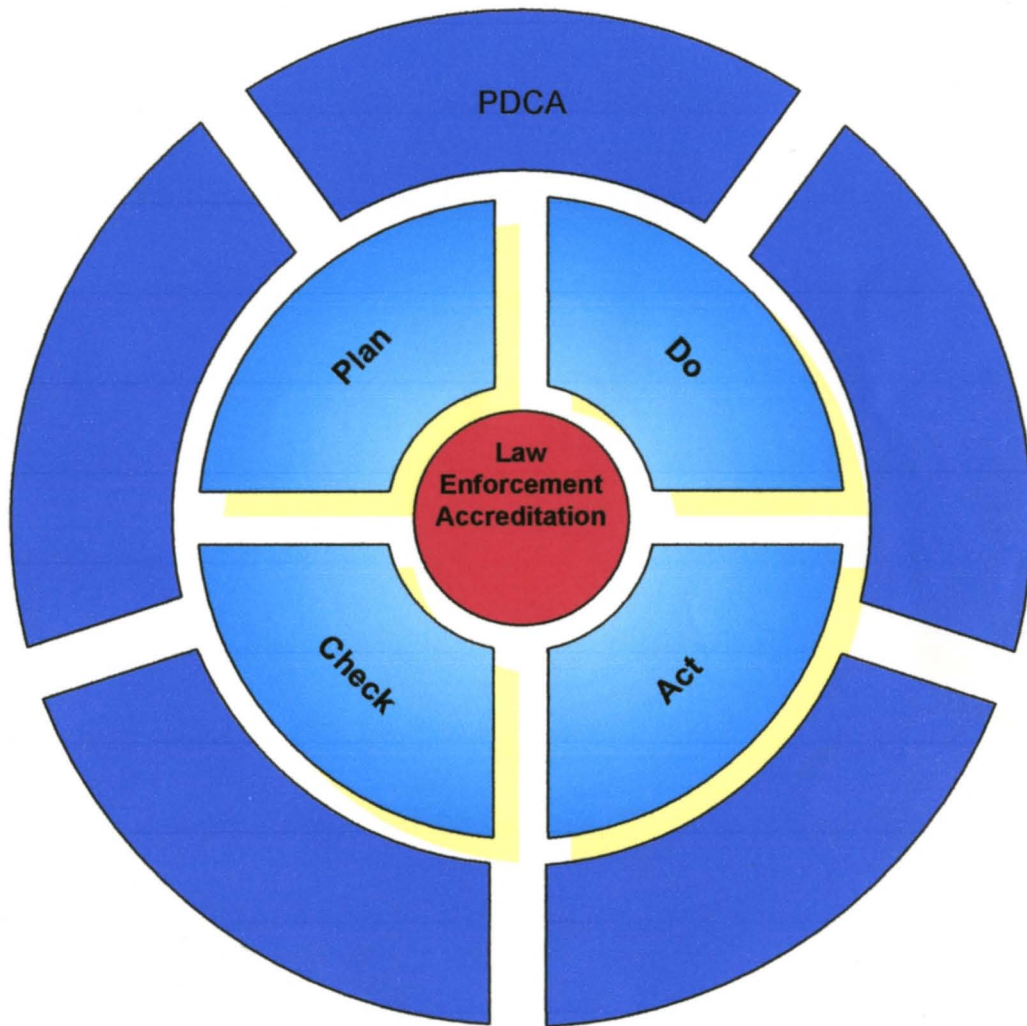


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Strategy for Law Enforcement Accreditation
By: Elizabeth T. Hall
South Carolina Department of Mental Health
Division of Public Safety

Tuesday, January 25, 2005



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Goal: Strategy for Law Enforcement Accreditation

The benefits of the Commission on Accreditation for Law Enforcement Agencies (CALEA) are that it “promotes a high standard of professional practices”. The standards prescribe “what agencies should be doing” not “how they should be doing it”

<p>Plan:</p> <p>The Director will establish strategy to become accredited. June 2004 Apply for CALEA guidelines. Strategy will be presented to State Director for review and approval.</p> <p>The Director and Major will review the Accreditation standards as well as the division and agency standards (policies/procedures) The Director will select key measures for the plan to move forward. Accreditation Process Map will be developed. (See Maps 1,2 and 3) (June-August 2004) Plans will be presented to State Director for review.</p> <p>A core committee will be established by the Director/Maj to assist in reviewing and comparing CALEA and division standards. The committee will be made up of key stakeholders throughout the division (section leaders) brainstorming and sharing of ideas will be a must The committee</p>	<p>Do:</p> <p>Strategy to become accredited has been identified and approved by State Director.</p> <p>The CALEA application has been applied for to assist in comparing standards with existing policies and procedures. There are 439 standards within 38 chapters. There are also levels of compliance which help identify the importance of each standard.</p> <p>Key measures were selected to move forward with the plan. An accreditation committee was established that consisted of mid-level managers and above. Measures were shared with committee members. An in-depth division audit of operations, structure, management personnel, policy and procedures were performed. Section reviews and evaluation of staffing education and training were also performed. This process was already underway due to division decentralization. The timeframe was about 6 months to complete this audit. All members were issued</p>
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members will receive workgroup instruction as to what the focus of the meetings. (See workgroup Inst.) Meetings will be held once a week on Thursday initially. (July 2004). The progress of these meetings will be measured by weekly reporting to the Dir/Maj. Feedback will be provided as that time concerning any issues, questions or concerns. The committee will meet with other accredited law enforcement agencies for review of the division proposed strategy and to solicit any recommendations. (July-August 2004)

Make appointment with accredited LE agency.

Section leaders will review their section procedures/policies and report to committee any recommendations regarding changes as to comply with CALEA standards. All stakeholders will be issued CALEA standards as it pertains to their section for review. (September 2004)

The Major will review all HRS regulations and procedures and report to the committee any recommendations. All personnel folders will be reviewed and maintained in a uniform manner throughout the division. Sept 2004. To measure

necessary CALEA standards for section policy review and comparison, as well as workgroup instructions. A schedule was made out in advance as to when meetings would be held to discuss policy reviews and possible recommendations and or problems.

HRS regulations were reviewed. Personnel files were audited as to model the new established format throughout the division. A meeting was held with section leaders to share the format as ensure that all were uniform and consistent.

A review of officer education and training was performed. The training lieutenant was assigned additional duties. New officer training was modified and extended by two days, allowing for a full week training to include agency mandatory training and orientation. The training lieutenant is now responsible for all initial orientation for new hires. Remedial training for existing personnel will be provided as needed. This training is in practice and will be standardized.

The division organizational chart was revised and necessary changes were made that reflect both the needs of the agency and the division. The charts were

<p><i>progress a field audit of section file folders will be performed as to comply with division HRS file folder uniformity after conferring w/ agency HRS. A review of officer education and training will be completed by the director and major with input from the lieutenant of training that compliment mandatory academy and agency requirements. Changes will be made accordingly. (July-August). The Major will review division structure and personnel assignments and discuss with the Director. Revisions will be made at that time if necessary.(January 2005)</i></p> <p><i>The Director will initiate an employee survey. Solicit supervisor and officer comments regarding survey and share outcomes. Evaluate staff knowledge of job through on-site testing and through the review of individual officer development plans. The section supervisors will orientate their subordinates to their development plan. Officers will be evaluated on knowledge of their plan during scheduled quarterly meetings. There are four mandatory quarterly meetings per year. All plans will be reviewed by section mid-</i></p>	<p><i>posted in all section areas as to comply with CALEA standards. All Division personnel were surveyed regarding employee satisfaction, job knowledge and training. Data was gathered. (See examples 1,2,) Personnel were allowed the opportunity to provide feedback via e-mail directly to the Director of Public Safety or through meetings or written correspondence. (See e-mail comments 1&2) All supervisors responded positively in their comments via e-mail. Officers responded during meetings or during their development plan. A past employee survey was reviewed as to compare data. Development Plans were reviewed by section managers as to ensure compliance. All staff was orientated to the development plan process during regularly scheduled division meetings .Development plan requirements were added to the EPMS of all supervisors. The requirement for development plans occurs every quarter for PSO's- SGTS and twice a year for Lieutenants and above. A list of development requirements were provided for all levels of personnel. Theses requirements compliment division and agency training and education needs. This</i></p>
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<p><i>level management (Lt's) as to accuracy, timeliness, objectives set and officer feedback regarding their plan. Progress will be measured by random division testing and evaluation as well as a thorough review of the agency on-line pathlore testing results to assist in measuring agency required knowledge. (Dec 04-)</i></p> <p><i>Provide personnel support for maintaining compliance and reaccreditation utilizing existing staff.</i></p> <p><i>Perform self-assessment (February 2005)</i></p> <p><i>Perform mock assessment (February 2007)</i></p> <p><i>Perform on-site assessment/Request Commission Review (February 2007). Achieve CALEA Accreditation (January 2008)</i></p>	<p><i>process is already in practice and will be standardized</i></p> <p><i>Existing section manager has been assigned the extra duties and responsibilities of maintaining accreditation compliance and reaccreditation. The accreditation manager is a member of the committee as well. Request was presented to HRS for review and approval. The request was approved. The Divisions accreditation manager has already made contact with the CALEA assigned support staff.</i></p>
<p><i>Check:</i></p> <p><i>The strategy laid out to become accredited went well. Detailed information was provided as to who would be assigned what with specific timelines. Information was shared and reviewed during weekly scheduled meetings. Members were encouraged to provide feedback as to what they thought would work and what would not.</i></p>	<p><i>Act:</i></p> <p><i>This improvement strategy assisted the division in recognizing and prioritizing various day to day operational procedures where staff had become complacent in practice and knowledge.</i></p> <p><i>On-site testing and the introduction of officer development plan assisted in evaluating where officers were in their knowledge of the job.</i></p>

The core committee which was initially made up of midlevel managers and above with some administrative support staff (19) as well, this was found to be too large. Some members did not possess the knowledge or interest to participate actively within the group. The committee was reorganized and downsized (7) with stakeholders who could represent their sections mainly do to knowledge, skills and a special interest in being apart of the committee. The Division met with a local accredited law enforcement agency to confer and collaborate regarding strategy for accreditation. It was advised that the committee be as small as possible.

We found that to be very much the truth in that all members were not actively participating and lacked the skills to work independently on their assignments given by the team leaders.

The organizational structure was revised out of necessity as to conform to the agency direction. There was a shortage of supervisors under the new structure, which compromised the chain of command, this prompted additional changes in

HRS file folders were not in a uniform order throughout the division. Pertinent information was missing as well as information that did not necessitate filing.

The division can now measure progress through section monthly reports, year-end reports, officer development plans that are performed quarterly and bi-annually, as well maintain accountability. Quarterly testing is administered during division quarterly meetings. Section and shift meetings are mandatory and are captured in the section monthly reports. Staff has provided positive feedback that they feel they are being developed. Field audits will be performed by the Director and Major of PS unannounced as to solicit staff comments, both facility and PS.

The division continues to struggle with the new organizational chart as the staff shortages particularly supervisory demand that boundaries be withdrawn in a system that has always demonstrated specific lines of authority.

Utilizing existing staff to provide support for the accreditations officer is off to a great start. Utilizing

personnel assignments, primarily supervisors.

The review of officer training and education revealed that training methods were redundant and did not address pertinent information for officer success, such as key facility information, scheduling, and some standard operating procedures. Training was said to be “too quick and dirty” and there was not enough time spent on the job duties and division information that assisted the officer in being successful on a day to day bases. Training personnel changed. The training curriculum was revised based in part on survey results.

Surveys revealed that personnel were delighted that there were now individual development plans that focused on where the officer was in his/her stage of development. Survey also revealed that newly hired personnel had not been provided consistent and uniform training in the areas of the chain of command, division law enforcement authority, development plan scope and criteria, timekeeping procedures, and administrative processes.

the knowledge and skills of this staff has proven successful.

New officer training was extended from 3 days to 5 days, remedial training is now provided as needed and on a regular basis, policies/procedures are introduced during this week, facility orientation is also provided during this time as well as the introduction of their development plan. Officers are mentored by the lieutenant one on one for this week as well. The training curriculum as been rewritten.

Policy review revealed that some policies were outdated and were no longer in practice. And as the agency direction changes the need for certain facility practices as well. Some Division driven procedures were revised as well has policies that were no longer necessary practice. Other changes in policy will require agency approval.

Testing and evaluation continues. There will be a testing administered at the January 2005 quarterly meeting. These meetings are mandatory.

Develop plans are being performed on all personnel every quarter and bi-annually as required. All field folders are required to be uniform and consistent

<p><i>File folder audits revealed that not all section leaders were clear on format and content. Examples were provided for all sections and an audit was scheduled for the following month. Self- assessment has been planned and is a tedious and slow process as you proceed to look at what you are doing as oppose to what you should be doing. Complacency and the drive to look for shortcuts were revealed in some practices.</i></p>	<p><i>throughout and containing all pertinent information. All sections have been issued examples of how the field folders are to be formatted. Deficiencies are being noted and corrected on a daily basis.</i></p> <p><i>Owner: Director of Public Safety, Elizabeth Hall</i></p> <p><i>Key Stakeholders: Major Wayne Prohett, Captain Freddy Deinzer, Captain Jerry Martain, Investigator Rayford Miller, Lieutenant Sharon Martain, Fire Inspector, Robert Steinmeyer</i></p>
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Once committee members were selected they were orientated to the CALEA standards, process goals and compliance requirements. All members received copies of the standards as they pertained to their sections. The PDCA cycle was also discussed. There was a discussion as to their understanding of the current status of operations, their confidence in the proposed changes, the negative impact of any proposed changes and the amount of effort and resources necessary to make changes prior to member assignments on who's going to do what and by when.

In Do the necessary changes were made to implement the plan based on the objectives of the accreditation standards and the agency's goals, legislative mandates, labor agreements, court orders, or case law, if they exist. Here we were able to implement the plan. Some existing legislation may guide policy revision as to

adaptation to CALEA. Other policies and procedures will be added, revised or deleted as to conform with practices and CALEA wherever possible.

There will be more emphasizes placed on the Check portion of the PDCA cycle as we could look at possible results, what went well, what didn't, it will question whether we met our objectives and question what we've learned from the entire process. The check revealed that some policies and procedures were out dated and no longer being practiced. Due to some decentralization some practices were no longer necessary. Facility closures and relocation prompted changes in organizational structure and manpower. Survey revealed where staff were in the areas of communications, job knowledge, skills and training. Supervisor and officer comments helped steer future evaluations and testing. As we continue to move forward towards accreditation recognizing these necessary changes will guide and assist in future decision making.

In Act we looked at the improvements that resulted due to some changes that have been made. The changes will then become standardized procedures. The officer development plan will be standardized as well as the new employee training and orientation.

Data Collection: The data to be used in this process improvement strategy is that of past personnel satisfaction surveys, facility surveys, year-end reports, historical methods of operations (trends), current methods of operations and recent employee surveys and testing. Review all sections shift and monthly reporting and (officer comments and concerns). Communicate with agency HRS director as to review turnover rate, EEOC and recruitment. This data will provide vital information as to where we were, where we are and where we're going.

Data Analysis: Process revealed that the division had not collected much data in the area of employee satisfaction in 10 or more years. There was no historical data available on facility/community satisfaction only recent data surveyed by present administration. There was division data in the form of monthly reporting which made up the year-end reporting. Sections were operating differently in areas that required consistency in reporting and documentation.

The division year-end report will capture all section data. Year-end reports are provided to the appropriate facility director/administrator. This sharing of information allows for a collaborative relationship between managers. It also provides the facility administrator with all information and activities that have occurred at their facility for the entire year and can be utilized for the various JACHO, CARF and DHEC accreditations. These measures compliment the division, the facilities, and the agency and CALEA standards.

To successfully maintain CALEA the division will have to continue to collect data in an effort to check and measure p rogress, make improvements/changes and standardize changes through policy revisions. An accreditations officer has been established as to maintain and monitor compliance and reaccreditation. Every effort will have to be made to attend CALEA conferences as to gain new ideas and methods of operations

Workgroup Instructions

- ***Read and discuss Accreditation Standards***
- ***Cross reference the standard with division existing policy***
- ***Compare the two and make recommendations in writing***
- ***Ask yourself; does the policy already exist? Does the policy just need modification? Does a paragraph need to be added to make it comply with the standard?***
- ***Review carefully the standards and the commentary which basically defines what the standard should address. Some of the standards don't require a directive***
- ***If the standard does not require a directive then the agency should be able to demonstrate or support the fact that the standard is not applicable.***
- ***You do not have to create a format for those standards that have to be created.***
- ***Utilize your manila folder to review which standards that have to be created, modified, demonstrated or simply not applicable.***
- ***Each workgroup team leader will be held accountable for ensuring that the team meets at least once or twice in an effort to accomplish the group's objective.***
- ***Each group member is expected to participate and be a vital member of their workgroup.***
- ***The team leader will report any snags that their workgroup encounters as soon as possible in an effort that all questions are addressed early into the process as oppose to the end or completion of the assignment.***
- ***Maintain detailed workgroup notes***
- ***We encourage each group to ask questions***

Level I

DMH PUBLIC SAFETY

Accreditation Map

Friday, January 28, 2005

⊕ Agency Head

PSS Director/Deputy

PSS:Dir.,Deputy,Capts.,Inv.
(Core Committee Members)

PSS Dir/Financial Officer

08/31/04

12/04

Core Committee Established

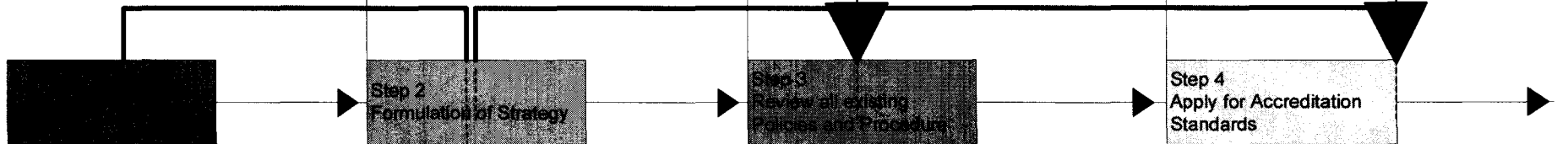
Accreditation Manager Selected

06/01/03- 06/31/04

07/01/04 - 08/31/04

09/01/04 - 12/31/04

CALEA initiative explored by Agency Compile CALEA information Pros & Con Implementation of initial strategies



- 1.1 A CALEA accredited LE agency becomes a goal of S, C, Dept. of Mental Health Division Public Safety
- 1.2 Division Seek State Director's approval
- 1.3 Management Team formulates strategy to become accredited
- 1.4 Evaluate Progress

Step 2
Formulation of Strategy

- 2.1 DMH PSS collaborates w/ other LE agencies accredited
- 2.2 Key measures selected to move forward
- 2.3 Conferred w/agency and other LE entities regarding recommended changes as appropriate (Dept. HRS, General Council, ETR, SLED and SCCJA)
- 2.4 Plan and provide accreditation officer utilizing existing staff
- 2.5 Review all existing policies and procedures
- 2.6 Evaluate Progress




Step 3
Review existing policies and procedures

- 3.1 Establish Core Committee of (key stakeholders) section leaders
- 3.2 Policies were divided into subsections and teams will be assigned team names that represent the various CALEA policy index.
- 3.3 Outline work group assignments and members for audit review (administration, investigations, basic law enforcement, CIJIS/ Communications/ records and judicial)
- 3.4 Establish mandatory weekly committee meeting schedules
- 3.5 Provide policy format to committee for uniformity in presentation
- 3.6 Standardize format for future use throughout the division
- 3.7 All revisions must be scanned into CALEA format for laptop review
- 3.8 Review of policy revisions will be performed by laptop to ensure group participation and feedback
- 3.9 Recommended policy revisions and additions will be based on the levels of compliance relative to the importance assigned to each standard, its applicability and agency size.
- 3.10 Team leaders will report any recommendations, revisions and possible deletions necessary as to conform to CALEA where possible to the committee
- 3.11 Evaluate Progress

Step 4
Apply for Accreditation Standards

- 4.1 Purchase CALEA Standard Packet (CALEA Standards, Process Manual, Self-Assessment Manual)
- 4.2 Department Accreditation Manager selected
- 4.3 Review of all applicable standards to assess/ determine the department's level of compliance with each standards
- 4.4 Identify deficiencies or areas of noncompliance and develop and formulate strategies to raise area to CALEA Standards
- 4.5 Project and create CALEA budget to meet and identify the cost for acquiring new equipment, forms, and capital improvements to meet CALEA
- 4.6 Agency is assigned a CALEA Program Manager to facilitate accreditation process.
- 4.7 Accreditation Manager confers with CALEA regarding agency policies and procedures as they relate to CALEA standards
- 4.8 Contract submission including documentation substantiating agency Legal Basis and Eligibility.
- 4.9 Evaluate Progress

Chart Legends:

-  Process
-  Milestone
-  Workflow

Level II

DMH PUBLIC SAFETY

Accreditation Map

Friday, January 28, 2005

⊕ PSS Director/Deputy

PSS:Dir., Deputy, Capts., Inv.
(Core Committee Members)

PSS:Dir., Deputy, Lts; Supervisors

PSS Dir./Deputy; TrnLt.

01/05
New org structure
established

01/01/05 - 01/31/05
Division transitions to Org

01/21/05 - ongoing
Readiness testing deployed

01/25/2005 -
Critical analysis of data

02/25/05
Officer Development Plan Reviewed

Step 5 Prepare for CALEA Standards Implementation

- 5.1 Make changes in organizational structure as to meet agency demands
- 5.2 Decentralize organization
- 5.3 Changes must reflect appropriate chain of command
- 5.4 Create cross-walks that support shortages
- 5.5 Establish facility assignments
- 5.6 Meet with facility directors and administrators to discuss changes
- 5.7 Establish cost centers to reflect changes
- 5.8 Enforce mandatory section and shift meetings to improve communications and flow of information
- 5.9 Measure compliance through monthly report reviews
- 5.10 Evaluate Progress

Step 6 Measure Department's Readiness

- 6.1 Develop readiness testing of personnel
- 6.2 Perform random personnel readiness testing
- 6.3 Provide feedback based on test results via e-mail to supervisors
- 6.4 Perform personnel field audits to measure knowledge and skills
- 6.5 Solicit supervisor comments via e-mail the Director only.
- 6.6 Make necessary changes based on results
- 6.7 Evaluate Progress

Step 7 Compile and Analyze Data

- 7.1 Compile data utilizing charts and or graphs. Compare w/existing data
- 7.2 Dir/Major will audit division education and training curriculum
- 7.3 Evaluate Progress

Step 8 Training /Education of CALEA Standards

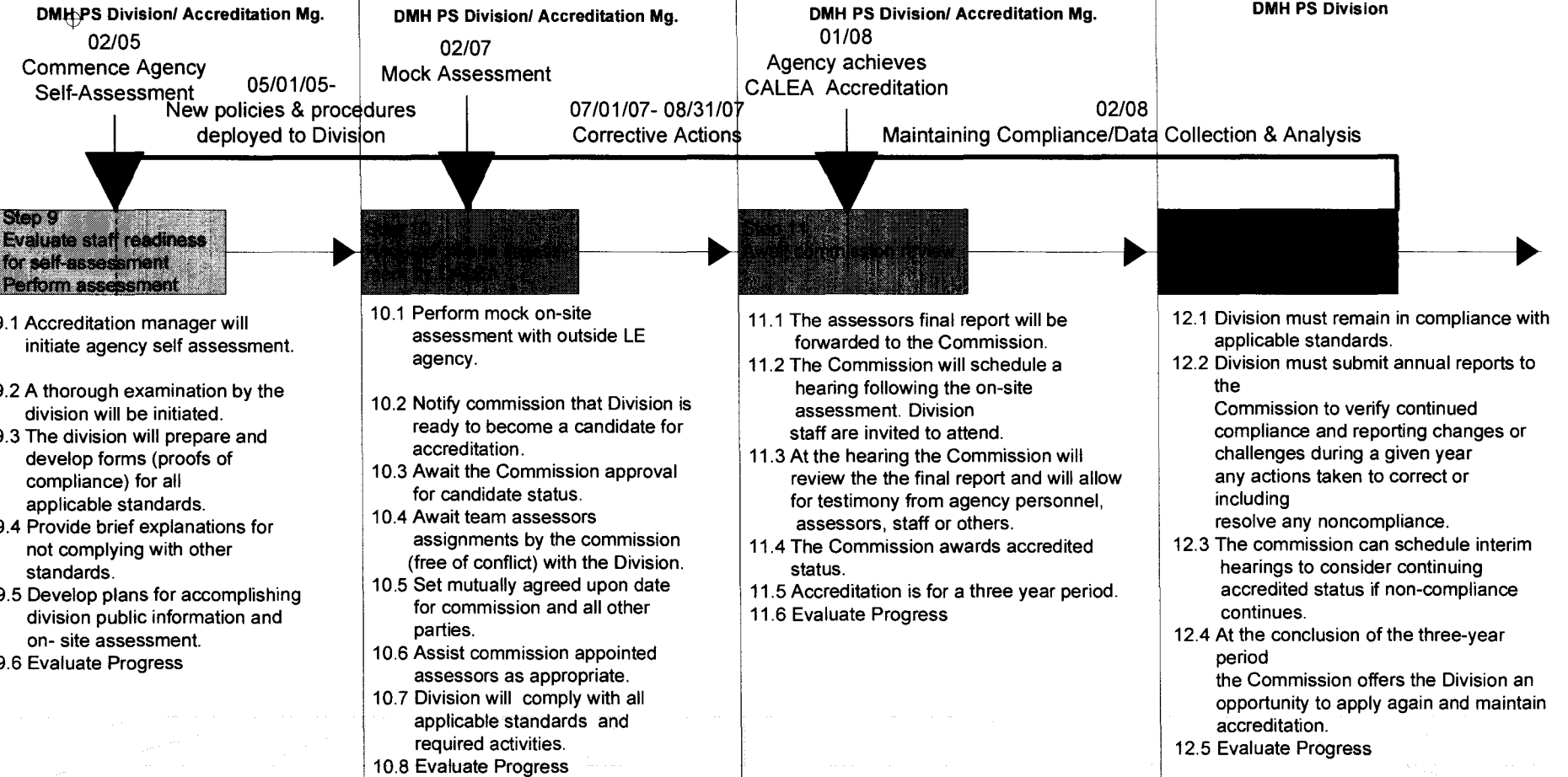
- 8.1 Review/revise officer development plans
- 8.2 Standardize development plans through additional EPMS requirements/objectives for all supervisors and subordinates.
- 8.3 Introduce development plans to subordinates and supervisors.
- 8.4 Evaluate officer knowledge of development plans and training through random testing to
- 8.5 Training Lieutenant will implement changes in new hire orientation, curriculum, mandatory monthly and quarterly training and remedial training
- 8.6 Evaluate Progress

Level III

DMH PUBLIC SAFETY

Accreditation Map

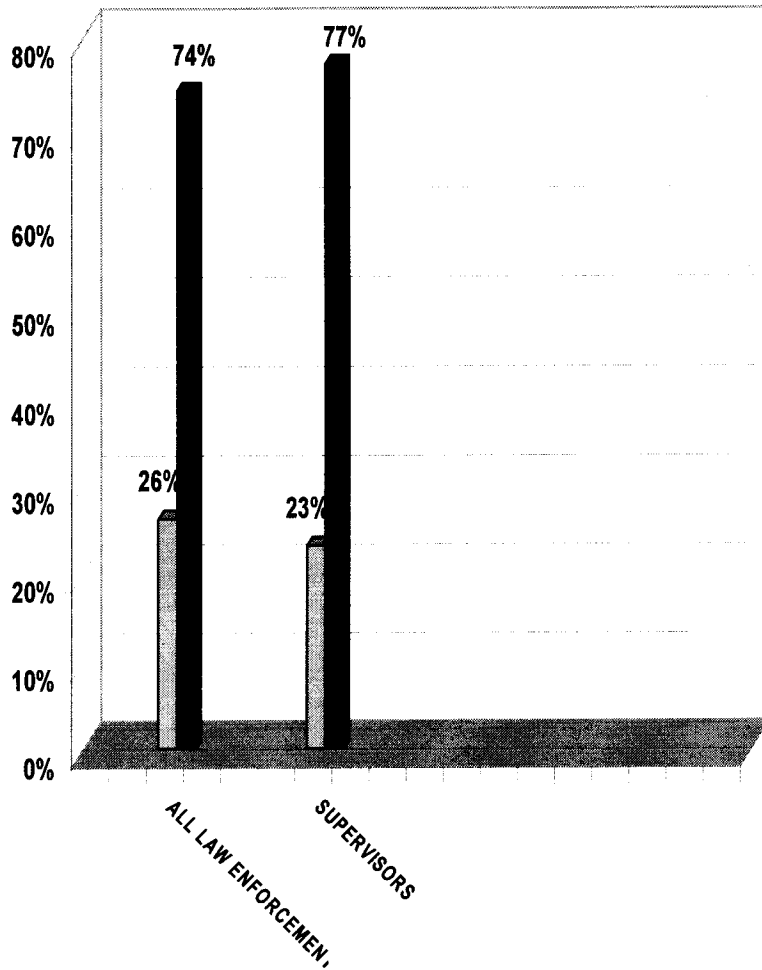
Friday, January 28, 2005



Law Enforcement Accreditation Prep Questionnaire Evaluation 73 FTE	Below Expectations	Meets Expectations
1. Have you heard about your development plan?	20	53
2. What is the purpose of a development?	22	51
3. What is an SOP within PS? What is its purpose?	20	53
4. What is the purpose of your EPMS?	27	46
5. List the Division of PS Chain of command? (Top down)	18	55
6. What is the jurisdiction of DMH Public Safety?	12	61
7. What is the purpose of your job description? Do you have access to a copy of your job description?	29	44
8. Who is the law enforcement authority that DMH PS is Accountable to?	23	50
9. What facts should be detailed in an SD-22?	16	57
10. What are some things to be checked prior to entering your patrol unit?	10	63
11. Should you inform your supervisor of secondary/off-duty employment?	6	67
12. Where would you look for availability/postings?	9	64
13. Is there an EEOC posting in your reporting area?	31	42
14. What should you do if you become injured on the job?	4	69
15. Is there a copy of the division's organizational chart in your report area?	27	46
16. List as many administrative reports that you are aware of that are utilized by PS?	27	46
All Rank Rating:	26%	74%

Law Enforcement Supervisor Accreditation Prep Questionnaire Evaluation 21 FTE	Below Expectations	Meets Expectations
1. How often should you get with officers regarding their Development Plant?	9	12
2. Supervisory personnel are accountable for the performance of what employees?	4	17
3. Who has the authority to execute disciplinary actions? CPL, SGT, LT, CPT OR ALL	0	21
4. When executing an evaluation (EPMS) what are the 3 required Signatures by rank for each of the following? PSO/SO, CPL and SGT	12	9
5. When executing a disciplinary action list 3 or more facts that should be present?	9	12
6. What is the timeframe for executing a disciplinary action? (Circle your answer please) a. As promptly as possible after gathering all pertinent information b. Whenever you get some free time.	1	20
7. Have all your officers read and understand review of policies, procedures, rules, regulations and SOP? Do you have a receipt that acknowledges this review of disseminated directives?	6	15
8. Where should a copy of this receipt be placed?	7	14
9. When reviewing incident reports what should you be looking for?	1	20
10. Who is responsible for initial review and corrections of incident reports?	0	21
11. When should a supervisory report through their chain of command serious incidents or allegations of any type?	4	17
Supervisor Ratings:	23%	77%

73 VARIOUS RANK PARTICIPATED
52 Officers
21 Supervisors



ALL LAW ENFORCEMENT EVALUATION
26% BELOW EXPECTATIONS
74% MEETS EXPECTATIONS

SUPERVISOR EVALUATION
23% BELOW EXPECTATIONS
77% MEETS EXPECTATIONS

■ Below Expectations

■ Meets Expectation

E-Mail Comments Regarding The Accreditation Prep Questionnaire

"Thanks for your concerns about our opinions on the questionnaire. I feel that it was a good idea to administer the questions, at least that way all officers would be on one accord. I was just wondering, would the accreditation committee be concerned with the officers knowledge of the department's mission statement?"

"Apologize for not responding to your e-mail any sooner, I was on a Z-day. The accreditation prep questions didn't catch me by surprise because these are situations that I deal with on a daily basis. If in the future, I would like to take classes to enhance myself on being an effective supervisor. I was given a booklet on EPMS and Supervisory Skills that was very helpful."

"I think that the accreditation is going to be a great thing for Public Safety as well as the publicity and the financial benefits. And, I think that we, as PS Officers have and do work hard. The test/prep questions were themselves informative. A lot of things I knew, some I had a grasp of. All in all, I think you are doing a great job of finding our weaknesses and utilizing our strengths. Thank you for all you do behind the scenes for us. Some can't see what you do. Others refuse to look. Oh, this is my first e-mail."

"I would like to know the correct answers. Also, I was not clear what some of the questions wanted"

"Some of the questions I did not have a clue to the answers but it seem to be very thorough. Hope to see the answer to the questions soon."

"Most of the questions were in line. Some of the questions were confusing to answer. If officers could get a printed copy of the information, it would be helpful."

"I think that the questions were good. I don't think that the circumstance for a pop quiz was right. Everyone was focus on what was going to be said in the meeting. I think for us to fare better for the accreditation, those questions should be implemented into a training course such as the one we did for HIPAA, Fire and Safety, Patients Rights and asbestos. I am totally embarrassed that I didn't get all those answer right, because I knew them."

E-Mail Comments Regarding The Accreditation Prep Questionnaire

"I always believed in training. The test was fine but some of the questions need to be more clear, so the officers do not have to wonder what are we asking for. Thanks for asking us to comment about the test."

"I think that accreditation is important to this department, because it will bring us to a higher level of advancement and development for the dept and its employee."

"Regarding the Accreditation preparation questions, I felt they were fair. My recommendation at this time, is for you to continue to test as often as possible."

"I feel that the accreditation is important to this dept and its employees because we will advance to national standards."

"I thought that the way some of the questions were written was confusing; but overall I think that is was a good idea to get a gauge as to the officers' basic knowledge."

"Thank you for asking for my comments. I feel that some of the questions were not clear in what you were wanting to know. Sometimes I feel that there is a slight communication gap between HPH-Public Safety and Columbia-Public Safety, because we do not interact on a regular basis."

"I received your E mail today regarding the accreditation prep questions. I thought the questions were very basic. The resin I think we all had a little trouble with some of the question is that we probably get complacent and get away from the simple, basic things that we should know as officers. The questioner gives me as a supervisor ideas and a tool for me to use to train myself and the officer on my shift."

"I feel that your questions were infighting and I love the direction that you are taking this department in."

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