two of those cases, ECWs were deployed against passively resistant individuals. IAFD properly identified each of these instances, finding that the ECW deployments were not reasonable, minimal, or necessary uses of force and appropriately issued IARs. Appropriate discipline was imposed.

During a recent site visit, we noted that persons were not being identified as witnesses because they did not actually witness an officer utilize force, but the persons were present and witnessed an officer's lawful objective, saw or heard an officer give a command, or saw a person flee from an officer. In the opinion of the monitoring team, these persons are often an excellent source of information that provides valuable insight about the start of a use of force incident. We mentioned this to IAFD command staff and IAFD personnel were receptive to our insight and stated observations of such instances. Since that site visit, the monitoring team has observed an obvious effort to identify and interview such persons who do not physically observe a use of force but see or hear antecedent actions or can provide another context for the continuum of events leading to a use of force by an officer. Such operationalization of technical assistance provided by the monitoring team is not always this quickly observed in our case reviews, but this was clearly demonstrated in a number of cases we reviewed and, therefore, is worthy of noting it in this report.

**4.7.47 -49 Paragraphs 60 - 62 are self-monitored by APD.**

#### **4.7.50 Assessing Compliance with Paragraph 63: Investigating Level 2 and Level 3 Uses of Force**

Paragraph 63 stipulates:

**"APD shall ensure that all Level 2 and Level 3 uses of force are investigated fully and fairly by individuals with appropriate expertise, independence, and investigative skills so that uses of force that are contrary to law or policy are identified and appropriately resolved; that policy, training, equipment, or tactical deficiencies related to the use of force are identified and corrected; and that investigations of sufficient quality are conducted so that officers can be**

held accountable, if necessary. At the discretion of the Chief or Bureau of Police Reform, APD may hire and retain personnel, or reassign current APD employees, with sufficient expertise and skills to the Internal Affairs Division.”

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

**4.7.51 - 4.7.55 Paragraphs 64 – 68 are self-monitored by APD.**

### **4.7.56 Assessing Compliance with Paragraph 69: IAFD Responsibilities in Serious Uses of Force**

Paragraph 69 stipulates:

In conducting its investigations of Level 2 or Level 3 uses of force, as defined in this Agreement, the Internal Affairs Force Division shall:

- a) respond to the scene and consult with the on-scene supervisor to ensure that all personnel and individuals on whom force was used have been examined for injuries, that the use of force has been classified according to APD’s classification procedures, that individuals on whom force was used have been given the opportunity to indicate whether they are in pain or have injuries, and that all officers and/or individuals have received medical attention, if applicable;
- b) review available on-body recording device video of the initial contact with the individual against whom force was used up to the point at which the individual is in custody on-scene. If an officer used force after an individual was in custody, the reviewer shall also review available OBRD video of any in-custody uses of force. The investigator shall have discretion not to review video that is irrelevant to the determination of whether the use of force complied with APD policy. This provision does not preclude the investigator from looking at additional video if necessary;
- c) ensure that all evidence to establish material facts related to the use of force, including but not limited to audio and video recordings, photographs, and other

documentation of injuries or the absence of injuries is collected;

d) ensure that a canvass for, and interview of, witnesses is conducted. In addition, witnesses should be requested to provide a video-recorded or signed written statement in their own words;

e) ensure, consistent with applicable law, that all officers witnessing a Level 2 or Level 3 use of force by another officer provide a use of force narrative of the facts leading to the use of force;

f) ensure that involved and witness officer(s) to the use of force have completed and signed a written order directing them not to speak about the force incident with other officers until they are interviewed by the investigator of the Internal Affairs Force Division;

g) conduct only one-on-one interviews with involved and witness officers;

h) review all Use of Force Reports to ensure that these statements include the information required by this Agreement and APD policy;

i) ensure that all Use of Force Reports identify all officers who were involved in the incident, witnessed the incident, or were on the scene when it occurred;

j) conduct investigations in a rigorous manner designed to determine the facts and, when conducting interviews, avoid asking leading questions and never ask officers or other witnesses any questions that may suggest legal justifications for the officers' conduct;

k) record all interviews;

l) consider all relevant evidence, including circumstantial, direct, and physical evidence, as appropriate, and make credibility determinations, if feasible; and

m) make all reasonable efforts to resolve material inconsistencies among the officer, individual, and witness statements, as well as inconsistencies between the level of force described by the officer and any injuries to personnel or individuals.



## **Results**

Primary: **In Compliance**

Secondary: **In Compliance**

Operational: **In Compliance**

**4.7.57 Paragraph 70 is self-monitored by APD.**

### **4.7.58 Assessing Compliance with Paragraph 71: FIS Investigative Timelines**

Paragraph 71 stipulates:

**“The Internal Affairs Force Division shall complete Level 2 or Level 3 administrative investigations within the applicable deadlines in the Collective Bargaining Agreement between the City and Intervenor. Any request for an extension to this time limit must be approved by the commanding officer of the Internal Affairs Force Division through consultation within the chain of command of the Bureau of Police Reform. At the conclusion of each use of force investigation, the Internal Affairs Force Division shall prepare an investigation report. The report shall include:**

- a) a narrative description of the incident, including a precise description of the evidence that either justifies or fails to justify the officer’s conduct based on the Internal Affairs Force Division’s independent review of the facts and circumstances of the incident;**
- b) documentation of all evidence that was gathered, including names, phone numbers, addresses of witnesses to the incident, and all underlying Use of Force Reports. In situations in which there are no known witnesses, the report shall specifically state this fact. In situations in which witnesses were present but circumstances prevented the author of the report from determining the identification, phone number, or address of those witnesses, the report shall state the reasons why. The report should also include all available identifying information for anyone who refuses to provide a statement;**
- c) the names of all other APD officers or employees witnessing the use of force;**
- d) the Internal Affairs Force Division’s narrative evaluating the use of force, based on the evidence gathered; and an assessment of the incident for tactical and training implications, including the use of de-escalation techniques or lesser force options;**

- e) if a weapon was used by an officer, documentation that the officer's certification and training for the weapon were current at the time of the incident; and
- f) the complete officer history in the Internal Affairs Division database for the past five years.

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.59 Paragraph 72 is self-monitored by APD.**

### **4.7.60 Compliance with Paragraph 73: FIS Findings Not Supported by Preponderance of the Evidence**

Paragraph 73 stipulates:

**"For administrative investigations, where the findings of the Force Investigation Section investigation are not supported by a preponderance of the evidence, the Internal Affairs Division commanding officer shall document the reasons for this determination and shall include this documentation as an addendum to the original investigation report. The commanding officer of the Internal Affairs Division shall take appropriate action to address any inadequately supported determination and any investigative deficiencies that led to it. The Internal Affairs Division commanding officer shall be responsible for the accuracy and completeness of investigation reports prepared by the Internal Affairs Division."**

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.61 Paragraphs 74 – 77 are self-monitored by APD**

### **4.7.65 Assessing Compliance with Paragraph 78: Force Review Board Responsibilities**

Paragraph 78 stipulates that:

**"APD shall develop and implement a Force Review Board to provide management oversight of tactical activations and Level 2 and Level 3 uses of force. The**

**Chief or their designee shall appoint the Force Review Board members. The Force Review Board shall:**

- a) review all uses of lethal force, all in-custody deaths, and samples of other Level 3 uses of force, Level 2 uses of force, and tactical activations within 60 days of receiving the completed reports.**
- b) hear the presentation from the Internal Affairs Division or Special Operations Division chain of command and discuss as necessary to gain a full understanding of the facts of the incident.;**
- c) determine whether the incident raises misconduct, policy, training, equipment, or tactical concerns, and refer such incidents to the appropriate unit within APD to ensure the concerns are resolved;**
- d) document its findings and recommendations within 15 business days of the Force Review Board presentation; and**
- e) review and analyze use of force data, on at least a quarterly basis, to determine significant trends and take management action.**

## **Methodology**

In preparation for this report, the monitoring team again attended FRB meetings to ensure they were being conducted in a manner that supports compliance with the requirements of this paragraph. We conducted reviews of nine specific cases the FRB heard during this monitoring period,<sup>31</sup> corresponded with APD personnel responsible for administering FRB meetings, and requested additional relevant data that the department provided. We also met with FRB personnel on-site in December 2024, discussed the status of FRB operations, and attended an FRB meeting in person during that visit.

## **Results**

As noted in prior reports, the updated FRB SOP 2-58 was approved by the monitor and first promulgated on January 30, 2024. The current SOP was updated and was due for review on January 25, 2025; therefore, an updated version was not yet completed at the close of this monitoring period. The tone and tenor of the FRB meetings we attended during this monitoring period continued to be professional and well-managed.

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<sup>31</sup> The monitoring team requested a ledger of cases that the FRB had heard during this reporting period. The ledger listed 35 separate Level 2/3 cases (including six officer-involved shooting cases) that were available for our review. The monitoring team selected nine total cases (Three OIS cases, and six additional cases), representing a 26% sample of all the available cases.

APD and its training academy created a two-day program for new FRB members, and the first delivery of that course occurred during this monitoring period on January 23, 2025. That training curriculum was previously reviewed and approved by the monitoring team. The training initiative is meant for new APD personnel who may be called upon to serve as members of the FRB. During our site visit, the monitoring team discussed the proposed training, and we provided additional feedback regarding testing methods. APD incorporated our feedback into the program. We reviewed the records from the training and learned that five new APD personnel attended the training. A ledger we were provided lists 12 “active” APD personnel now available to serve on the FRB. This number should be regularly monitored, as should the performance of newly trained FRB members as they begin their roles.

The FRB administrator continued to document case referrals generated during meetings, assigned deadlines for their completion, and tracked them until they were considered closed by the FRB. Meetings continued to have standard and professional opening comments, discussion of past referrals, and, when necessary, new due dates were assigned for referrals that were still pending.

The monitoring team was provided ledgers for FRB cases heard between August 1, 2024, and January 31, 2025. During this monitoring period, the FRB meetings generated 19 separate referrals sent out for follow-up by the relevant organizational units for tactics, supervision, equipment, training, policy issues, and requests to commend officers. Time was spent during each meeting to address the status of any previous (and pending) referrals to determine if appropriate action was taken.

To achieve compliance with Paragraph 78, APD must meet each of several requirements contained within the introductory paragraph and sub-paragraphs 78a – 78e. The introductory section of this paragraph includes two parts:

1. APD shall develop and implement a Force Review Board to provide management oversight of tactical activations and Level 2 and Level 3 uses of force.
2. The Chief or the Chief’s designee shall appoint the Force Review Board members.

APD has developed and implemented a Force Review Board (FRB) as required by Item 1 of this paragraph. Meetings we attended during the 21<sup>st</sup> monitoring period had the same features as we reported in the past, with scripted opening remarks and procedures to confirm that meeting procedures are standardized. APD has also met the requirement of Item 2 above by empaneling the FRB to review tactical activations, in-custody deaths, and Level 2 and Level 3 uses of force. The Chair of the FRB continues to ensure each voting member has reviewed the case file materials in preparation for the meeting, and each member is required to acknowledge if they have reviewed the materials verbally. As noted above, the FRB must demonstrate it has met the requirement to “...provide management oversight” during the meetings they hold. This requirement is the context in which the paragraph is viewed and is the central tenet of the FRB. Our observations of APD’s FRB during this reporting period have not revealed

any issues of concern and have been conducted in a professional manner during the meetings we observed.

The monitoring team selected nine Level 2 and 3 use of force cases that the FRB heard during this monitoring period, representing a 26 percent sample of the total cases.<sup>32</sup> For purposes of this report, our compliance assessment of APD's performance to "...provide management oversight" of tactical and use of force cases, as well as Paragraphs 78a, 78b, 78c, and 78d, were included in our case reviews.<sup>33</sup>

Table 4.7.65, on the following page, summarizes our reviews of the use of force cases discussed above.

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<sup>32</sup> Three OIS cases were reviewed, which was half of those heard by the FRB during this reporting period.

<sup>33</sup> We note that APD met the requirements of 78e, which are not case-specific and, therefore, not included in the chart. However, 78e findings were considered for Operational Compliance of this paragraph.

Table 4.7.65

| Para | Paragraph Provision   | IMR-21-32 | IMR-21-33 | IMR-21-34 | IMR-21-35 | IMR-21-36 | IMR-21-37 | IMR-21-38 | IMR-21-39 | IMR-21-40 |
|------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| 78   | Provide management oversight of tactical activations and Level 2 and Level 3 uses of force  | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78a  | Review all uses of lethal force, all in-custody deaths, and samples of other Level 3 uses of force, Level 2 uses of force, and tactical activations within 60 days of receiving the completed reports | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78b  | Hear the presentation from the Internal Affairs Division or Special Operations Division chain of command <sup>34</sup>  | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78b  | Discuss as necessary to gain a full understanding of the facts of the incident  | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78c  | Determine whether the incident raises misconduct, policy, training, equipment, or tactical concerns   | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78c  | Refer such incidents to the appropriate unit within APD to ensure the concerns are resolved   | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 78d  | Document its findings and recommendations within 15 business days of the Force Review Board presentation  | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |

We continued to see strong attendance by FRB members appointed by the Chief. APD consistently hears cases within 60 days of being approved by the IAFD Commander, putting APD in compliance with Paragraph 78a.

APD continued to apply the August 2023 methodology for sampling use of force cases, which was previously submitted for our review and approval. We reviewed a December 10, 2024, Interoffice Memorandum, which noted a change in the scoring of non-OIS Level 3 cases, which APD determined were underrepresented at the FRB. This slight

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<sup>34</sup> We note that APD now has a dedicated IAFD representative that presents cases. This was discussed and agreed upon by the parties during the IMR-20 monitoring period.

change to the methodology occurred only after data were presented to the FRB and approved. We will assess the efficacy of the change to the methodology during the IMR-22 monitoring period. For now, the fact that APD is self-identifying issues and appropriately modifying its sampling methodology is a positive sign for the future.

During this monitoring period, APD held 12 separate and distinct FRB meetings. The following are statistics related to the performance of the FRB during the IMR-21 reporting period:

- A total of 42 use of force, in custody death, and tactical activation cases were reviewed by the FRB.
- Of the 42 cases reviewed, 6 were tactical activations.
- Of the 42 cases, 35<sup>35</sup> were uses of force, and the breakdown included:
  - 23 Level 2 use of force cases.
  - 12 Level 3 use of force cases.
    - Six Level 3 officer-involved shooting (OIS) cases; and
    - Six Level 3 non-OIS cases.

Paragraph 78d requires the FRB to document its findings and recommendations within 15 business days of the FRB presentation. We reviewed data in the form of ledgers and meeting minutes that captured the information required by the CASA. APD complied with the requirement of Paragraph 78d during this reporting period.

During the IMR-21 monitoring period, we were provided quarterly trend report data for the 2<sup>nd</sup> quarter of 2024 (presented on August 8, 2024) and the 3<sup>rd</sup> quarter of 2024 (presented on November 7, 2024). During the latter meeting, the decision was made to adjust the sampling methodology for Level 3 non-OIS uses of force. We found the presentations professional and inclusive of relevant force data. A monitoring team member was in attendance for the meetings, and we saw that the discussion between FRB voting members and the presenters was reflected in the meeting minutes. Based on our review of available data, we see the FRB's performance with respect to reviewing and analyzing the use of force data complies with Paragraph 78e.

The combined efforts of IAFD and the FRB resulted in the FRB attaining and sustaining compliance with 78c during IMR-21. We observed meaningful discussions on topics related to officer actions during the pre-use of force, use of force, and post-use of force stages of the cases the FRB reviewed. Meeting minutes adequately capture the tone and tenor of the discussions for the benefit of those who may want to review the actions of the FRB in a particular meeting.

We appreciate the efforts of the FRB unit staff, and it is our assessment that for IMR-21, the FRB members have continued to demonstrate the performance needed to maintain Operational Compliance with Paragraph 78. As noted, the FRB attendees were engaged in a meaningful way during meetings and asked insightful questions. We

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<sup>35</sup> The reader should note that an individual use of force event can involve multiple uses of force.

suggest that succession planning continue to be a priority for the APD Executive Staff to ensure that good performance can be sustained in the future.

## **Results**

Based on our review of available data and cases during this monitoring period, we have determined that the FRB has maintained Operational Compliance for Paragraph 78. To sustain Operation Compliance, APD must continue to demonstrate that it can reliably provide management oversight of tactical activations and Level 2 and 3 uses of force. We will continue to provide technical assistance to the staff responsible for the FRB when requested.

Primary: **In Compliance**  
 Secondary: **In Compliance**  
 Operational: **In Compliance**

### **4.7.66 Assessing Compliance with Paragraph 79: Annual Use of Force Reporting**

Paragraph 79 states:

**“At least annually, APD shall publish a Use of Force Annual Report. At a minimum, the following information should be included in the Annual Use of Force Report:**

- a) number of calls for service;**
- b) number of officer-initiated actions;**
- c) number of aggregate uses of force, and uses of force by Level;**
- d) number of arrests;**
- e) number of arrests that involved use of force;**
- f) number of SWAT deployments by type of call out;**
- g) number of incidents involving officers shooting at or from moving vehicles;**
- h) number of ECWs in operation and assigned to officers;**
- i) number of incidents involving ECW discharges;**
- j) analysis of ECW trends in ECW discharges, ECW shows of force, officer injuries, and injuries to others. Probe deployments, except those described in Paragraph 30, shall not be considered injuries;**
- k) critical firearm discharges;**



- l) number of individuals armed with weapons;
- m) number of individuals unarmed;
- n) number of individuals injured during arrest, including APD and other law enforcement personnel;
- o) number of individuals requiring hospitalization as a result of use of force, including APD and other law enforcement personnel;
- p) demographic category; and
- q) geographic data, including street, location, or Area Command.”

## Methodology

Paragraph 79 of the CASA addresses the requirements APD must meet by publishing a Use of Force Annual Report. Previously, the monitoring team requested course-of-business documentation that demonstrated provisions within the paragraph had been met and were provided in the Annual Use of Force Report 2023, which was published during the IMR-20 monitoring period. The monitoring team requested documentation to demonstrate that APD was progressing toward the completion of the Annual Use of Force Report for 2024 and was provided with an internal memorandum dated December 5, 2024. That memorandum outlined the steps APD was taking and a schedule of events that will occur throughout the year 2025. APD intends to publish its 2024 Annual Use of Force Report in June 2025. As we have noted in the past, these reports take a great deal of time to assemble. Therefore, we see the timeline APD presented as reasonable, considering the effort it will take to provide the community with an accurate and comprehensive report.

We have determined that APD has sustained the Operational Compliance status achieved for Paragraph 79.

## Results

Primary: **In Compliance**  
 Secondary: **In Compliance**  
 Operational: **In Compliance**

Monitor’s Notes for Paragraph 79:

APD should continue to monitor the uses of force, serious uses of force, low-level control tactics, and shows of force for reporting any discrepancies that may be present. Reporting errors must be reconciled to ensure that statistics published in APD’s Annual Use of Force Reports are accurate.

APD should continue to audit Low-Level Control Tactics incidents to ensure proper categorization is taking place. Data collected from these audits should inform the Annual Use of Force reports, and when appropriate, problematic cases should be referred to IA and the Academy.

**4.7.67 Paragraph 80 is self-monitored by APD.**

**4.7.68 – 4.96. Paragraphs 81 – 109 were terminated.**

**4.7.97 Assessing Compliance with Paragraph 110: Individuals in Crisis and Related Issues**

This paragraph is a Non-Rated Paragraph.

**4.7.98 – 4.7.113 Paragraphs 111 – 117 and 119 – 126 have been terminated. Paragraph 118 is unmeasured.**

**4.7.114 Assessing Compliance with Paragraph 127**

[THIS PARAGRAPH INTENTIONALLY LEFT BLANK.]

**4.7.115 Paragraph 128 is self-monitored by APD.**

**4.7.116 – 4.7.148 Paragraphs 129 – 137 and 139 – 161 have been terminated.**

**4.7.148 Assessing Compliance with Paragraph 162**

Paragraph 162 stipulates:

**“To maintain high-level, quality service; to ensure officer safety and accountability; and to promote constitutional, effective policing, APD and the Civilian Police Oversight Agency shall ensure that all allegations of officer misconduct are received and are fully and fairly investigated; that all findings in administrative investigations are supported by a preponderance of the evidence; and that all officers who commit misconduct are held accountable pursuant to a fair and consistent disciplinary system. To achieve these outcomes, APD and the Civilian Police Oversight Agency shall implement the requirements below.”**

This Paragraph is an introductory paragraph for the Internal Affairs Professional Standards (IAPS) unit (formerly IAPS -Misconduct Division) and the Civilian Police Oversight Agency (CPOA) related CASA requirements. As such, it requires no direct evaluation but is subsumed by the IAPS- and CPOA-related individual requirements below.

**4.7.149 – 4.7.175 Paragraphs 163 – 182 are terminated.**

#### **4.7.169 - 4.7.180 Assessing Compliance with Paragraphs 183 - 194: Investigation of Complaints**

**The IAPS portions of Paragraphs 183, 190, and 191 are self-monitored by APD.**

Paragraphs 183, 190, and 191 of the CASA pertain to requirements for thoroughness, timeliness, reliability of findings, and overall quality regarding the investigation of misconduct complaints. These paragraphs require that all relevant evidence be considered and that those investigations are fair, impartial, and reach reliable findings. They also require time limits for the completion of investigations. During this monitoring period, APD moved into self-monitoring for these paragraphs. Therefore, we only report on CPOA cases for this reporting period.

During the 21<sup>st</sup> reporting period, monitoring team members reviewed a stratified random sampling of the following 20 investigations completed by or under the authority of the CPOA: [IMR-21-41], [IMR-21-42], [IMR-21-43], [IMR-21-44], [IMR-21-45], [IMR-21-46], [IMR-21-47], [IMR-21-48], [IMR-21-49], [IMR-21-50], [IMR-21-51], [IMR-21-52], [IMR-21-53], [IMR-21-54], [IMR-21-55], [IMR-21-56], [IMR-21-57], [IMR-21-58], [IMR-21-59], and [IMR-21-60]. The monitoring team also met with the CPOA Executive Director periodically during this monitoring period, as well as the agency members during the on-site monitoring visit.

CPOA findings and advisements are discussed in greater detail in paragraphs 271-292. We note that none of the 20 CPOA cases we reviewed were deficient, yielding a 100 percent compliance rate for Paragraphs 183 and 190.

Regarding the requirements relating to the timeliness of case investigations, the monitoring team reviewed 20 investigations completed by CPOA investigators and found that seven of the 20 cases exceeded the time requirements. The review indicated that of the seven cases out of compliance for timeliness, only two of the investigations were outside the time requirements, and five additional cases were outside the time requirements only for the administrative review of the completed cases. In those cases, the Director codified the reason for the delay as due to the excessive caseload and the fact that none of those cases resulted in sustained findings. Therefore, for these seven cases, non-compliance with the timeliness requirements did not result in the loss of any opportunity to impose discipline. The CPOA has been applying this case "triage" protocol for several monitoring periods to prioritize cases with sustained findings to ensure no opportunity to take corrective action is lost. This equates to a 65 percent compliance rate for paragraph 191 for the random sample of cases, a 20 percent decline compared to IMR-20. The decline in compliance for this paragraph was attributed to investigating cases that had been triaged and determined to be either minor violations and/or cases with little to no evidence to support the allegations. The CPOA continues to struggle to meet its obligations to investigate all citizen complaints within the time requirements. The CPOA received 425 complaints during this monitoring period, and after an administrative preliminary review, 158 were assigned to be investigated, of which 116 investigations were completed. At the end of

this reporting period, the CPOA had 103 open investigations, 45 of which were over 120 days from the date assigned or when the subject letters were sent. This is most likely a result of the Agency's understaffing, discussed further in paragraphs 198 and 279 of this report. The timeliness of the CPOA investigations is addressed in detail in paragraphs 271-292.

#### **4.7.169 Compliance with Paragraph 183: Investigations Reach Reliable Conclusions**

Paragraph 183 stipulates:

**"APD and the Civilian Police Oversight Agency shall ensure that investigations of officer misconduct complaints shall be as thorough as necessary to reach reliable and complete findings. The misconduct complaint investigator shall interview each complainant in person, absent exceptional circumstances, and this interview shall be recorded in its entirety, absent specific, documented objection by the complainant. All officers in a position to observe an incident, or involved in any significant event before or after the original incident, shall provide a statement regarding their observations, even to state that they did not observe anything."**

#### **Results**

Our review indicated that the CPOA experienced no issues with compliance with this paragraph during this reporting period.

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

#### **4.7.170 – 4.7.175 Paragraphs 184-189 are self-monitored by APD**

#### **4.7.176 Assessing Compliance with Paragraph 190: Considering All Relevant Evidence**

Paragraph 190 stipulates:

**"In each investigation, APD and the Civilian Police Oversight Agency shall consider all relevant evidence, including circumstantial, direct, and physical evidence. There will be no automatic preference for an officer's statement over a non-officer's statement, nor will APD or the Civilian Police Oversight Agency disregard a witness's statement merely because the witness has some connection to the complainant or because of any criminal history. During their investigation, APD and**

the Civilian Police Oversight Agency shall take into account any convictions for crimes of dishonesty of the complainant or any witness. APD and the Civilian Police Oversight Agency shall also take into account the record of any involved officers who have been determined to have been deceptive or untruthful in any legal proceeding, misconduct investigation, or other investigation. APD and the Civilian Police Oversight Agency shall make efforts to resolve material inconsistencies between witness statements.”

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.177 Assessing Compliance with Paragraph 191: 90 Days to Complete Administrative Investigations**

Paragraph 191 stipulates:

“All administrative investigations conducted by the Internal Affairs Division or the Civilian Police Oversight Agency shall be completed within the applicable deadlines in the Collective Bargaining Agreement between the City and Intervenor. Review and final approval of the investigation, and the determination and imposition of the appropriate discipline, shall be completed within 40 days of the completion of the investigation. Extensions may also be granted to the extent permitted by state and city law or the Collective Bargaining Agreement between the City and Intervenor.”

## **Results**

CPOA reached 65% compliance in this paragraph. In our experience, such failures are generally related to inadequate staffing or supervision.

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **Not In Compliance**

### ***Recommendation for Paragraph 191***

***4.7.177a: Although the City has refocused its efforts on adequate staffing for CPOA by allocating additional funds to hire more staff, it should focus on conducting a quantitative analysis of the reasons that cause any case to be delayed past 120 days.***

**4.7.178-4.7.186 Paragraphs 192 – 194 are self-monitored by APD.****Paragraphs 195 – 197 are terminated.****4.7.184 – 4.7.186 Assessing Compliance with Paragraph 198**

Staffing Requirements of Paragraph 198 of the CASA require the City to adequately fund and resource the internal affairs functions (IAPS, CPOA, and the CPOA Board). The monitoring team met with CPOA during our site visit for this reporting period. The CPOA has remained in the same location for several years. The CPOA has outgrown the allocated space, as several investigators are assigned to the same offices, and no formal interview rooms are available. The City reports that it is examining other possible facilities, but no movement has occurred during this reporting period.

The monitoring team discussed staffing needs, reviewed staffing charts, and assessed the timeliness of processing complaints and information of potential misconduct. This review used randomly selected investigations and assessed the quality of those investigations. The findings related to Paragraph 198 indicate the following outcomes related to the requirements of the CASA.

The CPOA Board was fully staffed with five members as of the end of IMR-20. The Board has met regularly and continues to meet its responsibilities, as discussed further in paragraph 271 of this report.

The non-compliance finding indicates the continued staffing and supervision deficiencies at CPOA that we have noted in past reports. Although the City is increasing the staffing level of the CPOA, it should continue evaluating the Agency's needs and provide the necessary resources to fulfill its responsibilities. The number of untimely cases revealed by our stratified random sampling is discussed more fully in conjunction with paragraphs 191 and 281 of this report. A brief review of the current staffing of the CPOA revealed that there is currently an Executive Director, a Deputy Director, two analysts, and eight full-time investigators. The CPOA has increased its investigator staffing by one additional investigator during this reporting period. At the end of this monitoring period, the CPOA created Lead Investigator and Senior Investigator positions filled from within. This was part of the Executive Director's plan to increase efficiency by adding additional supervision. The CPOA is also in the process of hiring two additional investigators, who should also assist in meeting its mission. Once additional line investigator positions are filled, combined with added supervision, the CPOA will be better suited to meet its responsibilities. The Executive Director advised that the CPOA is also conducting an internal staffing study to establish adequate staffing moving forward. It is important that the CPOA be staffed sufficiently to meet CASA and CBA timelines, and to prevent discipline for sustained charges from being "time-barred." The underlying issue of adequate staffing rests with the ability of each investigator to complete investigations within the time requirements. According to the Executive Director, CPOA received over 853 civilian complaints in 2024 and 425 during this monitoring period alone. Of the 853 complaints received in 2024, 350 cases

required full investigations. This depicts a year-over-year increase in cases requiring a full investigation. Of the 425 complaints received during this monitoring period, 158 required full investigations. The CPOA was able to complete 116 investigations during this monitoring period. The CPOA had 103 open cases at the end of this reporting period, with 45 cases exceeding the required time limit of 120 days. The CPOA also had 92 cases pending administrative review by the Director. Of those cases, 75 cases are past the 120-day time limit. The Director indicated that the higher number of cases pending review is due to many older cases being completed during this period.

CPOA continues to struggle to find and hire enough investigative staff to meet its responsibilities. Their staffing has increased from seven to eight full-time investigators, but most of their staff are new and will be required to learn the process to become more efficient. In IMR-20, we noted a deficiency in the timely completion of investigations by the CPOA, which, in the monitor's opinion, may be attributed to an excessive caseload for each investigator (staffing) and a lack of supervision due to a lack of staffing. This remained a problematic issue during this reporting period.

During most of this monitoring period, CPOA had only two supervisors responsible for all administrative oversight of the Agency, training new investigators, training new board members, and reviewing and approving all investigations. This was the first reporting period in the past two years that the CPOA had two supervisors. The Deputy Director has been learning the required functions to assist the Director. This has helped, but it appears that, based on our knowledge of workflows and processes, the Agency is still not adequately staffed.

Many investigators continue to carry 20 or more active investigations, which, based on the monitoring team's experience, likely leads to poor outcomes regarding timeliness. The newest investigators, who are recently hired and still learning, temporarily carry fewer cases.

The Executive Director advised that the CPOA attempts to triage cases and prioritize the cases they believe may be sustained so the City can adhere to the CASA and CBA timelines for discipline. Unfortunately, the cases that are presumed less likely to be sustained are often extended past due dates, and some of those cases could end up with sustained findings without the ability to discipline due to those timelines. None of the reviewed cases resulted in "time-barred" discipline during this period. Progress has been made from the monitor's perspective, but CPOA remains in crisis. This crisis was birthed by understaffing, the need for the City to fill supervisory positions, and the need to improve the Agency's organizational structure.

We note that the Executive Director's and the Deputy Director's positions are now filled. Although CPOA reports that the addition of the Deputy Director has helped, the need for more first-line supervision and investigative staff remains. The Executive Director has still been responsible for conducting the final administrative reviews for the agency on each case and has remained responsible for the training of the newer investigators while continuing to assist the CPOAB in preparation for their hearings.



In the monitor's opinion, the workload for the Executive Director remains excessive and unsustainable.

At the end of this monitoring period, the Executive Director advised that they have completed a comprehensive staffing study from within their Agency and that a draft report has been composed. A final report is expected to be presented to the City early in the next reporting period<sup>36</sup>. The staffing study is anticipated to outline workload assessments and recommendations to fulfill CPOA's mission to complete all citizen complaint investigations within the required time limits. The Executive Director indicated that they will make several recommendations to the City to provide a plan to obtain the necessary resources to meet its mission. It will be up to the City to consider the plan and recommendations to prepare the CPOA to succeed.

We have recommended for numerous monitoring reports that the City should conduct a comprehensive staffing study to evaluate a reasonable staffing level for the CPOA to meet its obligations. It is the opinion of the monitor that the fact that the CPOA has taken on the responsibility of conducting such a study is encouraging.

#### **4.7.184 Assessing Compliance with Paragraph 198: CPOA Staffing**

Paragraph 198 stipulates:

**"The City shall ensure that APD and the Civilian Police Oversight Agency have a sufficient number of well-trained staff assigned and available to complete and review thorough and timely misconduct investigations in accordance with the requirements of this Agreement. The City shall re-assess the staffing of the Internal Affairs Professional Standards Division after the completion of the staffing study to be conducted pursuant to Paragraph 204. The City further shall ensure sufficient resources and equipment to conduct thorough and timely investigations."**

#### **Results**

Primary: **In Compliance**  
 Secondary: **In Compliance**  
 Operational: **Not In Compliance**

#### ***Recommendations for Paragraph 198***

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<sup>36</sup> The monitoring team received a draft report and will comment on it during the next reporting period.



***4.7.184a: The City should ensure that the CPOA is adequately staffed for its investigative responsibilities.***

***4.7.184b: The CPOA Executive Director should develop specific measures of workflow, the time needed to complete the “average” CPOA investigation, and the time needed to assess and perform quality control processes.***

***4.7.184c: Carefully review the comprehensive staffing study recently conducted to establish realistic expectations on the number of investigations an investigator can complete appropriately. That number should be utilized to establish mandatory staffing levels and enable the CPOA to complete its investigations within the allotted time requirements.***

**4.7.185 Paragraphs 199 - 200 are self-monitored by APD.**

#### **4.7.187 Assessing Compliance with Paragraph 201: Fact-Based Discipline**

Paragraph 201 requires discipline to be fact-based and imposed for sustained violations based on appropriate and articulated consideration of aggravating and mitigating circumstances. Paragraph 202 requires the use of a disciplinary matrix in imposing discipline and the analytical elements of the disciplinary regulation SOP 3-46. Read together, these paragraphs require progressive discipline that is fair, consistent, and commensurate with the violation committed while balancing aggravating and mitigating factors. We do not discuss Paragraph 202 in this section, as it is in self-assessment by APD.

During the IMR-21 reporting period, the monitoring team reviewed a stratified random sample of disciplinary cases in which allegations were sustained and discipline imposed. We also met with the Chief of Police, the Disciplinary Authorities, City Attorney Representatives, and the CPOA Director. We also reviewed APD and CPOA discipline processes.

#### **Processes**

As we documented in past monitor reports and reported to the Court in hearings, marked improvements have been made in the processes of the APD disciplinary system. These have been well documented and are now well-ensconced and need not be repeated in this report. A new positive development in the implementation process is assigning an attorney or attorneys from City Legal to focus primarily on IAPS and IAFD legal matters arising in the accountability processes. Although timely legal advice from City Legal was always available to IAPS and IAFD, having an attorney or attorneys focus on these issues is a plus for the disciplinary system and further reflects APD and the City's commitment to an effective, efficient, and fair accountability system.

At the end of the IMR-21 reporting period, the APD disciplinary system continued to function with four disciplinary authorities, although there has been some slight revision of the disciplinary process. The Superintendent of Police Reform (a former deputy chief) continues to function as the chief disciplinary authority, and the Deputy Superintendent of Police Reform (a major) functions as the deputy disciplinary authority. There are now two Professional Integrity Commanders (PIC), both slots filled by Commanders.

In matters with sustained allegations, where the proposed discipline is more than 40 hours, one of the PICs will be the first line of review of the investigation and recommended discipline. The Deputy Superintendent completes the second review, and the Superintendent presides over PDHs. The appropriate board, the Personnel Board or the Labor Management Relations Board, hears appeals of those matters.

Both PICs will complete a review of major disciplinary actions in which the proposed discipline is 40 hours or less. The Deputy Superintendent hears the PDH, and the Superintendent hears the appeal of such matters.

PDHs are not heard in minor disciplinary matters. Instead, one of the PICs will be assigned to the case and will impose discipline. If there is a disagreement between the recommendation of the area commander and the PIC on the level of discipline, the Deputy Superintendent designates the appropriate discipline. The Superintendent hears the appeals of such matters.

Another process revision is that the Superintendent reviews and concurs or non-concurs in the imposition of all Non-Discipline Corrective Actions (NDCA).

As a result of this consolidation of disciplinary authorities and the other marked process improvements, more uniformity in conducting disciplinary analyses and a notable improvement in the consistency of the outcomes has continued.

### **Disciplinary Case Review**

The monitoring team reviewed a stratified random sample of 24 cases in which an allegation or allegations were sustained, resulting in a disciplinary analysis.

In that review, we identified thirteen cases in which there was the potential for major discipline: [IMR-21-61] [IMR-21-62], [IMR-21-63], [IMR-21-64], [IMR-21-65], [IMR-21-66], [IMR-21-67], [IMR-21-68], [IMR-21-69], [IMR-21-70], [IMR-21-71], [IMR-21-72], and [IMR-21-73].

In addition, we reviewed eleven cases that were described as minor disciplinary cases: [IMR-21-74], [IMR-21-75], [IMR-21-76], [IMR-21-77], [IMR-21-78], [IMR-21-79], [IMR-21-80], [IMR-21-81], [IMR-21-82], [IMR-21-83], and [IMR-21-84].

Four of these cases cited above contained appeals of discipline, and we reviewed not only the imposition of discipline but also the appeal itself: [IMR-21-75], [IMR-21-61], [IMR-21-68], and [IMR-21-72].

The above-noted process enhancements have yielded noticeable improvements in adherence to the tenets of progressive discipline and a steadily increasing compliance rate. This steady increase has resulted in our finding of only one case among the 24 cited above where we found discipline deficient.

In that case, [IMR-21-66], an allegation of violation of 2.71-4A1 (search and seizure) was sustained against an officer, and an allegation of 3.14-41b (failure of supervisory responsibility) was sustained against a supervising Sergeant. Both offenses were a sanction level 5, misconduct, 3<sup>rd</sup> offense. The presumptive discipline of 40 hours suspension was imposed for both, but not carried out due to CBA time violations. Thus, the discipline is deficient.

It should be noted that the potential violations were not discovered until a presentation to the Force Review Board, and the delay led to the CBA time violation. The monitor also points out that the matter involved the seizure of a handgun following a domestic violence incident in which a daughter was arrested for assaulting her mother. In this case, the handgun, apparently owned by the daughter, was shown to the officer by the mother (victim) and then seized by the officer after he sought guidance from the supervising sergeant. The mother was concerned about the gun remaining in the home. Whether the seizure was unconstitutional in this case was certainly a thought-provoking, "grey zone" determination and is an example of the type of Fourth Amendment issue (warrantless search and seizures that are very fact-determinative) where APD should seek legal guidance from City Legal before making a finding.

The above review and analysis represent a noteworthy compliance rate of 96 percent for the case reviews conducted and reflect a steadfast commitment to an effective, fair, and efficient accountability system on the part of the disciplinary authorities and those who conduct the investigations and prepare the disciplinary packets for consideration.

There is one case we reviewed, which, although we found the discipline imposed to be sufficient under the totality of circumstances, we noticed an area where process improvement could be made. That case, [IMR-21-71], involved a sustained finding for 2.42.4E.2c (failure to attach breath certification card to a DWI packet), a level 6 sanction, Performance, 2<sup>nd</sup> offense. The minimum within the applicable range, a Letter of Reprimand, was imposed. Mitigating factors found at the PDH were that the officer accepted responsibility and claimed that he eventually found the card and forwarded it. In his IA interview, the officer never mentioned that the card had been found and forwarded. He claimed it was not forwarded because he changed the charge from an arrest to a summons and could not find it. This may or may not have been a contradiction between the IA statement and the PDH, depending on when the card was found, but because there was no questioning on the issue, the record was not clear.

As we have pointed out in the past, when a subject in a PDH offers information that seemingly contradicts an earlier IA statement or offers mitigating factors for the first time, it should be noted, and questioning should occur for clarification purposes.

## **Appeals**

We noted in IMR-16 that appeals of disciplinary decisions would be an area of future review. In this regard, we reviewed four cases: [IMR-21-75], [IMR-21-61], [IMR-21-68], and [IMR-21-72], in which sustained charges and discipline were imposed. All were internal appeals considered by a disciplinary authority.

In these internal appeals, we found both the underlying discipline and the handling of the appeal to be appropriate. As in the four previous monitor's reports, we continue to find the City's and APD's appeal efforts appropriate.

## **Non-Concurrence Letters**

The monitoring team reviewed the seven non-concurrence letters issued during the IMR-21 reporting period: [IMR-21-85], [IMR-21-86], [IMR-21-87], [IMR-21-88], [IMR-21-89], [IMR-21-90], and [IMR-21-91]. In all seven, we find the non-concurrence letters to be adequate in explaining the thought process of the disciplinary authority in disagreeing with the CPOA findings. We also note that the disciplinary authorities have followed previous monitor recommendations and incorporated or referred to the findings of the PIC and lower review level comments in the non-concurrence letter. Also, an explanation detailed enough to clearly understand the disciplinary authority's thought process is provided commensurate with the degree of the non-concurrence.

MONITOR'S NOTE: Five of the seven non-concurrences dealt with interpretation issues of 2-8 (Use of On-Body Recording Devices), particularly section 2-8-5 (Mandatory Recording) and 2-8-5.D.1 regarding deactivation of a mandatory recording. It is apparent that the CPOA and the Disciplinary Authorities differ in their interpretation of this SOP. In talks with APD, the monitor was pleased to learn that APD is in the process of adding clarification to the SOP. We recommend that clarification be considered for 2-8-5.D.1, particularly the meaning of "intended contact" and when it is appropriate to deactivate the mandatory recording.

Paragraph 201 stipulates:

**"APD shall ensure that discipline for sustained allegations of misconduct is consistently applied, fair, and based on the nature of the allegation, and that mitigating and aggravating factors are set out and applied consistently."**

## **Results**

Primary: **In Compliance**  
 Secondary: **In Compliance**

Operational: **In Compliance**

**4.7.188 – 4.7.197 Paragraph 202 is self-monitored by APD. Paragraph 203 is not monitored. Paragraph 204 is self-monitored by APD. Paragraphs 205 – 211 are terminated.**

**4.7.198-4.7.205 Assessing Compliance with Paragraphs 212-219 EIS/EIRS/PMEDS**

The policy, curriculum, and plans to move forward with an Early Intervention System that can meet or exceed CASA requirements have been established. As we have long recommended, PEMS is proposed to be a data-driven system with thresholds supported by data analysis and research, using standard deviations to establish thresholds rather than arbitrarily assigned numbers of incidents.

During the monitoring period for IMR-21, Department Memorandum 25-10 instructed personnel that Data-driven alerts would migrate from Benchmark Analytics to Peoplesoft. Command Initiated assessments would be forwarded via Peoplesoft as well. An updated User Manual accompanied the Memorandum, along with instructions to contact the PEMS Lieutenant with any questions or concerns. Instructions for the required timelines for completing a performance assessment were provided during the IMR-20 reporting period, along with newly established automated reminder notices. During the current monitoring period, only one timeline violation was documented by APD, and that supervisor was referred to IA for investigation.

At the close of the monitoring period for IMR-17, course of business documentation from APD indicated that all supervisors had completed training regarding the use of the PEMS system. The PEMS system was used in all APD Bureaus during this reporting period. Training has been ongoing for PEMS/Benchmark-related matters as new supervisors are promoted. Seventeen newly promoted supervisors were trained during this reporting period in September 2024.

APD provided documentation for five Command Initiated Assessments during the IMR-21 reporting period. Four resulted in monitoring plans. Additionally, there were 81 Data Driven alerts, of which 66 were advisable, and 15 were actionable. Thirteen assessments resulted in the implementation of a monitoring plan. Advisable assessments resulted in six monitoring plans, and Actionable assessments resulted in four monitoring plans. During the IMR-21 reporting period, 19 monitoring plans were completed, some of which were carried over from the previous monitoring period. At the conclusion of the current monitoring period, 24 monitoring plans were opened and still pending completion.

During the December 2024 site visit, the monitoring team spent time with 19 supervisors from all area commands to assess their abilities in using the PEMS system. Two commanders, five lieutenants, and 12 sergeants were included. All supervisors we met with stated that they had received training. They reported they were comfortable knowing what to do if they received an alert or where to go with any questions. In a

complete change from prior reports, 15 of the 19 supervisors interviewed received an alert.

While approved policy guidance exists, current policies may need to change and evolve as APD integrates new systems or updates risk factors. Evidence that APD understands this was demonstrated by an additional level of review added to the advisable alerts, which had previously only been reviewed by the sergeant and lieutenant. The process now proceeds through the Commander as it did with actionable alerts. Monthly PEMS Review Board actions highlight corrective actions when necessary. The option to use counseling alone to address an identified need for improvement has been removed.

Prior reports from the monitor highlighted the difficulties in finding supervisors who had received and acted on data-driven alerts with warnings of a low representative sample. That changed significantly during this monitoring period, as nearly all the supervisors contacted had received at least one alert.

APD may want to consider that the PEMS Review Board assesses a larger number of cases. Most months had seven or fewer alerts with only a review of one or two cases. For two months, no review board was convened. Additionally, we suggest that APD provide more detailed meeting minutes to document the actions of the Review Board. This final review step is crucial to ensure appropriate and consistent results in the EIS process.

#### **4.7.198-199 Paragraphs 212 and 213 are self-monitored by APD.**

#### **4.7.200 Assessing Compliance with Paragraph 214**

**[THIS PARAGRAPH INTENTIONALLY LEFT BLANK.]**

#### **4.7.201 Assessing Compliance with Paragraph 215**

Paragraph 215 stipulates:

**“The Early Intervention System shall be a component of an integrated employee management system and shall include a computerized relational database, which shall be used to collect, maintain, integrate, and retrieve data department-wide and for each officer regarding, at a minimum:**

- a) uses of force;**
- b) injuries and deaths to persons in custody;**
- c) all critical firearms discharges;**
- d) failures to record incidents with on-body recording systems that are required to be recorded under APD**

policy, whether or not corrective action was taken, and cited violations of the APD's on-body recording policy;

- e) all civilian or administrative complaints and their dispositions;
- f) all judicial proceedings where an officer is the subject of a protective or restraining order of which APD has notice;
- g) all vehicle pursuits and traffic collisions involving APD equipment;
- h) all instances in which APD is informed by a prosecuting authority that a declination to prosecute any crime occurred, in whole or in part, because the officer failed to activate his or her on-body recording system;
- i) all disciplinary action taken against employees;
- j) all non-punitive corrective action required of employees;
- k) all awards and commendations received by employees, including those received from civilians, as well as special acts performed by employees;
- l) demographic category for each civilian involved in a use of force or search and seizure incident sufficient to assess bias;
- m) all criminal proceedings initiated against an officer of which APD has notice, as well as all civil or administrative claims filed with, and all civil lawsuits served upon, the City and/or its officers or agents, allegedly resulting from APD operations or the actions of APD personnel; and
- n) all offense reports in which an officer is a suspect or offender of which APD has notice."

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.202 Assessing Compliance Paragraph 216**

Paragraph 216 stipulates:



**“APD shall develop and implement a protocol for using the updated Early Intervention System and information obtained from it. The protocol for using the Early Intervention System shall address data storage, data retrieval, reporting, data analysis, pattern identification, supervisory use, supervisory/departmental intervention, documentation and audits, access to the system, and confidentiality of personally identifiable information. The protocol shall also require unit supervisors to periodically review Early Intervention System data for officers under their command.”**

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

**4.7.203 Paragraph 217 is self-monitored by APD.**

**4.7.204 Assessing Compliance Paragraph 218**

Paragraph 218 stipulates:

**“APD shall provide in-service training to all employees, including officers, supervisors, and commanders, regarding the updated Early Intervention System protocols within six months of the system improvements specified in Paragraphs 212-215 to ensure proper understanding and use of the system. APD supervisors shall be trained to use the Early Intervention System as designed and to help improve the performance of officers under their command. Commanders and supervisors shall be trained in evaluating and making appropriate comparisons in order to identify any significant individual or group patterns of behavior.”**

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

**4.7.205 Paragraph 219 is self-monitored by APD.**

**4.7.206 – 4.7.239 Paragraphs 220 – 270 have been terminated.**



#### **4.7.256 through 4.7.277 Assessing Compliance with Paragraphs 271 – 292: Civilian Police Oversight Agency**

Paragraphs 271 through 292 of the CASA pertain to the Civilian Police Oversight Agency (CPOA), including the Civilian Police Oversight Agency Board (CPOAB or the Board). These paragraphs require an independent, impartial, effective, and transparent civilian oversight process that investigates civilian complaints, renders appropriate disciplinary and policy recommendations and trend analysis, and conducts community outreach, including publishing semi-annual reports.

During the monitoring period and the December 2024 site visit, members of the monitoring team held meetings with the CPOA Executive Director and her staff. A stratified sample of 20 CPOA investigations was selected and reviewed, along with disciplinary appeals. The CPOA investigations reviewed were [IMR-21-41], [IMR-21-42], [IMR-21-43], [IMR-21-44], [IMR-21-45], [IMR-21-46], [IMR-21-47], [IMR-21-48], [IMR-21-49], [IMR-21-50], [IMR-21-51], [IMR-21-52], [IMR-21-53], [IMR-21-54], [IMR-21-55], [IMR-21-56], [IMR-21-57], [IMR-21-58], [IMR-21-59], and [IMR-21-60]. The APD made seven non-concurrence decisions, which are discussed in Paragraph 201.

The findings related to Paragraphs 271, 277, 279, and 281 indicate the following outcomes related to the requirements of the CASA.

#### **CPOA Budget and Staffing**

The CPOA Ordinance, 9-4-1-4.A.2, presently states:

**"The CPOA shall have a dedicated budget. The Director shall administer the budget in compliance with the city's Merit Ordinance and contractual services policies and procedures. The Director shall recommend and propose its budget to the Mayor and City Council during the city's budget process to carry out the powers and duties under 9-4-1-1 through 9-4-1-14, including itemized listings for the funding for staff and all necessary operating expenses. Adequate funding shall be provided to uphold the ability of the CPOA to carry out its duties and support its staff and operating expenses."**

In past reports, we found that the CPOA budget and approved staffing were insufficient to meet the CPOA mission, and we emphasized the importance of filling vacant positions. During the last monitor's report, the CPOA was in the process of filling some vacant positions. During this monitoring period, the CPOA was successful in adding an additional investigator but had new vacancies among agency staff. The CPOA Board has been fully instituted and is currently operational, holding monthly meetings. During this monitoring period, a fifth member was appointed to the Board to replace the member who resigned in July of 2024. This commitment has been and is expected to continue to be beneficial to the mission.

## Investigations and Reliability of Findings

Satisfactory cooperation between the CPOA and IAPS has been firmly rooted since the early days of the CASA. In general, both agencies continue to respect each other's roles and realize that it is in their best interests and that of the CASA to cooperate and facilitate their intertwined missions and related areas of responsibility. The CPOA has access to information and facilities reasonably necessary to investigate civilian complaints.

CPOA has the authority to recommend findings and disciplinary action in cases involving civilian complaint investigations. The Superintendent, or a designated disciplinary authority, retains the discretion to impose discipline but is tasked with writing a non-concurrence letter to the CPOAB when there is disagreement with the CPOA recommendations. During this monitoring period, seven cases required non-concurrence letters. All non-concurrence letters were found to comply with the CASA requirements.

As we noted in past reports, the investigations produced by the CPOA once complaints are assigned are generally thorough. During this period, we found that 100 percent of the stratified random sampling of cases reviewed was complete, thorough, and well documented, consistent with the findings in IMR-19 and IMR-20.

Our review revealed that the sample of 20 CPOA cases included two investigations that were administratively closed [IMR-21-45] and [IMR-21-47]. We find those cases administratively closed to be appropriate.

That positive finding notwithstanding, we believe it is worth reiterating that the monitor has approved of administrative closure in situations where a preliminary investigation cannot minimally sustain the allegations contained in a complaint. In a subsequent modification of that approval, the monitor allowed the use of an "unfounded" finding in lieu of "administrative closure" in cases in which a preliminary investigation shows, by clear and convincing evidence, the conduct that is the subject of the complaint did not occur.

In summary, our analysis reveals that all investigations are of appropriate quality. Therefore, based upon the review of the codified random sampling of the cases reviewed, the CPOA has maintained operational compliance in Paragraph 190. As discussed in prior reports and again in this report, the CPOA caseload is excessive, and it does not appear reasonable that even the current eight investigators can thoroughly and timely investigate 853 complaints, resulting in over 350 full investigations in a year. We await CPOA's staffing study to establish a minimum staffing standard<sup>37</sup>.

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<sup>37</sup> The monitoring team received a draft report of the staffing study and will comment on it in the next report.

## Timeliness of Investigations

As the monitoring team has noted since IMR-8, during the review of random samples of investigations, we look for and determine the following dates: complaint received, complaint assigned for investigation, initiation of investigation after assignment, notification letters to the subject officer(s), completion of the investigation, and chain of command review and notification of intent to impose discipline (where applicable). During past site visits, the monitoring team had discussed with the CPOA the delays between the date a complaint is received and the date it is assigned for investigation. Although the CASA does not deal directly with the issue of time to assign, the parties and the monitor agreed that a delay of more than seven working days for assignment is unreasonable and would affect the "expeditious" requirement of Paragraph 281. The assignment of cases has been found to be acceptable.

During this reporting period, the monitoring team found seven investigations of the stratified random sampling of twenty completed cases that exceeded the 120-day limit or the supervisory review period; [IMR-21-41], [IMR-21-42], [IMR-21-43], [IMR-21-44], [IMR-21-45],[ IMR-21-50], and [IMR-21-53]. In [IMR-21-41], the investigation was completed in 255 days after assigned or a notification letter was sent and reviewed 126 days later. In [IMR-21-42 ], the investigation was completed in 94 days and reviewed 128 days later. For [IMR-21-43], the investigation was completed in 106 days and reviewed 126 days later. The investigation for [IMR-21-44] was completed in 130 days and reviewed 91 days later. In [IMR-21-45], the investigation was completed in 85 days and reviewed 69 days later. In the case of [IMR-21-50], the investigation was completed in 102 days and reviewed 54 days later. Finally, for [IMR-21-53], the investigation was completed in 97 days and reviewed 54 days later. This constitutes a 65% compliance rate for the random sampling of cases, which is a 20% decrease in compliance rate from the last reporting period. The documentation of the Director's final review of those cases indicated that the delay was based on the fact that the investigation failed to sustain any allegations against the involved subject officers and the excessive amount of cases to be reviewed.

We also note that the Executive Director continues to triage investigations that she believes initially show some merit, thus minimizing the chance of having an investigation time-barred from administering discipline. During this period, none of the out-of-time cases reviewed had sustained violations. Therefore, the APD did not lose the ability to discipline for any violations in those cases.

A review of the electronic intake records was conducted, and we learned that numerous investigations from more than 120 days after the end of this monitoring period are still pending. According to the records provided, 45 cases are pending, that exceed the 120-day time limit, which is a decrease from the last reporting period, where 84 cases were over 120 days old. There are also 92 cases in the supervisory review process. Also, there is a current caseload of an additional 58 investigations, that are still within the time limit. The current caseload for the CPOA is 103. As previously stated, the CPOA's staffing is currently the Executive Director, Deputy Director, two analysts, and eight investigators. During this period, the staff completed 116 investigations.

Consistent with the last monitoring period, the CPOA was unable to complete all the complaints received, which continues to put a great deal of stress on the investigators and, more importantly, reduces the responsiveness to address citizens' complaints. The backlog of "time-barred" investigations was reduced, which is encouraging. A backlog of investigations that have not or could not be investigated within the time requirements remains a serious concern, as the CPOA continues to receive more cases than it can investigate. The backlog creates a situation under which the APD may not be able to implement discipline on any cases with "Sustained" findings and further deteriorates the public's confidence in its ability to address their complaints. In the last three monitor reports, we have recommended steps be taken to fill the vacant positions within the Agency immediately. We have repeatedly recommended that a comprehensive staffing study be conducted to determine how much staffing is actually needed to fulfill the responsibilities of the CPOA. We do note that the CPOA completed a comprehensive staffing study, which is in the final processing stages and will be submitted to the City and the Independent Monitor early in the IMR-22 reporting period.

In addition, the City has re-instituted an Advisory Review Board. We note that supervision remains paramount in properly managing any government agency and is especially crucial in complying with the CASA. Proper supervision will be paramount to ensuring the CPOA is operating optimally. The current caseload is predicted to continue to increase. The Executive Director has advised that the Lead Investigator and Senior Investigator positions have been created and should be filled in the IMR-22 reporting period. These positions will be supervisory positions and should enhance the Agency's overall efficiency.

Our review of the CPOA's timeliness of completing citizen complaint investigations demonstrates a significant deficiency in the operational compliance with paragraph 281. The CPOA has contracted with an outside investigative agency to assist on a limited basis. It is expected that cases conducted by outside investigative entities will assist in keeping the backlog down, but this is seen as a temporary solution. These actions, in conjunction with additional staff, are expected to assist the CPOA in coming into compliance with the mandates of the CASA in the future.

We have also recommended that the City enter into a memorandum of understanding (MOU) with the APOA and the CPOA to provide all necessary materials to the CPOA to enable them to make appropriate recommendations. According to the Executive Director of the CPOA, a draft MOU has been established but has not been agreed upon as of the end of this monitoring period. The Executive Director has indicated that the CPOA, agency, and Board have received the necessary materials to make appropriate recommendations. Because of the collective bargaining agreement (CBA) verbiage, the City still has to redact all videos and materials to prohibit the Board from being aware of which officers were involved. That process is laborious to the APD and inefficient since the full, un-redacted video recordings are available to the public via the Open Public Records Act. While it is planned for the City's Legal Department, the APOA legal representative, and the CPOA legal advisor to come to a formal agreement on this subject, the CPOA has received sufficient materials to meet their responsibilities, per the Executive Director. Based on this, Paragraph 277 maintains Operational

Compliance. Although the current protocols meet the requirements of this paragraph, the monitor still recommends that the parties enter into an MOU to ensure continued compliance in the future.

#### **4.7.256 Compliance with Paragraph 271: CPOA Implementation**

Paragraph 271 stipulates:

**“The City shall implement a civilian police oversight agency (“the agency”) that provides meaningful, independent review of all civilian complaints, serious uses of force, and officer-involved shootings by APD. The agency shall also review and recommend changes to APD policy and monitor long-term trends in APD’s use of force.”**

#### **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

#### **4.7.257 Paragraph 272 is self-monitored by the City.**

#### **4.7.258 Assessing Compliance with Paragraph 273: Requirements for Service of CPOA Members**

Paragraph 273 stipulates:

**“The City shall ensure that the individuals appointed to serve on the agency are drawn from a broad cross-section of Albuquerque and have a demonstrated commitment to impartial, transparent, and objective adjudication of civilian complaints and effective and constitutional policing in Albuquerque.”**

#### **Methodology**

During the preponderance of this reporting period, five Board members were executing their roles and responsibilities. In a recently enacted City ordinance governing the Board operations and selection process, the prior Board was abolished, and modifications were made to selection criteria for Board members as well as supervision and selection of a new director to better align with CASA requirements and improve operations. The ordinance change also does not allow Board members to be employed by APD for at least three years prior to Board membership appointment, requires passing a background check, and requires residency within the City of Albuquerque. As required by the CASA, the Board's current composition is drawn from a broad section of the Albuquerque community.

## Results

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### 4.7.259 Assessing Compliance with Paragraph 274: CPOA Pre-Service Training

Paragraph 274 stipulates:

**“Within six months of their appointment, the City shall provide 24 hours of training to each individual appointed to serve on the agency that covers, at a minimum, the following topics:**

- a) This Agreement and the United States’ Findings Letter of April 10, 2014;**
- b) The City ordinance under which the agency is created;**
- c) State and local laws regarding public meetings and the conduct of public officials;**
- d) Civil rights, including the Fourth Amendment right to be free from unreasonable searches and seizures, including unreasonable uses of force;**
- e) All APD policies related to use of force, including policies related to APD’s internal review of force incidents; and**
- f) Training provided to APD officers on use of force.”**

## Methodology

For this reporting period, the City Council-appointed Contracts Compliance Officer confirmed that all present Board members completed the required 24 hours of training addressing the stipulated CASA requirements.

The monitoring team appreciates the ongoing work by the CPOA director in consultation with APD to ensure that training requirements better align with the duties and responsibilities of CPOA Board members and to incorporate changes resulting from the new ordinance. The monitoring team expects CPOA staff, in consultation with the Contracts Compliance Officer, to maintain a timeline to fully implement training and update tracking and reporting mechanisms for future Board members.

## Results

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

#### **4.7.260 Assessing Compliance with Paragraph 275: CPOA Annual Training**

Paragraph 275 stipulates:

**“The City shall provide eight hours of training annually to those appointed to serve on the agency on any changes in law, policy, or training in the above areas, as well as developments in the implementation of this Agreement.”**

##### **Methodology:**

For this reporting period, the Council-appointed Contracts Compliance Officer confirmed that all current Board members completed the required 8-hour training, meeting the requirements of this paragraph. In a prior reporting period, the City completed an update of this curriculum for this 8-hour training, including incorporating feedback from the monitoring team. The monitoring team expects this training to be delivered in a timely manner to future Board members. The monitoring team was advised that the training will include quarterly briefings by the APD Academy Commander on any law, policy, and procedure changes. Legal updates will also be provided through the Document Management System (Power DMS).

##### **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

#### **4.7.261 Assessing Compliance with Paragraph 276: CPOA Ride-Alongs**

Paragraph 276 stipulates:

**“The City shall require those appointed to the agency to perform at least two ride-alongs with APD officers every six months.”**

##### **Methodology:**

For this reporting period, The City Council-appointed Contracts Compliance Officer reports that current Board members have met the ride-along requirements for this paragraph. The monitoring team expects the CPOA Director and the Contracts Compliance Officer to ensure adequate tracking and reporting mechanisms to ensure compliance with this paragraph in future reporting periods.



## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.262 Assessing Compliance with Paragraph 277: CPOA Authority and Resources to Make Recommendations**

Paragraph 277 stipulates:

**“The City shall provide the agency sufficient resources and support to assess and make recommendations regarding APD’s civilian complaints, serious uses of force, and officer-involved shootings; and to review and make recommendations about changes to APD policy and long-term trends in APD’s use of force. Nothing in this paragraph prohibits the City from requiring the Board and the Agency to comply with City budgeting, contracting, procurement, and employment regulations, policies, and practices.”**

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.263 Paragraph 278 is self-monitored by the City.**

### **4.7.264 Assessing Compliance with Paragraph 279: Full-Time CPOA Investigative Staff**

Paragraph 279 stipulates:

**“The agency shall retain a full-time, qualified investigative staff to conduct thorough, independent investigations of APD’s civilian complaints and review of serious uses of force and officer-involved shootings. The investigative staff shall be selected by and placed under the supervision of the Executive Director. The Executive Director will be selected by and work under the supervision of the agency. The City shall provide the agency with adequate funding to ensure that the agency’s investigative staff is sufficient to investigate civilian complaints and review serious uses of force and officer-involved shootings in a timely manner.”**

## **Results**

Primary: **In Compliance**



Secondary: **In Compliance**  
Operational: **Not In Compliance**

***Recommendations for Paragraph 279***

***4.7.264a: The City and CPOA should identify and hire qualified investigators to fill all vacant positions to increase the effectiveness of the agency. We understand this process takes time to complete.***

***4.7.264b: If the efficiency of the CPOA agency does not improve with the anticipated added personnel, consideration should be made to either complete the comprehensive staffing study or identify a definitive solution to address the ever increasing number of citizens' complaints.***

**4.7.265 Paragraph 280 is self-monitored by APD.**

**4.7.266 Assessing Compliance with Paragraph 281: Prompt and Expeditious Investigation of Complaints**

Paragraph 281 stipulates:

**"Investigation of all civilian complaints shall begin as soon as possible after assignment to an investigator and shall proceed as expeditiously as possible."**

**Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **Not In Compliance**

***Recommendations for Paragraph 281***

***4.7.266a: Immediate action should be taken to adequately staff the CPOA agency and special attention must be taken to complete all the delinquent investigations currently assigned, along with all the new complaints.***

***4.7.266b: Efforts should be made to eliminate the backlog of cases that have exceeded the 120-day time limit for investigations to be completed as soon as practicable.***

**4.7.267 – 4.7.276 Paragraphs 282 – 291 are self-monitored by the City.**

**4.7.277 Assessing Compliance with Paragraph 292: Semi Annual Reports to Council**

Paragraph 292 stipulates:

“The City shall require the agency to submit semi-annual reports to the City Council on its activities, including:

- a) number and type of complaints received and considered, including any dispositions by the Executive Director, the agency, and the Bureau of Police Reform;
- b) demographic category of complainants;
- c) number and type of serious force incidents received and considered, including any dispositions by the Executive Director, the agency, and the Bureau of Police Reform;
- d) number of officer-involved shootings received and considered, including any dispositions by the Executive Director, the agency, and the Chief Bureau of Police Reform;
- e) policy changes submitted by APD, including any dispositions by the Executive Director, the agency, and the Chief;
- f) policy changes recommended by the agency, including any dispositions by the Chief;
- g) public outreach efforts undertaken by the agency and/or Executive Director; and
- h) trends or issues with APD’s use of force, policies, or training.”

## **Methodology**

The CPOA completed and submitted semi-annual reports during the January-June 2024 reporting period and is preparing a report covering July – December 2024. The monitoring team found these reports complete and thorough, meeting all the reporting requirements.

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

### **4.7.278 Assessing Compliance with Paragraph 320: Notice to Monitor of Officer Involved Shootings**

Paragraph 320 stipulates:

“To facilitate its work, the Monitor may conduct on-site visits and assessments without prior notice to the City. The Monitor shall have access to all necessary individuals, facilities, and documents, which shall include access to Agreement-related trainings, meetings, and reviews such as critical incident review

**and disciplinary hearings. APD shall notify the Monitor as soon as practicable, and in any case within 12 hours, of any critical firearms discharge, in-custody death, or arrest of any officer.”**

## **Results**

Primary: **In Compliance**  
Secondary: **In Compliance**  
Operational: **In Compliance**

## **5.0 Summary**

As noted earlier in the report, compliance levels remain the same as in IMR-20 with Primary Compliance at 100 percent, Secondary Compliance at 100 percent, and Operational Compliance at 99%. There are only four remaining Paragraphs that are out of compliance. These all have to do with the timeliness of CPOA investigations. We note that the City is aware of this issue and is working to staff the CPOA adequately.

## Appendix B1a Table for Paragraphs 63, 69, 71, 73.

| Para. | Paragraph Provision   | IMR-21-1       | IMR-21-2 | IMR-21-3 | IMR-21-4 | IMR-21-5 | IMR-21-6       | IMR-21-7       | IMR-21-8 <sup>1</sup> | IMR-21-9 | IMR-21-10 | IMR-21-11 | IMR-21-12 | IMR-21-13 |
|-------|---|----------------|----------|----------|----------|----------|----------------|----------------|-----------------------|----------|-----------|-----------|-----------|-----------|
| 63    | L2/L3 UoF investigated fully & fairly by appropriate staff                          | Y              | Y        | Y        | Y        | Y        | Y              | Y              | N                     | Y        | Y         | Y         | Y         | Y         |
| 63    | Deficiencies related to the use of force are identified & corrected                 | Y <sup>2</sup> | Y        | Y        | Y        | Y        | Y              | Y <sup>3</sup> | Y                     | Y        | Y         | Y         | Y         | Y         |
| 63    | Quality invests. are conducted so officers can be held accountable                  | Y              | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 63    | Chief's / Bureau of Police Reform discretion on hiring and retaining staff for IAFD | Y              | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69    | All investigators of L2/L3 UoF shall:   |                |          |          |          |          |                |                |                       |          |           |           |           |           |
| 69a   | Respond to scene; consult with on-scene supervisor to ensure:                       | Y              | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69a   | All personnel & subject(s) of UoF have been examined for injuries                   | Y              | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69a   | The UoF has been classified according to APD's procedures                           | Y <sup>4</sup> | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69a   | Subject has opportunity to indicate pain or injury                                  | Y              | Y        | Y        | N/A      | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69a   | Officers/subject(s) have received medical attention, if applicable                  | Y              | Y        | Y        | Y        | Y        | Y              | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |
| 69b   | Review OBRD   | Y              | Y        | Y        | Y        | Y        | Y <sup>5</sup> | Y              | Y                     | Y        | Y         | Y         | Y         | Y         |

<sup>1</sup> This event involved APD officers using physical force while at the MDC against a male subject that assaulted an MDC employee. APD officers, along with MDC employees, fought with the subject to get him under control. During the struggle an MDC employee drive-stun tased the subject three times. This simultaneous use of force with the taser was not addressed in any way in the IAFD investigation, if even to absolve the APD officers from responsibility. The incident was brought to the attention of the IAFD Commander by the monitoring team, and to his credit he acknowledged several shortcomings with the investigative efforts. Several paragraph provisions were impacted by the investigative deficiencies. The monitoring team is confident the IAFD Commander is addressing the case with his team to avoid similar issues in the future.

<sup>2</sup> An internal affairs investigation was properly initiated for a primary officer failing to activate his OBRD during the use of force.

<sup>3</sup> A male suspect was taken into custody for a warrant. Once handcuffed and seated in the rear of the patrol vehicle, the subject turned aggressive and claimed to be armed with a gun and threatened the officers. The subject was able to exit the patrol vehicle and enter the driver's seat of the car he previously occupied. An officer tased the subject while handcuffed. An IA was generated against an officer for improper search of a backpack and tasing a handcuffed person, and a separate IA was generated for a second officer for failing to turn on his OBRD later during the interaction. An officer was disciplined for the improper search and exonerated for tasing a handcuffed person.

<sup>4</sup> Use of force at the scene was properly classified. A use of force at the MDC was misclassified but corrected, and disciplinary action against the supervisor was properly initiated.

<sup>5</sup> The officer was alone during the event, and his OBRD detached from his body during the struggle with the suspect. The OBRD video did not capture the use of force, however, audio of the struggle and verbal interaction could be heard.

| Para. | Paragraph Provision   | IMR-21-1 | IMR-21-2 | IMR-21-3       | IMR-21-4 | IMR-21-5 | IMR-21-6 | IMR-21-7       | IMR-21-8 <sup>1</sup> | IMR-21-9 | IMR-21-10 | IMR-21-11 | IMR-21-12      | IMR-21-13 |
|-------|---|----------|----------|----------------|----------|----------|----------|----------------|-----------------------|----------|-----------|-----------|----------------|-----------|
| 69c   | Collect all evidence to establish material facts related to the UoF           | Y        | Y        | Y <sup>6</sup> | Y        | Y        | Y        | Y              | N                     | Y        | Y         | Y         | Y              | Y         |
| 69d   | A canvass for, and interview of, witnesses is conducted                       | Y        | Y        | Y              | Y        | Y        | Y        | Y              | N                     | Y        | Y         | Y         | N <sup>7</sup> | Y         |
| 69d   | Witnesses should be requested to provide written or video recorded statements | Y        | Y        | Y              | N/A      | Y        | N/A      | Y <sup>8</sup> | N                     | N/A      | Y         | N/A       | N              | N/A       |
| 69e   | Ensure all officers witnessing a L2/L3 UoF provide a UoF narrative            | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69f   | Provide written admonishments to officer(s) not to speak about UoF            | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69g   | Conduct only one-on-one interviews with officers                              | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69h   | Review all UoF reports to ensure statements include required info.            | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69i   | Ensure all UoF reports ID involved, witness, & on-scene officers              | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69j   | Conduct rigorous investigations designed to determine the facts               | Y        | Y        | Y              | Y        | Y        | Y        | Y              | N                     | Y        | Y         | Y         | N              | Y         |
| 69j   | During interviews, avoid asking problematic questions                         | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69k   | Record all interviews consistent with APD policy                              | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69l   | Consider all relevant evidence & make credibility determinations              | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 69m   | Make all reasonable efforts to resolve material inconsistencies               | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |
| 71    | IAFD shall complete L2/L3 UoF investigations within 3 months                  | Y        | Y        | Y              | Y        | Y        | Y        | Y              | Y                     | Y        | Y         | Y         | Y              | Y         |

<sup>6</sup> We note that the IAFD investigator made a timely request for the Digital Image and Video Recovery Team (DIVRT) to respond to the scene of a use of force to collect video from a business establishment. DIVRT acknowledged the request, but seven weeks later notified IAFD that they were experiencing a backlog of requests and by the time they responded to the scene the video had been overridden. The lack of this video, in this particular event, did not impact the investigation or findings. However, this represents a lack of appropriate follow up by IAFD, a failure by DIVRT to provide reasonable updates to IAFD, and potentially a lack of resources allocated to DIVRT to meet investigative needs of the department.

<sup>7</sup> Two male subjects were taken into custody by APD officers. They were accompanied by two females that were present for the use of force, and their personal information was listed in the original officer's report. The names of the females were not included in the IAFD force investigation, and they were not interviewed by the IAFD investigator. There is also no indication that an attempt was made to interview the females post-event.

<sup>8</sup> A witness departed the scene prior to IAFD's arrival, but they provided a verbal statement. Appropriate attempts were made to contact the witness later with negative results.

| Para. | Paragraph Provision  | IMR-21-1 | IMR-21-2 | IMR-21-3 | IMR-21-4 | IMR-21-5 | IMR-21-6       | IMR-21-7 | IMR-21-8 <sup>1</sup> | IMR-21-9 | IMR-21-10       | IMR-21-11 | IMR-21-12 | IMR-21-13 |
|-------|--|----------|----------|----------|----------|----------|----------------|----------|-----------------------|----------|-----------------|-----------|-----------|-----------|
| 71    | Extension requests must be approved by Commander / Bureau of Police Reform | N/A      | N/A      | N/A      | N/A      | N/A      | N/A            | N/A      | N/A                   | N/A      | N/A             | N/A       | N/A       | N/A       |
| 71    | IAFD investigations reports shall include:                                 |          |          |          |          |          |                |          |                       |          |                 |           |           |           |
| 71a   | Narrative description of UoF & independent review of evidence              | Y        | Y        | Y        | Y        | Y        | Y              | Y        | N                     | Y        | Y               | Y         | Y         | Y         |
| 71b   | Documentation of all evidence gathered, including ID of witnesses          | Y        | Y        | Y        | Y        | Y        | Y              | Y        | Y                     | Y        | Y               | Y         | N         | Y         |
| 71b   | Specifically state if there are no known witnesses                         | N/A      | N/A      | N/A      | Y        | N/A      | Y              | N/A      | N/A                   | Y        | N/A             | Y         | Y         | Y         |
| 71b   | State why information from witnesses was not collected                     | Y        | Y        | Y        | Y        | Y        | Y              | Y        | Y                     | Y        | N/A             | Y         | N         | Y         |
| 71b   | All identifying info. for persons refusing to provide a statement          | Y        | Y        | Y        | N/A      | Y        | N/A            | Y        | N/A                   | N/A      | N/A             | N/A       | N/A       | N/A       |
| 71c   | ID all other APD officers or employees witnessing the UoF                  | Y        | Y        | Y        | Y        | Y        | Y              | Y        | Y                     | Y        | Y               | Y         | Y         | Y         |
| 71d   | Narrative evaluating UoF based on evidence gathered                        | Y        | Y        | Y        | Y        | Y        | Y              | Y        | N                     | Y        | Y               | Y         | Y         | Y         |
| 71d   | Tactical/Training assessment & if de-escalation could avoid UoF            | Y        | Y        | Y        | Y        | Y        | Y <sup>9</sup> | Y        | Y                     | Y        | Y <sup>10</sup> | Y         | Y         | Y         |
| 71e   | If officer's cert. & training for a weapon used in UoF was current         | N/A      | Y        | N/A      | Y        | N/A      | N/A            | Y        | N/A                   | N/A      | N/A             | N/A       | N/A       | N/A       |
| 71f   | Complete disciplinary history of target officers involved in the UoF       | Y        | Y        | Y        | Y        | Y        | Y              | Y        | Y                     | Y        | Y               | Y         | Y         | Y         |
| 73    | Commander documentation of determining findings not supported by PoE       | N/A      | N/A      | N/A      | N/A      | N/A      | N/A            | N/A      | N/A                   | N/A      | N/A             | N/A       | N/A       | N/A       |
| 73    | Commander action on deficient invests.                                     | Y        | Y        | Y        | Y        | Y        | Y              | Y        | N                     | Y        | Y               | Y         | N         | Y         |
| 73    | Commander responsible for the accuracy/completeness of invests             | Y        | Y        | Y        | Y        | Y        | Y              | Y        | N                     | Y        | Y               | Y         | N         | Y         |

<sup>9</sup> A training request for a tactical issue was submitted to the academy for the officer applying handcuffs before having control of the suspect. We note that the officer's use of profanity during the event continued even when addressing the subject when handcuffed and seated in the rear of the patrol car. This unprofessionalism was not addressed in any manner.

<sup>10</sup> The monitoring team provided feedback to the IAFD commander regarding the evaluation of de-escalation in this case. The investigator only documented what an officer said regarding de-escalation, but did not provide their independent analysis of de-escalation efforts. We will evaluate the response APD makes to our feedback in the next monitoring report.

## Appendix B1b Table for Paragraphs 63, 69, 71, 73.

| Para. | Paragraph Provision   | IMR-21-14 | IMR-21-15 | IMR-21-16      | IMR-21-17 | IMR-21-18      | IMR-21-19 | IMR-21-20 | IMR-21-21 | IMR-21-22 | IMR-21-23 | IMR-21-24 | IMR-21-25 | IMR-21-26 | IMR-21-27 |
|-------|---|-----------|-----------|----------------|-----------|----------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| 63    | L2/L3 UoF investigated fully & fairly by appropriate staff                          | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 63    | Deficiencies related to the use of force are identified & corrected                 | Y         | Y         | Y <sup>1</sup> | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 63    | Quality invests. are conducted so officers can be held accountable                  | Y         | Y         | Y              | Y         | Y <sup>2</sup> | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 63    | Chief's / Bureau of Police Reform discretion on hiring and retaining staff for IAFD | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69    | All investigators of L2/L3 UoF shall:   |           |           |                |           |                |           |           |           |           |           |           |           |           |           |
| 69a   | Respond to scene; consult with on-scene supervisor to ensure:                       | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69a   | All personnel & subject(s) of UoF have been examined for injuries                   | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69a   | The UoF has been classified according to APD's procedures                           | Y         | Y         | Y              | Y         | Y <sup>3</sup> | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69a   | Subject has opportunity to indicate pain or injury                                  | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69a   | Officers/subject(s) have received medical attention, if applicable                  | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69b   | Review OBRD   | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69c   | Collect all evidence to establish material facts related to the UoF                 | Y         | Y         | Y              | Y         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |

<sup>1</sup> An IAR was initiated for an officer deploying his taser against a person that was running away. The ensuing IA investigation exonerated the officer due to the subject being a wanted felon, and likely armed with a handgun from a shooting incident that occurred the day prior to the use of force. The monitoring team reviewed the incident and accompanying investigation and concurs with the investigative findings.

<sup>2</sup> This UoF occurred on June 3, 2024. A canvass on this date by the IAFD investigator noted a camera on a commercial building in the area of the UoF. The investigator did not follow up on this camera until August 1, a few days after the investigation was initially submitted for supervisory review. The property owner advised the investigator that the video footage from June 3 was not available and that the video server maintains such videos for only 30 days. Since video evidence is highly perishable, IAFD needs to follow up on attempting to retrieve such video evidence much sooner.

<sup>3</sup> This case was originally misclassified as a Level 1 UoF by a supervisor in the field. The Level 1 team investigator correctly determined this to be a Level 2 UoF while at the scene.

| Para. | Paragraph Provision   | IMR-21-14      | IMR-21-15 | IMR-21-16 | IMR-21-17 | IMR-21-18 | IMR-21-19 | IMR-21-20 | IMR-21-21 | IMR-21-22 | IMR-21-23 | IMR-21-24 | IMR-21-25 | IMR-21-26 | IMR-21-27 |
|-------|---|----------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| 69d   | A canvass for, and interview of, witnesses is conducted                       | Y <sup>4</sup> | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69d   | Witnesses should be requested to provide written or video recorded statements | Y <sup>5</sup> | Y         | N/A       | Y         | Y         | Y         | Y         | Y         | Y         | Y         | N/A       | Y         | Y         | Y         |
| 69e   | Ensure all officers witnessing a L2/L3 UoF provide a UoF narrative            | Y              | N/A       | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69f   | Provide written admonishments to officer(s) not to speak about UoF            | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69g   | Conduct only one-on-one interviews with officers                              | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69h   | Review all UoF reports to ensure statements include required info.            | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69i   | Ensure all UoF reports ID involved, witness, & on-scene officers              | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69j   | Conduct rigorous investigations designed to determine the facts               | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69j   | During interviews, avoid asking problematic questions                         | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69k   | Record all interviews consistent with APD policy                              | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69l   | Consider all relevant evidence & make credibility determinations              | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 69m   | Make all reasonable efforts to resolve material inconsistencies               | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71    | IAFD shall complete L2/L3 UoF investigations within 3 months                  | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71    | Extension requests must be approved by Commander / Bureau of Police Reform    | N/A            | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       |

<sup>4</sup> This event included several females that were on scene when the use of force occurred. The monitoring team notes that after arriving on scene and consulting with the on-scene supervisor, the IAFD investigator specifically asked the supervisor about potential witnesses and the supervisor made no mention about these potential witnesses. Later, as the IAFD investigator continued to solicit information from the supervisor, he told the IAFD investigator about the witnesses. Officers on scene did not detain the individuals or collect sufficient information about their identity. Protocol sets IAFD as a secondary responder to uses of force, so APD must emphasize that to fulfill investigative responsibilities, field personnel have to make a better effort to obtain witness information.

<sup>5</sup> Ibid.



| Para. | Paragraph Provision  | IMR-21-14      | IMR-21-15 | IMR-21-16 | IMR-21-17 | IMR-21-18 | IMR-21-19 | IMR-21-20 | IMR-21-21 | IMR-21-22 | IMR-21-23 | IMR-21-24 | IMR-21-25 | IMR-21-26 | IMR-21-27 |
|-------|--|----------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| 71    | IAFD investigations reports shall include:                           |                |           |           |           |           |           |           |           |           |           |           |           |           |           |
| 71a   | Narrative description of UoF & independent review of evidence        | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71b   | Documentation of all evidence gathered, including ID of witnesses    | Y <sup>6</sup> | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71b   | Specifically state if there are no known witnesses                   | Y              | N/A       | Y         | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | Y         | N/A       | N/A       | N/A       |
| 71b   | State why information from witnesses was not collected               | Y              | N/A       | Y         | Y         | Y         | Y         | Y         | Y         | N/A       | Y         | Y         | Y         | N/A       | N/A       |
| 71b   | All identifying info. for persons refusing to provide a statement    | Y              | N/A       | N/A       | N/A       | Y         | Y         | Y         | Y         | N/A       | N/A       | N/A       | Y         | N/A       | N/A       |
| 71c   | ID all other APD officers or employees witnessing the UoF            | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71d   | Narrative evaluating UoF based on evidence gathered                  | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71d   | Tactical/Training assessment & if de-escalation could avoid UoF      | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 71e   | If officer's cert. & training for a weapon used in UoF was current   | N/A            | N/A       | Y         | N/A       | N/A       | N/A       | N/A       | Y         | N/A       | N/A       | Y         | N/A       | N/A       | N/A       |
| 71f   | Complete disciplinary history of target officers involved in the UoF | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 73    | Commander documentation of determining findings not supported by PoE | N/A            | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       | N/A       |
| 73    | Commander action on deficient invests.                               | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |
| 73    | Commander responsible for the accuracy/completeness of invests       | Y              | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         | Y         |

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<sup>6</sup> Ibid.

## Appendix B1c Table for Paragraphs 63, 69, 71, 73.

| Para. | Paragraph Provision   | IMR-21-28 | IMR-21-29      | IMR-21-30 | IMR-21-31 |
|-------|---|-----------|----------------|-----------|-----------|
| 63    | L2/L3 UoF investigated fully & fairly by appropriate staff                          | Y         | Y              | Y         | Y         |
| 63    | Deficiencies related to the use of force are identified & corrected                 | Y         | Y              | Y         | Y         |
| 63    | Quality invests. are conducted so officers can be held accountable                  | Y         | Y              | Y         | Y         |
| 63    | Chief's / Bureau of Police Reform discretion on hiring and retaining staff for IAFD | Y         | Y              | Y         | Y         |
| 69    | All investigators of L2/L3 UoF shall:   |           |                |           |           |
| 69a   | Respond to scene; consult with on-scene supervisor to ensure:                       | Y         | Y              | Y         | Y         |
| 69a   | All personnel & subject(s) of UoF have been examined for injuries                   | Y         | Y              | Y         | Y         |
| 69a   | The UoF has been classified according to APD's procedures                           | Y         | Y <sup>1</sup> | Y         | Y         |
| 69a   | Subject has opportunity to indicate pain or injury                                  | Y         | Y              | Y         | Y         |
| 69a   | Officers/subject(s) have received medical attention, if applicable                  | Y         | Y              | Y         | Y         |
| 69b   | Review OBRD   | Y         | Y              | Y         | Y         |
| 69c   | Collect all evidence to establish material facts related to the UoF                 | Y         | Y              | Y         | Y         |
| 69d   | A canvass for, and interview of, witnesses is conducted                             | Y         | Y              | Y         | Y         |
| 69d   | Witnesses should be requested to provide written or video recorded statements       | N/A       | Y              | Y         | Y         |
| 69e   | Ensure all officers witnessing a L2/L3 UoF provide a UoF narrative                  | Y         | Y              | Y         | Y         |

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<sup>1</sup> This case was originally misclassified as a Level 1 UoF by a supervisor in the field. The Level 1 team investigator correctly determined this to be a Level 2 UoF while at the scene.

| Para. | Paragraph Provision  | IMR-<br>21-28 | IMR-<br>21-29 | IMR-<br>21-30 | IMR-<br>21-31 |
|-------|--|---------------|---------------|---------------|---------------|
| 69f   | Provide written admonishments to officer(s) not to speak about UoF         | Y             | Y             | Y             | Y             |
| 69g   | Conduct only one-on-one interviews with officers                           | Y             | Y             | Y             | Y             |
| 69h   | Review all UoF reports to ensure statements include required info.         | Y             | Y             | Y             | Y             |
| 69i   | Ensure all UoF reports ID involved, witness, & on-scene officers           | Y             | Y             | Y             | Y             |
| 69j   | Conduct rigorous investigations designed to determine the facts            | Y             | Y             | Y             | Y             |
| 69j   | During interviews, avoid asking problematic questions                      | Y             | Y             | Y             | Y             |
| 69k   | Record all interviews consistent with APD policy                           | Y             | Y             | Y             | Y             |
| 69l   | Consider all relevant evidence & make credibility determinations           | Y             | Y             | Y             | Y             |
| 69m   | Make all reasonable efforts to resolve material inconsistencies            | Y             | Y             | Y             | Y             |
| 71    | IAFD shall complete L2/L3 UoF investigations within 3 months               | Y             | Y             | Y             | Y             |
| 71    | Extension requests must be approved by Commander / Bureau of Police Reform | N/A           | N/A           | N/A           | N/A           |
| 71    | IAFD investigations reports shall include:                                 |               |               |               |               |
| 71a   | Narrative description of UoF & independent review of evidence              | Y             | Y             | Y             | Y             |
| 71b   | Documentation of all evidence gathered, including ID of witnesses          | Y             | Y             | Y             | Y             |
| 71b   | Specifically state if there are no known witnesses                         | Y             | N/A           | N/A           | N/A           |
| 71b   | State why information from witnesses was not collected                     | Y             | N/A           | N/A           | N/A           |
| 71b   | All identifying info. for persons refusing to provide a statement          | Y             | N/A           | N/A           | N/A           |
| 71c   | ID all other APD officers or employees witnessing the UoF                  | Y             | Y             | Y             | Y             |

| Para. | Paragraph Provision  | IMR-<br>21-28 | IMR-<br>21-29  | IMR-<br>21-30 | IMR-<br>21-31 |
|-------|--|---------------|----------------|---------------|---------------|
| 71d   | Narrative evaluating UoF based on evidence gathered                  | Y             | Y              | Y             | Y             |
| 71d   | Tactical/Training assessment & if de-escalation could avoid UoF      | Y             | Y              | Y             | Y             |
| 71e   | If officer's cert. & training for a weapon used in UoF was current   | Y             | Y              | Y             | Y             |
| 71f   | Complete disciplinary history of target officers involved in the UoF | Y             | Y              | Y             | Y             |
| 73    | Commander documentation of determining findings not supported by PoE | N/A           | N/A            | N/A           | N/A           |
| 73    | Commander action on deficient invests.                               | Y             | Y              | Y             | Y             |
| 73    | Commander responsible for the accuracy/completeness of invests       | Y             | Y <sup>2</sup> | Y             | Y             |

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<sup>2</sup> The ECW deployment in this case was appropriately determined to not be reasonable, minimal, or necessary, and the deploying officer received a written reprimand. The ECW SoF used was appropriately determined to be reasonable, minimal, and necessary. The "IAFD First Line Supervisor Force Review" completed by an IAFD sergeant appropriately noted the ECW deployment was out of policy. However, page 3 of the "IAFD Commanding Officer Force Review" notes that the Acting Deputy Commander concurred with the finding of the investigator and sergeant "that all uses of force were in compliance with APD policies." The "IAFD Force Closeout Review Form" accurately noted the ECW deployment was out of policy, but did not address the aforementioned error found on the "IAFD Commanding Officer Force Review" form.