



Introduction

The voluntary accreditation program for Indiana law enforcement agencies is a program initiated by the Indiana Association of Chiefs of Police Foundation (IACPF) and is open to all law enforcement agencies: Municipal, County and State. A brief history of ILEAC:

ILEAC – Indiana Law Enforcement Accreditation Commission

ILEAC was formed in 2005 to establish a body of standards designed to:

- provide professional standards for the performance of law enforcement responsibilities;
- insure excellence through the establishment of a systematic and recognized accreditation program;
- increase the effectiveness and efficiency in the delivery of law enforcement services throughout Indiana with a recognized accreditation program;
- promote cooperation and coordination through accreditation within all law enforcement agencies and the criminal justice system;
- promote public confidence within law enforcement agencies;
- increase law enforcement agency capabilities to prevent and control crime; and
- citizen and employee confidence in the goals, objectives, policies and practices of the agency.

In addition, ILEAC's goal was to develop a voluntary creditable accreditation process where Indiana law enforcement agencies demonstrate that they meet an established set of professional standards.

ILEAC Organization

ILEAC is under the direction of the Indiana Association of Chiefs of Police Foundation, Inc. ILEAC is governed by a Board of Commissioners which includes members of law enforcement, academia, public, corporate and/or federal sectors of the community. The Board of Commissioners will meet throughout the year. All ILEAC meetings are open to the general public except for special executive sessions.

Program Overview

ILEAC established 192 Indiana mandated standards, all of which are classified as *mandatory*. **This means an agency must meet all 192 standards that are applicable to them by function.**

ILEAC strongly recommends that the agency appointed Accreditation Manager receive appropriate Accreditation Manager Training, either from ILEAC, through the Indiana Police Accreditation Coalition (InPAC). This will greatly enhance agency efficiency and success in mastering the process and obtaining accreditation. Besides assistance from the ILEAC Program Director, active participation in InPAC will provide a support network of experienced accreditation personnel that are willing to provide advice and assistance.

Agencies must review all Indiana specific standards to identify those that are, or are not, applicable to it according to the functions the agency performs. To accomplish this, an agency must consider its mission, its legally mandated responsibilities, and the demands of its service community.

ILEAC maintains operational and standards compliance expectations and has the obligation to require certain standards be applicable, regardless of whether the agency currently performs, or *should* perform, the functions addressed by those standards.

When the agency has eliminated those standards that do not apply, the balance becomes the list of applicable standards whose requirements must be complied with in order to achieve state accredited status. The agency will then decide how to comply with applicable standards.

ILEAC expects accredited agencies to maintain compliance and live by the letter and spirit of the standards. Successful agencies comply with standards in a manner that most effectively meet the needs of their individual agency and the citizens they serve.

The Accreditation Process

The Accreditation Process (see Process Chart & Suggested Timeline) relates both to the general stages in the accreditation program (application; self-assessment; the on-site assessment; ILEAC review and decision; and maintaining award status) and to the major individual program elements (Assessor and ILEAC responsibilities; guidance on how to perform certain activities; levels of performance; applicability of rules, etc.).

The program requires that for each applicable standard, the agency maintains a hard copy paper file with an Individual Standard Status Report (ISSR) form (see example), including the standard printed on it, along with proofs of compliance. The ISSR permits the agency (and later, during the on-site assessment, the Assessor) to document and track proofs of compliance and the status of the standard.

There are five general stages in the accreditation process:

- 1. Application:** The accreditation process begins when an agency applies to ILEAC for Indiana state accreditation. Once agency eligibility has been confirmed, the agency and ILEAC sign an agreement that identifies what is expected of each party and pays the appropriate fees. The agency completes and returns an Agency Profile to ILEAC (see example). This provides agency-specific information to facilitate interaction with the accreditation manager and ILEAC Staff in determining applicability of standards, interpreting standards and providing program-related assistance.
- 2. Self-Assessment:** The return of the Agency Profile to ILEAC initiates agency self-assessment. This involves a thorough examination by the agency to determine whether it complies with all applicable standards. The agency prepares forms, develops "proofs of compliance" for applicable standards and assembles the forms and "proofs" in a manner that will facilitate a review by ILEAC assessors. The agency also develops plans for accomplishing its public information requirements and on-site assessment, which

pertain to activities in the next phase. When the agency is satisfied that it has completed all compliance, preparation and planning tasks, it notifies ILEAC that it is ready to schedule its on-site assessment.

- 3. On-Site Assessment:** ILEAC selects a team of certified assessors, free of conflict with the agency, and schedules an on-site assessment date that is mutually agreeable to all parties (see Assessor Criteria). ILEAC makes all arrangements for the on-site assessment, including travel and accommodations for the assessment team.

During the on-site visit, the ILEAC assessors review all standards and verify the agency's compliance with all applicable standards. The assessor's relationship with the candidate agency is non-adversarial. Assessors provide the agency with verbal feedback on their progress during and at the conclusion of the assessment. (see Assessor Decision Making Process Chart.)

Assessors submit a formal, written final report of their on-site activities and findings to the ILEAC Program Director. If the final report meets reporting requirements, reflects compliance with all applicable standards and with required on-site activities, the agency is scheduled for an ILEAC Board of Commissioners Review. If compliance issues remain unresolved, the agency may return to self-assessment to complete unfinished work or it may choose other options, e.g., appeal or voluntary withdrawal. (see Agency Preparation for On-site)

- 4. ILEAC Review:** The assessor's final report is forwarded to the ILEAC Accreditation Approval Committee for review and presentation to the ILEAC Board of Commissioners at one of its regularly scheduled Board of Commissioner meetings in April, August or November. The agency and its chief executive officer are invited to attend, although attendance is not required, the ILEAC Board of Commissioners meeting at which time, the ILEAC Commissioners review the final report and receive testimony from agency personnel, assessors, staff, or others. If satisfied that the agency has met all compliance requirements, ILEAC awards the agency state accreditation for a period of three years.
- 5. Maintaining Compliance, Re-Accreditation, and Re-Recognition:** To maintain accredited status, the accredited agency must remain in compliance with applicable standards. The agency submits annual reports to ILEAC, attesting to continued compliance and reporting changes or difficulties experienced during the year, including actions taken to resolve noncompliance issues.

ILEAC reserves the right to schedule interim hearings to consider continuing accredited status if noncompliance becomes a serious issue. At the conclusion of the three-year period, ILEAC offers the agency an opportunity to repeat the process and continue accredited status for another three year cycle.

The Standards

The standards state *what* must be accomplished by the agency, but generally allow wide latitude in determining *how* to achieve compliance with each applicable standard. This approach maintains agency independence and is the key to understanding the universal nature and flexibility of the standards. Compliance is never limited to a single means of achievement. Consequently, compliance should always be attainable.

Each standard is composed of the standard statement and the commentary. The *standard statement* is a declarative sentence that places a clear-cut requirement, or multiple requirements, on an agency. Many statements call for the development and implementation of written directives, such as general or special orders, standard operating procedures, or other

documented communication, which articulates the agency's policies, procedures, rules and regulations. Other standards require an activity, a report, an inspection, equipment or other action.

The *commentary* supports the standard statement but the commentary is not binding. The commentary can serve as a prompt, as guidance to clarify the intent of the standard or as an example of *one* possible way to comply with the standard. Since the agency has the latitude to determine "how" it will comply with applicable standards, and since the burden of proof to verify this compliance is also the responsibility of the agency, it can choose to ignore the commentary and comply with the standard on its own terms.

The standards are described according to the following types or categories: written directive, bulleted, conditional, linked, observation and activity required. One standard may contain several categories.

For example, the most prevalent standard category requires a *written directive*. In addition to requiring a policy, procedure or other activity, a "written directive" standard also imposes a responsibility on the agency to describe the standard requirement in writing.

A written directive is broadly defined as any written documentation that governs or directs the agency or its employees. Written directives may be internal to the agency, e.g., general orders, standard operating procedures, memoranda and labor contracts, or externally, e.g., state laws, case law, mutual aid agreements and city/county ordinances and procedures. The presence of written directives involves the added responsibilities of dissemination, training and supervision of affected personnel. The written requirement of the manufacturer for calibrating traffic radar, if adopted by the agency, is a written directive.

The written directive requirement by its very nature specifies documentation, which also fixes accountability on the agency and its personnel. Written directives, in part, ensure standardization and consistency in application.

Included under written directive standards are ones that present multiple requirements or *bulleted* subcomponents. An alphanumeric designator identifies each item or bullet. Compliance is required of each applicable bullet. Bullets that do not apply are treated individually as not applicable.

Conditional standards frequently use the word "if" to identify a condition. The presence of the condition makes the standard applicable. Its absence renders the standard not applicable. Another identifier is the phrase "in the absence of controlling legislation."

Linked standards relate one standard to another standard in the chapter; and *Observation* standards are identified by the phrase "Compliance may be OBSERVED" following the level of compliance designation. These standards may *generally* be verified visually, but some may also require additional documentation.

Activity required standards require that a specific activity occurs, such as a report, review, analysis, inspection, test, survey, audit and/or inventory. The activity may or may not require a written directive and many are *time sensitive* standards that require the activity to be accomplished at specific periods.