



**Georgia Association of Chiefs of Police  
Georgia Law Enforcement Certification Program  
On-Site Assessment – Final Report**



**To:** Chuck Groover  
Coordinator, State Certification

**From:** Valerie M. Johnson

**Date:** 08/30/2021

**Type:** 6<sup>th</sup> Edition Standards

Initial Certification  
 Re-Certification  
 Re-Certification Tier 1  
 Re-Certification Applicable to Georgia

**Agency:** Avondale Estates Police Department

**Agency CEO:** Chief of Police, Lynn Thomas

**Certification Manager:** Lt. Duanne Thompson

**Dates of Assessment:** 08/09- 08/10/2021

**Assessment Team:**

**Team Leader** Valerie M. Johnson  
**Assessor** Tanja Patterson

Agency Profile

The City of Avondale Estates is a small, predominately residential metropolitan community lying 12 miles east of downtown Atlanta, Ga. The city was founded in 1924 and has grown to encompass approximately 1.2 square miles, with around 3600 residents. The Avondale Estates

Police Department, started in 1928, is currently structured for a staff of 15 sworn, certified police officers. There are no civilian or auxiliary employees. The Avondale Estates Police Department is made up of a ten man uniform patrol division, a criminal investigations division, city code enforcement and a three member command staff (Chief, Deputy Chief and Lieutenant).

### Chief of Police

Lynn O. Thomas, Chief of Police, began his career in law enforcement in 2002 as a patrol officer with the City of Avondale Estates. He progressed through the patrol division to the rank of Sergeant and a command staff member. He spent time as an investigator in the criminal investigations division before being appointed to the position of Chief of Police in July 2016.

### Assessment Summary

The Assessment began at approximately 0900 on each day. Upon arrival, the Assessment Team was welcomed by the Certification Manager Lt. Duanne Thompson. A conference room type workspace was provided, along with adequate supplies, plug-ins for laptops, and refreshments. The Assessment Team was introduced to Chief of Police, Lynn Thomas, and Deputy Chief, Paul Conroy. The hospitality of the Avondale Estates PD personnel was excellent, during the assessment.

There was no file review prior to the assessment. This assessment was conducted through PowerDMS on site. Site visits included a tour of the Avondale Estates Police Department, including the Property and Evidence areas; as well as a tour of the Dekalb County 911 Center. Compliance issues were identified in the Property and Evidence areas, which will be detailed later in this report.

50 files were sent back for repair, due to an overwhelming lack of documentation. The Assessment Team took into consideration that this was an initial assessment, but the missing proofs of compliance were items the agency has been doing by function (eg- incident reports, search and seizure, training, arrests). Many of the agency's policies also needed revision, in order to meet standard compliance.

The Assessment Team took time to educate personnel regarding each compliance issue, and work with the Certification Manager to find solutions for documenting compliance. The Assessment Team's communication of these issues to the Certification Manager was met with indifference or sarcasm, as well as comments that the Mock team had not identified these issues as problematic. The Assessment Team did not review or request Mock assessment notes, in order to maintain the integrity of a neutral on-site process, although the Team Leader did explain it was difficult to believe many of the non-compliance issues and lack of documentation would not have been identified by a Mock team.

The Assessment Team communicated necessary corrections to files and policies as they were identified. By the end of Day 1, there were approximately 30 files out for repair. The Certification Manager stated he had made corrections to a few of them, but he would be working on them that evening. Upon the team's arrival for Day 2 of the assessment, the Certification

Manager communicated he was still working on the same files. In order to use time efficiently, the Assessment Team continued to move through the remaining files with a goal of re-checking repaired files in the afternoon. Due to the amount of missing documentation and needed policy revisions, the file review took much longer than anticipated.

Around 1200 on Day 2, the Assessment Team met with the Chief of Police to express concern regarding the agency's progress. The Team Leader logged in to the Avondale Estates PD PowerDMS Assessment, in order to show the Chief the agency's compliance files, and explain the poor condition of the files and to help explain why the file review was progressing so slowly. It appeared this was the first time the Chief had seen the compliance files. He did not appear to be surprised or overly concerned, upon seeing the condition of the files or hearing the explanation. The Team Leader explained the team was concerned about being able to finish reviewing all of the assessment files before the end of the day, due to the amount of corrections and missing documentation. The Assessment Team also told the Chief the Certification Manager's demeanor and comments regarding the Certification process were very concerning. The Assessment Team recommended, in the future, the agency may consider having a different Certification Manager. The Chief did not react, when the Assessment Team explained, in detail, the negative comments the Certification Manager had made, during the assessment. The Chief of Police did state the agency had participated in a Mock assessment, and that he felt it was unfair that the "Mock team had made it out as if everything was fine and we were in good shape". The Assessment Team again explained they had not reviewed any Mock notes and could not offer insight regarding any recommendations of the Mock team, but it was difficult to believe a Mock team would not have found issue with the significant lack of documentation in the files, as well as the physical issues with Property and Evidence.

At approximately 1500 on Day 2, the Team Leader made the decision to stop the assessment. There were still over 30 files out for repair, and the Assessment Team had not been able to review 100% of the compliance files. The inability of the agency to repair files in a timely manner, in conjunction with what appeared to be an apathetic attitude toward the Certification process by the Certification Manager contributed to the decision to end the assessment. The Team Leader maintained continuous communication with the State Certification Coordinator throughout the assessment and decision to stop the on-site.

## Chapter Summaries

### **Chapter One**

1.4

File sent back:

Only proof attached is a memo stating no violations of the code of conduct in 2020. Requested copies of policy signatures for sworn personnel.

1.7

File sent back:

Need proofs. Requested POST records showing updated after training is completed.

1.9

File sent back: Need proof of arrest with a warrant.

1.12

File sent back:

Policy states if a subject or officer is injured, medical aid will be sought immediately. Policy needs to address alleged injury/ complaint of injury.

1.13

File sent back:

Policy lists "chemical agents" but does not list specifications of the weapon. Need to include specifications of chemical agents in policy.

Policy needs to address inspection of weapons by prior to carrying

1.14

File sent back:

Need to attach UOF report example for each force type as required by the standard for bullets A-C. The one attached will cover bullet d.

1.16

File sent back:

The standard requires an analysis of use of force incidents. The proof attached is a summary of use of force incidents, but is not an analysis. Please include an analysis that meets the definition provided in the standards manual. (Analysis should include a listing of incidents, as well as a documented review of the incidents identifying any patterns/ trends, training needs, evaluation of policy or process changes needed, etc.). Please also revise the policy to require an analysis, as it currently requires an "annual report" of UOF incidents.

1.17

File sent back:

Policy states: "When an officer's use of force causes death or serious injury, the officer shall be placed on either administrative leave or in-house administrative duty in accordance with S.O.P. 11-3." Need to add "actions" to this sentence, to meet standard requirement, as other officer actions (vehicle accidents, pursuits, etc) can cause injury or death.

1.18

File sent back:

B. Need to include the referenced disciplinary action policy. C. Need to include the requirement for documented annual review of agency practices in policy.

1.22

File sent back:

C. criminal and administrative use of captured data--- Please include proof of use of captured videos for admin or criminal use (Ex- complaint investigation where supervisor views video during investigation, etc)

E. equipment maintenance and inspection procedures; and---Please include proof of maintenance and inspection (can be inspection forms, pre-shift inspections, documentation of camera sent for repair, etc.)

F. requirements for documented administrative review of captured data.--- Please include documentation of administrative reviews (3 per officer/90 days and annual prior to officer evaluation)

1.24

Waiver Granted On-site--- agency does not participate in a Task Force

## **Chapter Two**

2.1

File sent back:

C. Since forcible stopping techniques are not authorized, please document where this is covered during annual pursuit training---ex- officers trained on prohibited actions.

A, B, E, F. Need proofs of training (rosters, etc)

D. Proof attached is one POST record showing an officer completed bias based policing training. Need to show more than one officer. Recommend attaching the POST roster for the one class showing the whole agency.

2.2

File sent back:

A-F. The proof attached is a POST record for one officer, but no items are highlighted. For this standard, please generate a POST roster for each of the training requirements showing who all completed the training.

2.8

File sent back: This is a proficiency standard. Agency policy states "refresher" training will be conducted biennially. Policy needs to state proficiency training will be conducted.

A-C. Proofs: The only proof attached is a Taser Instructor certificate. There are no other proofs in the file. Please attach proofs of compliance for bullets A-C.

2.9

No proofs attached to file. Need proofs of training.

2.10

Policy does not require annual FTO in-service training. Need to revise policy to require annual FTO in-service.

## **Chapter Three**

3.1

File sent back:

Only proof attached to file is a document showing Chief approves policy manual. Need proofs of compliance for bullets B-E.

3.2

File sent back:

Need to show proof that organizational structure is available to all personnel. Is the org. chart or policy on the bulletin board? (TL checked bulletin board and saw no Org. Chart) If so, highlight to show in the picture---or attach the document showing policies are accessible via the P-drive.

3.5

File sent back:

Need proof of compliance---Ex- performance evaluations, disciplinary documentation, etc.

3.6

File sent back:

Need proof of compliance for bullet A.

#### **Chapter Four**

4.3

File sent back:

E. Policy does not address deception testing.

Only proof attached is a memo that states the agency "does not submit an applicant to any type of deception testing during the hiring process."

The standard requires deception testing. Agency must establish a procedure for this.

A, B, C, D. Need proofs of compliance

4.4

File sent back:

C. Proof attached is a completed new hire checklist, but the item highlighted for "references" is an item on the checklist for "previous employment inquiry" which does not meet the standard- or the agency policy which requires 3 references to be checked. Need to document 3 references checked.

4.5

File sent back:

Need proofs of compliance for all bullets.

4.6

File sent back:

Need to document that job descriptions are issued to personnel and show they are available to all personnel.

4.8

File sent back:

D. Need to show proof of rater training (policy states it is done by the Chief)

4.10

File sent back:

H. Policy needs to address security of promotion materials

#### **Chapter Five**

5.1

File sent back: No proof for bullets a-g. Cert Mgr. re-submitted with proof for bullets b & c only.

5.2

File sent back: No proof. Resubmitted after explaining what the Cert. Mgr. Could use for proof. Recommend finding better proof for bullet a.

5.3

Waiver not attached, when asked Cert. Mgr. stated he was told he could use a "simple note" stating that the agency does not serve civil process documents. Team Leader to grant on-site waiver.

5.4

File sent back: No proof for bullets a-h. "Simple Note" attached stating "This process performed by the Dekalb County Sheriff's Department. The team leader and I attempted to explain several times that there are different things that are considered criminal process items. We gave him several examples of what he could use as proof for this standard.

5.5

File sent back: No Proof. Explained the different types of items that could be used for proof for bullets a-e. File resubmitted however we ran out of time to re-check proofs.

5.6

File sent back: No proof. File resubmitted but we did not have time to recheck.

5.8

Nothing attached (WD, proof or waiver) for this standard. On-site Waiver granted by Team Leader.

## **Chapter Six**

6.4

NC

File sent back: No proof attached.

6.6

NC

File sent back: Only items attached are: WD, Blank Pursuit After-Action Form & Proof of 2019 Pursuit Report submitted to GACP

6.8

NC Insufficient Proof: The proof attached for rear seat inspection before and after shift was a Daily Activity Report with abbreviations that were not defined.

6.10

FM

Further proof needed for restraint methods used during Detainee transport. The only proof attached is a photo showing some of the items described in the WD.

6.11 FM CM has a 2020 MTF stating no sick or disabled detainees were transported. I advised CM that injured detainees needed to be addressed as well.

6.14

NC No proof attached. AEPD Policy states that traffic accident and traffic enforcement analysis will be completed on a monthly basis. When asked, CM stated that since COVID & protests against police have begun, the Chief did not want the officers running traffic and that no analysis has been done.

6.15

NC

No Proof or MTF

6.16

NC Insufficient proof: Emergency Management Plan with an approval date of 2007 attached. Page 1 of the plan states that the plan will be reviewed annually.

## Chapter Seven

7.1

NC Proof needed for bullet c. (Proof was not received after explaining what to use as proof)

7.3

NC

Bullet a: Issuing Citations to Officers- When asked, CM stated that citation books are not issued to officers. I mentioned that the policy stated they were, CM then advised that they are issued in case the computer-generated citation system fails. I advised he would need proof for bullet a.

7.5

NC Attached as proof were UCR Crime statistics generated from AEPD reporting system (Courtware). I explained that UCR Crime Stats were not a Crime analysis or proof of dissemination. CM advised that he did not believe there was enough crime in Avondale Estates to complete a crime analysis. Based on my observation a property evidence list that was used as proof for another standard, as well as some of the reports used as proof, I found his statement to be unlikely.

7.8

NC MTF attached stating that "Basic Community Patrol" did not operate in 2020, when asked CM stated that was the only community program the agency was involved in. Later it was discovered that there are other small programs to assist the community that the agency is involved in. Further, the policy does not address "all affected personnel".

7.9

NC

Policy contradicts itself. Insufficient proof. Policy also needs to be updated to reflect the new security measures put in to place at the recommendation of the team leader.

7.12

NC

CM attached simple note "With the change of primary evidence custodians, training will be provided in the year. Training will consist of formal classes (when offered) and shadowing/mentoring with certified CSI/Custodian." Later the Chief mentioned training completed by the current Evidence Custodian. I asked the CM about the training later, with the Chief present, ultimately the CM stated that some training had been completed by the Evidence Custodian.

7.13

NC

Initially no proof of inspection, inventory or audit of evidence room was attached. Later MTF attached for 1 inspection and a 100 % inventory. No proof of audit, no semiannual inspection performed.

7.14

NC No proof attached for bullets b, c & d.

7.15

NC

No Proof for bullets a & c, incorrect proof for bullet b. CM attached Georgia Crime Victims Rights Form, this does not address procedures involved in prosecution of a case.

7.16

NC Insufficient proof: no proof for bullets b, c, d, e & g

7.18

NC

No proof for bullets a, b, c & e

## **Chapter Eight**

8.1

NC *No Proof*

8.2

NC *No proof attached for bullets a & b or d, e & f. Policy needs to be updated, this policy shows authorization from a Chief that is no longer employed with AEPD, last review of this policy appears to be 2017.*

## **Chapter Nine**

Waiver Verified

### Agency Inspections/visits

#### Property and Evidence

Sgt. Brendan Beatty, serves as the Property and Evidence custodian, and provided a tour of the Avondale Estates PD facilities. The Property and Evidence storage area was a single room, within the Police Department. It should be noted, although PD personnel stated the Police Department floor of the City Hall building is a secure area, the Assessment Team was able to move between the City Hall area (floor 1) and the Police Department (floor 2) with no obstruction, as all doors separating the two floors remained propped open throughout the entirety of the assessment.

The Property and Evidence storage room was located in a hallway, near the elevator. The door to the room was a locking metal door with key entry. The door was not equipped with an alarm system. There was one camera inside the storage room, which is motion activated. Sgt. Beatty explained the camera does record, but the Assessment Team was unable to confirm whether

the motion sensor on the camera would immediately alert anyone upon activation. At one point the Certification Manager said command personnel were able to get alerts on mobile phones, but it was unclear whether the alert process was currently being actively used.

The Property and Evidence was the corner room in a hallway and was adjacent to a storage closet on the other side. The Assessment Team asked what the walls were made of, and the personnel stated "sheetrock". The back wall of the storage room was backed by the outside of the brick building. This meant three of the four walls of the storage room were made only of sheetrock and could potentially be easily penetrated. There were no cameras in the hallway surrounding the storage room. The Assessment Team explained with the accessibility of the PD floor by City Hall personnel, lack of cameras and alarm systems, and the sheetrock construction of the walls; there was security concerns regarding the storage area. There was a potential for a breach in the storage room, without anyone being alerted. The Team Leader recommended the agency reinforce the walls of the storage room with chain link or some other caging to give an extra layer of protection. The Certification Manager repeatedly expressed negativity about this, stating the building is historic and they have problems changing things. The Assessment Team explained the agency did not need to change the structure of the building in any way, but to simply reinforce the insides of the walls to make penetration more difficult. The Certification Manager then argued the city would likely have issue with the cost of such a project, and said "it will be a pain in the ass to move all that crap out of these and put that up and then move it all back in". The Team Leader explained the intent of the standards and evidence security in general, is to make sure agencies can protect their property and evidence and document accountability at all times, against tampering from citizens and personnel. The Certification Manager said the Mock team had mentioned this may be an issue, but later said the Mock team said it was not a problem. The Team Leader explained it was unlikely that any assessor would find sheetrock walls to be acceptable for an evidence room. The Certification Manager said he did not believe the walls would be reinforced "any time soon" because of the budget. The Team Leader explained the walls would need to be reinforced by the end of the on-site assessment, and if that were not possible, the agency would need to submit a written action plan specifying the timeline for completion of the project. It was emphasized the reinforcement should occur as soon as possible.

The agency's temporary storage area for property and evidence included a single, large mailbox type fixture and a small refrigerator with a key hole. Any refrigerated items were to be locked in the refrigerator and the key dropped into the mailbox storage. The Assessment Team asked what the process was for temporary storage of items too large to fit inside the mailbox opening, and Sgt. Beatty stated, "They just sit it on top of the mailbox until I come get it." The Team Leader asked what the process was for temporary items too large for the mailbox, during an "after hours" situation, and the response was the same; to sit it on top of the mailbox. The Assessment Team explained leaving any property or evidence unsecured is unacceptable and gave suggestions for repurposing a locker or locking cabinet for larger items, such as rifles which would not fit into the mailbox fixture. Personnel moved a locking cabinet into the temporary storage area, which will be used for larger items. Personnel are to lock the items in the cabinet and drop the key into the mailbox fixture.

The Assessment Team asked how the agency stores bicycles and other large items, and Sgt. Beatty showed the team a utility closet off the stairwell. He explained bicycles and larger items are placed in the corner of the room. The room was accessible to all personnel, had no lock, and there was no means of securing the items in place. There were no items being currently stored in the space, but the Assessment Team explained this was not acceptable. The Team

Leader recommended anchoring a chain mechanism into the ground or wall, in order to lock any bicycles in place. The Chief of Police purchased and installed an anchor, chain and lock for the space.

**Dekalb County 911**

A visit to the 9-1-1 center revealed all areas appear to be operating in compliance with all applicable standards. Dekalb County 9-1-1 dispatches for the Avondale Estates Police Department. The center operates in compliance with CALEA standards.

**Agency Interviews**

As mentioned above, the Assessment Team communicated with the Chief of Police, Deputy Chief, Certification Manager, and Property and Evidence Custodian during the assessment.

**Waiver(s):**

**Chapter 9 was Waived. On-site Waivers were granted for 1.24, 5.3 and 5.8.**

**Files Sent Out for Repair:**

*In this section, discuss the total amount of files sent back for repair. Break down the totals by file maintenance and non-compliant. Indicate if any files had to be returned multiple times. The summary of each correction and what the agency did to show compliance would have been addressed in the Chapter Summaries.*

File Maintenance	<i>Files remained outstanding at the end of the assessment are listed as Non-Compliant (see below)</i>	
Non-Compliant	1.4, 1.7, 1.9, 1.12, 1.13, 1.14, 1.16, 1.17, 1.18, 1.22, 2.1, 2.2, 2.8, 2.9, 2.10, 3.1, 3.2, 3.5, 3.6, 4.3, 4.4, 4.5, 4.6, 4.8, 4.10, 5.1, 5.2, 5.4, 5.5, 5.6, 6.4, 6.6, 6.8, 6.14, 6.15, 6.16, 7.1, 7.3, 7.5, 7.8, 7.9, 7.12, 7.13, 7.14, 7.16, 7.18, 8.1, 8.2	48
Files Returned Multiple Times	5.1, 5.2, 5.4, 5.5, 5.6	5

**Standards Found to be in Non-Compliance:**

*Non-compliant standards are standards where the practice of the agency did not meet the standard. This could be for only (1) year of the (3) year cycle. If the agency is not able to show compliance with a standard(s), try to include as much detail as possible as to the problem. Include any changes the agency made and what plan(s), if any, the agency has made to address the issue.*

Standards found to be in non-Compliance	1.4, 1.7, 1.9, 1.12, 1.13, 1.14, 1.16, 1.17, 1.18, 1.22, 2.1, 2.2, 2.8, 2.9, 2.10, 3.1, 3.2, 3.5, 3.6, 4.3, 4.4, 4.5, 4.6, 4.8, 4.10, 5.1,	48
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	5.2, 5.4, 5.5, 5.6, 6.4, 6.6, 6.8, 6.14, 6.15, 6.16, 7.1, 7.3, 7.5, 7.8, 7.9, 7.12, 7.13, 7.14, 7.16, 7.18, 8.1, 8.2	
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**Standards Found to be Compliance/Written Directive Change**

*A standard is compliant/written directive change if the agency's practice is compliant with the standard(s), but the agency's policy is not in compliance. Discuss the problem with the standard(s), how the agency was compliant with the standard(s), and what modifications the agency made to the policy to bring the policy into compliance with the standard(s)*

Standards found to be in – Compliance/ Written Directive Change	Many of the files listed in the non-compliance section contained needed policy revisions, but were not returned.	0
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**Agency Totals**

<i>Standards found to be in compliance</i> (17 files remain unreviewed)	<b>55</b>
<i>Standards found to be compliant/written directive change</i>	<b>0</b>
<i>Standards found to be in non-compliance</i>	<b>48</b>
<i>Standards that were granted waivers</i>	<b>19</b>
<b>TOTAL NUMBER OF STANDARDS</b>	<b>139</b>

**Exit Interview:**

At approximately 1500 on Day 2, the Assessment Team met with Chief Thomas, Deputy Chief Conroy, and Certification Manager, Lt. Thompson. The team thanked the agency for their hospitality, during the assessment, and explained our findings during the assessment. The agency personnel appeared receptive to our comments and recommendations, although the Chief of Police continued to say he had been under the Impression the files were in good order based on the Mock assessment. The Team Leader explained there were still a large number of files out for repair, and the team had not been able to review about 17 files, due to the delay because of compliance issues and lack of documentation.

As Team Leader, I explained I would feel irresponsible recommending certification for the agency, based on the number of compliance issues and the amount of work still needing to be done to bring the agency's policies up to standard. We recommended the agency seek further involvement with GPAC and continue to review their policy manual. I explained my report of findings would be submitted to GLECP for review and consideration, but the agency should not expect to be certified.

**Recommendation:**

It is my recommendation as Team Leader, that the Avondale Estates Police Department not be granted certification at this time.

*Valerie M. Johnson*

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***Signature of Team Leader***

**STATE OF GEORGIA LAW ENFORCEMENT CERTIFICATION PROGRAM**

**On-Site Assessment Assessor Worksheet**

<b>AGENCY: Avondale Estates PD</b> <b>CHAPTER: 1</b>		<b>ASSESSOR'S NAME: Valerie Johnson</b>  <b>DATE: 08/09/21</b> <b>ASSESSOR INITIALS: VMJ</b>  <b>PAGE 1 OF 3</b>
<b>Standard Number</b>	<b>Level of Compliance</b>	<b>COMMENTS / RECOMMENDATIONS</b>
1.1		OK- Note: agency has no civilian personnel
1.2		OK
1.3		OK
1.4		File sent back: Only proof attached is a memo stating no violations of the code of conduct in 2020. Requested copies of policy signatures for sworn personnel.
1.5		OK
1.6		OK
1.7		File sent back: Need proofs. Requested POST records showing updated after training is completed.
1.8		OK
1.9		File sent back: Need proof of arrest with a warrant.
1.10		OK
1.11		File OK Recommended agency consider removing the following sentence from the policy for liability reasons: <b>NOTE: Deadly force shall not be used towards persons who have committed or are committing traffic violations, misdemeanors, non-forcible felonies, or forcible felonies not in progress.</b>
1.12	/WD	File sent back: Policy states if a subject or officer is injured, medical aid will be sought immediately. Policy needs to address alleged injury/ complaint of injury.
1.13	/WD	File sent back: Policy lists "chemical agents" but does not list specifications of the weapon. Need to include specifications of chemical agents in policy. Policy needs to address inspection of weapons by prior to carrying

1.14		File sent back: Need to attach UOF report example for each force type as required by the standard for bullets A-C. The one attached will cover bullet d.
1.15		OK
1.16	/WD	File sent back: The standard requires an analysis of use of force incidents. The proof attached is a summary of use of force incidents, but is not an analysis. Please include an analysis that meets the definition provided in the standards manual. (Analysis should include a listing of incidents, as well as a documented review of the incidents identifying any patterns/ trends, training needs, evaluation of policy or process changes needed, etc.). Please also revise the policy to require an analysis, as it currently requires an "annual report" of UOF incidents.
1.17	/WD	File sent back: Policy states: "When an officer's use of force causes death or serious injury, the officer shall be placed on either administrative leave or in-house administrative duty in accordance with S.O.P. 11-3." Need to add "actions" to this sentence, to meet standard requirement, as other officer actions (vehicle accidents, pursuits, etc) can cause injury or death.
1.18		File sent back: B. Need to include the referenced disciplinary action policy. C. Need to include the requirement for documented annual review of agency practices in policy.
1.19		OK
1.20		OK
1.21		OK
1.22		<p>C. criminal and administrative use of captured data--- Please include proof of use of captured videos for admin or criminal use (Ex- complaint investigation where supervisor views video during investigation, etc)</p> <p>E. equipment maintenance and inspection procedures; and---Please include proof of maintenance and inspection (can be inspection forms, pre-shift inspections, documentation of camera sent for repair, etc.)</p> <p>F. requirements for documented <u>administrative review</u> of captured data.--- Please include documentation of administrative reviews (3 per officer/90 days and annual prior to officer evaluation)</p>
1.23		OK
1.24	W	Waiver Granted On-site--- agency does not participate in a Task Force

**CHAPTER OVERVIEW**

Large numbers of missing proofs

Need to highlight applicable areas on attached proofs, and narrow policy highlights to applicable verbiage

Highlights are not consistently linked to standard bullets in PowerDMS

**STATE OF GEORGIA LAW ENFORCEMENT CERTIFICATION PROGRAM**

**On-Site Assessment Assessor Worksheet**

<b>AGENCY:</b> Avondale Estates PD <b>CHAPTER:</b> 2	<b>ASSESSOR'S NAME:</b> Valerie Johnson <b>DATE:</b> 08/09/21 <b>ASSESSOR INITIALS:</b> VMJ <b>PAGE</b> 1 <b>OF</b>
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
2.1		C. Since forcible stopping techniques are not authorized, please document where this is covered during annual pursuit training—ex- officers trained on prohibited actions. A, B, E, F. Need proofs of training (rosters, etc) D. Proof attached is one POST record showing an officer completed bias based policing training. Need to show more than one officer. Recommend attaching the POST roster for the one class showing the whole agency.
2.2		A-F. The proof attached is a POST record for one officer, but no items are highlighted. For this standard, please generate a POST roster for each of the training requirements showing who all completed the training.
2.3		OK
2.4		OK-Prohibited by policy
2.5		OK
2.6		OK
2.7		OK
2.8	/WD	This is a proficiency standard. Agency policy states "refresher" training will be conducted biennially. Policy needs to state proficiency training will be conducted. A-C. Proofs: The only proof attached is a Taser Instructor certificate. There are no other proofs in the file. Please attach proofs of compliance for bullets A-C.
2.9		No proofs attached to file. Need proofs of training.
2.10	/WD	Policy does not require annual FTO in-service training. Need to revise policy to require annual FTO in-service.
2.11		OK

<b>CHAPTER OVERVIEW</b>  Large numbers of missing proofs Need to highlight applicable areas on attached proofs, and narrow policy highlights to applicable verbiage Highlights are not consistently linked to standard bullets in PowerDMS
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**STATE OF GEORGIA LAW ENFORCEMENT CERTIFICATION PROGRAM**

**On-Site Assessment Assessor Worksheet**

<b>AGENCY: Avondale Estates PD</b> <b>CHAPTER: 3</b>		<b>ASSESSOR'S NAME: Valerie Johnson</b>  <b>DATE: 08/10/21</b> <b>ASSESSOR INITIALS: VMJ</b>  <b>PAGE 1 OF</b>
<b>Standard Number</b>	<b>Level of Compliance</b>	<b>COMMENTS / RECOMMENDATIONS</b>
3.1		Only proof attached to file is a document showing Chief approves policy manual. Need proofs of compliance for bullets B-E.
3.2		Need to show proof that organizational structure is available to all personnel. Is the org. chart or policy on the bulletin board? If so, highlight to show in the picture—or attach the document showing policies are accessible via the P-drive.
3.3		ok
3.4		OK
3.5		Need proof of compliance—Ex- performance evaluations, disciplinary documentation, etc.
3.6		Need proof of compliance for bullet A.

3.7	/WD	<p><b><u>POLICY:</u></b></p> <p>Current policy gives differing definitions of what constitutes a complaint, according to the agency, and appears that some complaints are simply documented and given to the chief or forwarded to courts, but not investigated by the agency.</p> <p><b><u>**This standard requires "ALL complaints against the agency or its employees to be investigated". Agency needs to revise policy to require investigation of all complaints- no matter the nature or source.</u></b></p> <ul style="list-style-type: none"> <li>• Current policy states: "The Agency will accept and document all complaints alleging employee/officer or Department misconduct for the following primary and ethical reasons:"—Need to include responsibility to <u>investigate</u> all complaints, as current verbiage only requires agency to "accept and document"</li> <li>• Current policy states: Complaints regarding the validity of Traffic Citations (UTC) or parking reminders/citations are not considered complaints for this definition and the party <u>should be referred to the proper court for resolution.</u>— the agency is required to investigate ALL complaints.</li> <li>• Current policy includes the following definitions:  <u>Complaint of Employee Misconduct</u> – A complaint is an allegation from any source of an act or omission by an Agency employee/officer, which if proven true, would be misconduct or a violation of Agency policy, rules or regulations.  <u>Citizen's Inquiry/Complaint of Agency Dissatisfaction</u> – <u>Public concerns regarding law enforcement operations which do not meet the Agency's definition of a complaint, but must be documented by the Agency employee/officer receiving the inquiry from the citizen.</u> A Citizen's Inquiry form will be completed and forwarded to the Chief of Police detailing the nature and results of the inquiry</li> </ul> <p><b><u>PROOFS:</u></b></p> <p>C. The document attached is a memo that summarizes a total of two complaints investigated by the agency. There is no other verbiage on the memo. <b>Need to include a documented review of complaints.</b></p> <p><b><u>GLECP definition for Administrative Review:</u></b> Documented review of an incident, occurrence, practice and/or data prepared by or for the CEO or his/her designee. Review shall address whether training, policy, equipment or disciplinary decisions should be implemented</p>
3.8	/WD	<p>Standard requires: The agency shall have a written directive requiring the formulation and annual updating of written goals and objectives for the agency <u>and for each organizational component within the agency.</u></p> <p><b><u>**Need to revise policy to require annual updating of goals and objectives for the agency and each organizational component. Need to show goals and objectives are made available to all affected personnel.</u></b></p>



**STATE OF GEORGIA LAW ENFORCEMENT CERTIFICATION PROGRAM**

**On-Site Assessment Assessor Worksheet**

<b>AGENCY: AVONDALE ESTATES PD</b> <b>CHAPTER: 4</b>	<b>ASSESSOR'S NAME: Valerie Johnson</b> <b>DATE: 08/10/21      ASSESSOR INITIALS: VMJ</b> <b>PAGE 1      OF 2</b>
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
4.1		OK
4.2		OK
4.3	/WD	E. Policy does not address deception testing. Only proof attached is a memo that states the agency "does not submit an applicant to any type of deception testing during the hiring process." The standard requires deception testing. Agency must establish a procedure for this. A, B, C, D. Need proofs of compliance
4.4		C. Proof attached is a completed new hire checklist, but the item highlighted for "references" is an item on the checklist for "previous employment inquiry" which does not meet the standard- or the agency policy which requires 3 references to be checked. Need to document 3 references checked.
4.5		Need proofs of compliance for all bullets.
4.6		Need to document that job descriptions are issued to personnel and show they are available to all personnel.
4.7		OK
4.8		D. Need to show proof of rater training (policy states it is done by the Chief)
4.9		OK
4.10		H. Policy needs to address security of promotion materials
4.11		OK
4.12		OK



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<b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 5	<b>ASSESSOR'S NAME:</b> Tanja Patterson <b>DATE:</b> August 9, 2021 <b>ASSESSOR INITIALS:</b> TP <b>PAGE</b> 1 <b>OF</b> 1
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
5.1	N	File sent back: No proof for bullets a-g. Cert Mgr. re-submitted with proof for bullets b & c only.
5.2	N	File sent back: No proof. Resubmitted after explaining what the Cert. Mgr. Could use for proof. Recommend finding better proof for bullet a.
5.3	N	Waiver not attached, when asked Cert. Mgr. stated he was told he could use a "simple note" stating that the agency does not serve civil process documents.
5.4	N	File sent back: No proof for bullets a-h. "Simple Note" attached stating "This process performed by the Dekalb County Sheriff's Department. The team leader and I attempted several times that there are different things that are considered criminal process items. We gave him several examples of what he could use as proof for this standard.
5.5	N	File sent back: No Proof. Explained the different types of items that could be used for proof for bullets a-e. File resubmitted however we ran out of time to re-check proofs.
5.6	N	File sent back: No proof. File resubmitted but we did not have time to recheck.
5.7	C	OK
5.8	N	Nothing attached (WD, proof or waiver) for this standard.
5.9	C	OK

**CHAPTER OVERVIEW**

I had the impression that he did not understand that proof of standards can be shown using different items. Even after explaining that different items could be used as proof, he still did not seem to understand. He stated that they are a very small department with only 10 sworn officers.

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<p><b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 6</p>	<p><b>ASSESSOR'S NAME:</b> Tanja Patterson <b>DATE:</b> August 9, 2021    <b>ASSESSOR INITIALS:</b> TP <b>PAGE</b> 1        <b>OF</b> 2</p>
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
6.1	C	OK
6.2	C	OK
6.3	C	OK
6.4	NC	File sent back: No proof attached.
6.5	C	OK
6.6	NC	File sent back: Only items attached are: WD, Blank Pursuit After-Action Form & Proof of 2019 Pursuit Report submitted to GACP
6.7	C	OK
6.8	NC	Insufficient Proof: The proof attached for rear seat inspection before and after shift was a Daily Activity Report with abbreviations that were not defined.
6.9	C	OK

<b>CHAPTER OVERVIEW</b>

**STATE OF GEORGIA LAW ENFORCEMENT CERTIFICATION PROGRAM**

**On-Site Assessment Assessor Worksheet**

<p><b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 6</p>	<p><b>ASSESSOR'S NAME:</b> Tanja Patterson <b>DATE:</b> August 9, 2021    <b>ASSESSOR INITIALS:</b> TP <b>PAGE 2            OF 2</b></p>
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
6.10	FM	Further proof needed for restraint methods used during Detainee transport. The only proof attached is a photo showing some of the items described in the WD.
6.11	FM	CM has a 2020 MTF stating no sick or disabled detainees were transported. I advised CM that injured detainees needed to be addressed as well.
6.12	C	OK
6.13	C	OK
6.14	NC	No proof attached. AEPD Policy states that traffic accident and traffic enforcement analysis will be completed on a monthly basis. When asked, CM stated that since COVID & protestors against police have begun, the Chief did not want the officers running traffic and that no analysis has been done.
6.15	NC	No Proof or MTF
6.16	NC	Insufficient proof: Emergency Management Plan with an approval date of 2007 attached. Page 1 of the plan states that the plan will be reviewed annually.
6.17	C	OK
6.18	C	OK
6.19	C	Good Proof

**CHAPTER OVERVIEW**

When speaking with the CM about the proofs needed, the Emergency Management Plan & the Traffic Analysis, he kept stating that lack of proof was either because of COVID, size of the department, or that he was unaware because the mock team did not tell him that what he had was not acceptable.

Due to having to frequently explain the types of proof needed as well as give examples of the proofs needed, I did not have time to complete this chapter before the end of the second day of the onsite.

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**On-Site Assessment Assessor Worksheet**

<b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 7		<b>ASSESSOR'S NAME:</b> Tanja Patterson  <b>DATE:</b> August 9, 2021 <b>ASSESSOR INITIALS:</b> TP  <b>PAGE</b> 1 <b>OF</b> 2
Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
7.1	NC	Proof needed for bullet c. (Proof was not received after explaining what to use as proof)
7.2	C	OK
7.3	NC	Bullet a: Issuing Citations to Officers- When asked, CM stated that citation books are not issued to officers. I mentioned that the policy stated they were, CM then advised that they are issued in case the computer-generated citation system fails. I advised he would need proof for bullet a.
7.4	C	OK
7.5	NC	Attached as proof were UCR Crime statistics generated from AEPD reporting system (Courtware). I explained that UCR Crime Stats were not a Crime analysis or proof of dissemination. CM advised that he did not believe there was enough crime in Avondale Estates to complete a crime analysis. Based on my observation a property evidence list that was used as proof for another standard, as well as some of the reports used as proof, I found his statement to be unlikely.
7.6	C	OK
7.7	C	OK MTF (Auxiliary program has not been active since the beginning of COVID)
7.8	NC	MTF attached stating that "Basic Community Patrol" did not operate in 2020, when asked CM stated that was the only community program the agency was involved in. Later it was discovered that there are other small programs to assist the community that the agency is involved in. Further, the policy does not address "all affected personnel".
7.9	NC	Policy contradicts itself. Insufficient proof. Policy also needs to be updated to reflect the new security measures put in to place at the recommendation of the team leader.
<b>CHAPTER OVERVIEW</b>		

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<b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 7	<b>ASSESSOR'S NAME:</b> Tanja Patterson <b>DATE:</b> August 9, 2021 <b>ASSESSOR INITIALS:</b> TP <b>PAGE</b> 2 <b>OF</b> 2
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
7.10	C	OK
7.11	C	OK
7.12	NC	CM attached simple note <i>"With the change of primary evidence custodians, training will be provided in the year. Training will consist of formal classes (when offered) and shadowing/mentoring with certified CSI/Custodian."</i> Later the Chief mentioned training completed by the current Evidence Custodian. I asked the CM about the training later, with the Chief present, ultimately the CM stated that some training had been completed by the Evidence Custodian.
7.13	NC	Initially no proof of inspection, inventory or audit of evidence room was attached. Later MTF attached for 1 inspection and a 100 % audit. No proof of inventory, no semiannual inspection performed.
7.14	NC	No proof attached for bullets b, c & d.
7.15	NC	No Proof for bullets a & c, incorrect proof for bullet b. CM attached Georgia Crime Victims Rights Form, this does not address procedures involved in prosecution of a case.
7.16	NC	Insufficient proof: no proof for bullets b, c, d, e & g
7.17	C	OK
7.18	NC	No proof for bullets a, b, c & e

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<b>AGENCY:</b> Avondale Estates Police Department <b>CHAPTER:</b> 8	<b>ASSESSOR'S NAME:</b> Tanja Patterson <b>DATE:</b> August 9, 2021 <b>ASSESSOR INITIALS:</b> TP <b>PAGE</b> 1 <b>OF</b> 1
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Standard Number	Level of Compliance	COMMENTS / RECOMMENDATIONS
8.1	NC	No Proof
8.2	NC	No proof attached for bullets a & b or d, e & f. Policy needs to be updated, this policy shows authorization from a Chief that is no longer employed with AEPD, last review of this policy appears to be 2017.
8.3	C	Observed by Team Leader Johnson
8.4	C	Observed by Team Leader Johnson
8.5	C	Observed by Team Leader Johnson

<b>CHAPTER OVERVIEW</b>