I. POLICY

The Illinois State Police (ISP) will:

I.A. Endorse and meet professionally recognized standards that are consistent with its mission and responsibilities.

I.B. Ensure ongoing compliance with certain professional standards of the Commission on Accreditation for Law Enforcement Agencies, Inc. (CALEA).

II. DEFINITIONS

II.A. Accreditation - the recognition or approval that is received after a law enforcement agency successfully demonstrates, to a group of peer assessors, compliance with a set of comprehensive standards promulgated by CALEA.

II.B. Accreditation Coordinator - an ISP employee assigned to assist the Accreditation Manager. The position is dependent on available resources and is not mandated.

II.C. Accreditation Manager - an ISP employee appointed by the Director to manage the Department's efforts to maintain an accredited status.

II.D. Accreditation Standards Management Compliance Status Assessment - an assessment of a unit conducted by the Accreditation Program in conjunction with the Unit Commander, or designee, to determine the compliance of that unit with a particular set of CALEA Accreditation Standards relevant to the functions of that unit. A written report documenting the standards reviewed and compliance status is provided to the unit and the Director's Office.

II.E. CALEA Assessor - an individual approved by CALEA to review and report on another agency's compliance with a set of established standards.

II.F. IPAC - Illinois Police Accreditation Coalition - a voluntary association of Illinois police agencies actively involved in accreditation.

II.G. ISP Accreditation Committee - a departmental working committee consisting of individuals representing the Director's Office and each division.

II.H. Proof of Compliance - a verification that the Agency fully complies with the letter and spirit of a standard; may include written documents, interviews, and observations.

II.I. SAAC - State Agency Accreditation Coalition - a voluntary association of national state police and highway patrol agencies actively involved in accreditation.

III. RESPONSIBILITIES

III.A. The Director will:

III.A.1. Determine whether the Department will strive to maintain CALEA accredited status.

III.A.2. Appoint the Accreditation Manager.
III.A.3. Appoint an individual in the Director's Office to serve as a permanent representative on the Department Accreditation Committee.

III.B. Each Deputy Director will:

III.B.1. Appoint a permanent division representative to serve on the Accreditation Committee. The Deputy Director may appoint additional persons to assist the permanent representative.

III.B.2. Maintain compliance with relevant standards on an on-going basis and keep the Accreditation Manager apprised of policy and programmatic changes.

III.B.3. Require his/her representative on the Accreditation Committee to furnish the Accreditation Manager with current proof(s) of compliance in accordance with assignments and deadlines established by the Accreditation Manager.

NOTE: Committee members' direct supervisors from their permanent assignments will permit the committee members the necessary time and resources to fulfill committee responsibilities in addition to normal day-to-day responsibilities.

III.C. The Accreditation Manager will:

III.C.1. Receive specialized accreditation manager training within one year of being appointed through on-the-job training, IPAC, or CALEA.

III.C.2. Serve as liaison between the Accreditation Committee and the Director's Office.

III.C.3. Chair the Accreditation Committee.

III.C.4. Report to the Office of the Director, Office of Research and Development.

III.C.5. Oversee all facets of the Accreditation Program.

III.C.6. Provide training to all division representatives serving on the Accreditation Committee.

III.C.7. Assign standards to, and establish deadlines for, committee members to maintain proof of compliance files.

III.C.8. Monitor and report on standards compliance documentation files to the Director and Deputy Directors.

III.C.9. Work with the Policy Development Section, Office of Research and Development, to review each proposed, new, or revised ISP directive for compliance with CALEA standards.

III.C.9.a. Recommend appropriate directive revisions.

III.C.9.b. Ensure appropriate CALEA standards are listed on each directive.

III.C.10. Maintain information regarding ISP employees who are CALEA Assessors and will recommend to the Director the approval of employees seeking assessor status.

III.C.11. Monitor and coordinate the Department's support of other agencies seeking accreditation using ISP employees as assessors.

III.D. The Accreditation Coordinator will assist the Accreditation Manager and represent the Accreditation Manager and the Department in accreditation matters when the Accreditation Manager is not present.

III.E. Each Accreditation Committee Member will:

III.E.1. Be responsible for reviewing all new or revised division procedures, directives, and programs to ensure they comply with current accreditation standards and will advise the Accreditation Manager of the results of the review.
III.E.2. Maintain proof of compliance files in accordance with assignments and deadlines established by the Accreditation Manager.

III.E.3. Review new, revised, and rescinded ISP directives to assess the effect on CALEA compliance within the member’s division and, if CALEA compliance is affected, initiate appropriate action(s).

III.F. Any ISP employee certified by CALEA as an Assessor will notify the Accreditation Manager of this certification and all related activities.

IV. PROCEDURES

IV.A. The Accreditation Manager will ensure the following procedures are followed:

IV.A.1. All documents needed to indicate compliance will be maintained in the appropriate electronic file management system, as determined by CALEA.

IV.A.2. Provide an annual report of compliance status to the Director and each Deputy Director by February 1 of each year and additional reports as needed.

IV.A.3. All new or revised directives and programs will be reviewed prior to implementation to ensure their compatibility with accreditation standards.

IV.A.4. Familiarization with the accreditation process is provided to agency employees as follows:

IV.A.4.a. To all newly hired code personnel within 30 days after their employment begins; for sworn personnel, during their Cadet training

IV.A.4.b. To all agency personnel during the self-assessment phase associated with achieving each reaccreditation

IV.A.4.c. To all agency personnel just prior to an on-site assessment associated with each reaccreditation

IV.A.5. Maintain a computerized standards compliance database and tracking system.

IV.A.6. Liaison activities and support will be provided to the IPAC and SAAC through attendance at regularly scheduled meetings and the provision of personnel for mock assessments.

IV.A.7. The Department is represented, when necessary, at national/regional CALEA meetings.

IV.B. All ISP employees who serve as CALEA Assessors will:

IV.B.1. Forward a copy of their application to become an assessor through the chain-of-command to the Accreditation Manager as well as advise the Accreditation Manager of any changes in their status as an assessor.

IV.B.2. When selected as a CALEA Assessor, advise the Accreditation Manager and submit a report to the Accreditation Manager on their experiences and findings associated with the assessment. Such reports will not violate CALEA Assessor confidentiality guidelines.

IV.C. The Accreditation Committee will, at a minimum, meet once every four (4) months.

IV.D. The Office of Research and Development will provide logistical support and resources to the Accreditation Program.

IV.E. The Office of Inspection and Audits will:

IV.E.1. Cooperate closely with the accreditation process to ensure that inspections and audits conducted incorporate a review of applicable CALEA standards.
IV.E.2. Provide copies of relevant inspection and audit plans to the Accreditation Manager, upon request, to ensure appropriate standards are incorporated in the plan.

IV.E.3. Provide to the Accreditation Manager, upon request, any findings pertaining to compliance or non-compliance with CALEA standards and include references to the standards.

IV.E.4. Use the accreditation staff to assist with accreditation-related inspections, as appropriate.

| Indicates new or revised items.

-End of Directive-