Independent Monitoring Report 12
Officer Wellness and Support
Compliance Assessments by Paragraph

Specific assessments, by paragraph, for the Officer Wellness and Support section are available here. This includes paragraphs where the City gained or lost compliance in the twelfth reporting period, as well as paragraphs with significant developments toward or away from compliance. A fuller description of the history of compliance efforts, methodologies, compliance determinations for each original monitorable paragraphs in the Officer Wellness and Support section is available in *Comprehensive Assessment Part I* (which included *Independent Monitoring Report 8*): https://cpdmonitoringteam.com/imr-8-1/.

Officer Wellness and Support: ¶381

381. *CPD will provide its members with a range of support services that comport with mental health professional standards and that seek to minimize the risk of harm from stress, trauma, alcohol and substance abuse, and mental illness. These support services will include: readily accessible confidential counseling services with both internal and external referrals; peer support; traumatic incident debriefings and crisis counseling; and stress management and officer wellness training.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Full:	***In Compliance*** **(NEW)**

The City and the CPD achieved Full compliance with ¶381 during the twelfth reporting period.

To assess Preliminary compliance for ¶381, the IMT reviewed the CPD's relevant policies and records. Specifically, we reviewed E06-01 *Professional Counseling Division*, which describes the services that the Professional Counseling Division (PCD) must provide for active and retired CPD members and their families. These services include a variety of programs: Alcohol and Substance Use Program, Peer Support Programs, Traumatic Incident Stress Management Program, and Employee Assistance Program (EAP). E06-01 addresses both how CPD members may access Professional Counseling Division services and the timelines within which members shall receive services.

To assess Secondary compliance, the IMT considered records demonstrating that the CPD has qualified personnel fulfilling the responsibilities required by ¶381 and whether the staff is sufficiently trained to provide the services required by the paragraph.

To assess Full compliance with ¶381 the IMT considered whether the CPD has sufficient methods for tracking, analyzing, and responding to CPD members' support needs regarding stress, trauma, alcohol and substance use disorders, and mental health issues for all CPD members, including both sworn and non-sworn personnel.

Specifically, the IMT reviewed the *2025 Officer Wellness Support Plan, the Officer Wellness 2025 Annual Report to the Superintendent,* and the *2025 Officer Wellness Needs Assessment Survey*. The data included in these productions is more robust than in past years, highlighting which support services outlined in ¶381 are most requested by CPD members, both in terms of prevalence and urgency. Of note, the

CPD has taken steps to provide a cadre of support services; made themselves available and accessible; provided confidential and free services; and made both internal and external referrals for such services that extend beyond the scope of what the PCD has the capacity to offer. The IMT recognizes the current data models help to support the steps currently taken to ensure a timely response to each request for related services and looks forward to continued data sharing in this space to identify any changes in response times. This demonstrates that the CPD has taken significant steps to enhance internal operations within the PCD, specifically to improve data collection, including for external services. The IMT also reviewed training materials addressing wellness and stress management, including the *2024 In-Service Supervisor Training*, which included these topics. *The Annual Audit of the Traumatic Incident Stress Management Program* demonstrates that while there is room for improvement, the CPD made traumatic incident debriefings as required by the text of ¶381, and various productions (including but not limited to the *Peer Support Materials* and the *Par. 404 Peer Support IMR-12 Submission*) illustrate the CPD is providing and soliciting feedback on its peer support services. The CPD continues to weave training on officer wellness throughout its training curriculum and provides stress management training to recruits in the *Recruit BLE Stress Management* training as required by ¶381.

To maintain Full compliance, the CPD must consistently conduct and produce audits of its PCD services to ensure that the CPD has allocated resources and has effective policies to meet the needs of its members. It will also need to sustain efforts to adapt its services to best suit those members, including using the results of the CPD's workforce allocation study.

Paragraph 381 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Secondary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Secondary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Full

Officer Wellness and Support: ¶383

383. *The needs assessment should analyze, at a minimum: a. staffing levels in CPD's Professional Counseling Division; b. the current workload of the licensed mental health professionals and drug and alcohol counselors employed by CPD; c. how long it takes CPD members requesting counseling services to be seen by a licensed mental health professional or drug and alcohol counselor; d. the professional specialties of CPD's licensed mental health professionals; e. the frequency and reasons for referrals of CPD members to clinical service providers external to CPD and the quality of those services; f. CPD member feedback, through statistically valid surveys that ensure anonymity to participants consistent with established Professional Counseling Division guidelines, regarding the scope and nature of the support services needs of CPD members and the quality and availability of services and programs currently provided through the Employee Assistance Program; g. similar mental health services offered in other large departments, including the ratio of licensed mental health professionals to sworn officers and the number of counseling hours provided per counselor per week; h. guidance available from law enforcement professional associations; i. the frequency and adequacy of CPD's communications to CPD members regarding the support services available to them; j. the frequency, quality, and demand for in-service trainings related to stress management, officer wellness, and related topics; and k. the quality of recruit training related to stress management, officer wellness, and related topics.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Secondary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Full:	***In Compliance*** **(NEW)**

The City of Chicago and the CPD achieved Full compliance with ¶383 during the twelfth reporting period.

To assess Preliminary compliance with ¶383, we determined whether the CPD allocated sufficient resources to conduct a needs assessment as required by this paragraph. To assess Secondary compliance, we evaluated whether the CPD had conducted the required needs assessment, which they completed and submitted for IMT review in 2023.

To assess Full compliance, the IMT evaluated the CPD's *2025 Officer Wellness Needs Assessment Summary Report*, which represents an updated needs assessment, in the form of a survey of CPD personnel inquiring about wellness needs. The *Summary Report* depicts that the CPD's Needs Assessment survey's findings in bar graphs; we note that the *Summary Report* sufficiently addresses the topic requirements in ¶384(a)–(k), with clearly marked sections of the report dedicated to each required topic. The IMT also reviewed the *Officer Wellness 2025 Annual Report to the Superintendent.*

The IMT also reviewed the CPD PCD's data collection processes and data points collected using the Column Case Management system, which is particularly relevant to ¶383(c).

The Column Case Management data system captures PCD service data including appointments, referrals, and whether appointments and referrals are made in a timely manner consistent with CPD policy and ¶381's requirement for "readily accessible confidential counseling services." The CPD stated that they would send Column Case Management data to the IMT for review in the third quarter of 2025. The IMT looks forward to reviewing this data.

To maintain Full compliance with the requirements of ¶383, the CPD must continue to conduct needs assessments that address all topics required by ¶383. The CPD has indicated it will continue conducting needs assessments every three years to support future *Officer Wellness Support Plans* (*see* ¶384–85).

Paragraph 383 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Secondary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Secondary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Full

Officer Wellness and Support: ¶384

384. *Within 60 days of the completion of the needs assessment, CPD will develop a plan, including a timeline for implementation, to prioritize and address the needs identified through the needs assessment required by the immediately preceding paragraph ("Officer Support Systems Plan"). CPD will implement the Officer Support Systems Plan in accordance with the specified timeline for implementation.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Under Assessment***

The City and the CPD achieved Secondary compliance with ¶384 and are under assessment for Full compliance during the twelfth reporting period.

To assess Preliminary compliance, the IMT assessed whether the CPD had developed an officer support systems plan to prioritize and address the needs assessment described in ¶383. To assess Secondary compliance, the IMT reviewed whether the CPD's *2025 Officer Wellness Support Plan* (*Support Plan*) addresses the findings of the needs assessment, as well as includes a timeline for implementation.

The *Support Plan* defines the PCD's mission, ongoing work, and established wellness goals. Notably, the findings of the *2025 Wellness Needs Assessment Summary Report* informed the *Support Plan*, identifying challenges officers face—such as inability to sleep and unpredictable schedules—and opportunities to reassess existing resources. The PCD effectively addressed these areas in the *Support Plan*, including timelines for implementing new or enhanced services and plans to measure outcomes.

The IMT appreciates the links between key survey results and specific actions within the *Support Plan*. The IMT looks forward to reviewing the CPD's implementation progress and ongoing efforts to achieve these goals.

To assess Full compliance, the IMT assessed that the *Officer Support Systems Plan* was implemented in accordance with the 60-day timeline outlined in ¶384. Additionally, the IMT reviewed the *Officer Wellness 2025 Annual Report to the Superintendent,* and various PCD EAP referral and accomplishment documents produced during the reporting period. These documents demonstrated that the CPD has developed and implemented a communications strategy, including informing CPD members about the support services available to them and the communication strategy around those efforts. The priority of wellness has been integrated on

many levels throughout the department, and it has been memorialized in the *Officer Support Systems Plan*.

Paragraph 383 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Secondary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶385

> ***385.*** *As a component of CPD's Officer Support Systems Plan, CPD will develop and implement a communications strategy. The objectives of this communications strategy will be: a. to inform CPD members of the support services available to them; b. to address stigmas, misinformation, or other potential barriers to members using these services; and c. to emphasize that supporting officer wellness is an integral part of CPD's operations.*

Compliance Progress (Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Secondary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Full:	***Under Assessment***

In the twelfth reporting period the City and the CPD are under assessment for Full Compliance for ¶385.

To assess Preliminary compliance, the IMT reviewed whether the CPD had a sufficient plan to develop and implement a communications strategy per ¶385. To assess Secondary Compliance, the IMT reviewed data and gathered information to determine whether the communications strategy, when put into practice, would be sufficient to meet the objectives of ¶385.

To assess Full compliance, the IMT assessed whether the CPD has implemented a communications strategy that effectively disseminates information regarding support services, dispels misinformation, and emphasizes the CPD's commitment to wellness for both sworn and nonsworn personnel. The IMT also considered whether the CPD was continuously assessing its communications strategy and adjusting as appropriate. Specifically, the IMT reviewed the *2025 Officer Wellness Support Plan* (which is the CPD's title for the required *Officer Support Systems Plan)* and the *2025 Officer Wellness Communications Strategy.*

In the twelfth reporting period, the City and the CPD have demonstrated their implementation of the required communications strategy.

As reflected in the *2025 Officer Wellness Support Plan,* wellness training materials now frequently include direct messaging from the Superintendent, reflecting a strategic, top-down prioritization of employee wellness. These efforts aim to reduce stigma by consistently reinforcing the importance of officer and employee wellness. The CPD delivers regular, timely, and accurate wellness information

through palm cards, announcements, information boards, roll calls, and training sessions.[1]

During the twelfth reporting period, the IMT observed a wellness training class and acknowledge the instructors' thorough understanding of the material. The introduction of Officer Wellness Liaisons further enhances the CPD's ability to communicate effectively about wellness services.

Maintaining a sustained focus on wellness priorities, communicated effectively to sworn members, civilians, recruits, and their families, remains essential. The IMT looks forward to reviewing continued implementation and progress on CPD's *Officer Wellness Communications Strategy*.

Paragraph 385 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Secondary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Secondary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Secondary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

[1] However, ¶385 explicitly requires implementation of the communication strategy. Though mentioned in the 2025 Officer Wellness Communications Strategy during the twelfth reporting period, some steps have not yet been implemented, and therefore, relevant data could not be evaluated to support Full compliance. For example, the strategy states that "Intranet Posting," a portion of the strategy aimed at enhancing wellness initiatives through enhanced communications, will "begin in the first quarter of 2026 and continue [every quarter] throughout the year." Similarly, Roll Call presentations on the Cordico Wellness App will not begin until the first quarter of 2026. As the IMT has previously noted, without evaluating whether these and other aspects of the strategy are implemented in the future, the IMT cannot determine whether the requirements of ¶385 have been met. IMT looks forward to reviewing further productions which demonstrate the full implementation of these portions of the strategy, as well as evidence that the CPD is evaluating both the impacts of the strategy on officer wellness and its own adherence to the strategy's recommendations.

Officer Wellness and Support: ¶386

386. *As part of this communications strategy, CPD will, at a minimum: a. make information about the support services available, on a continuing basis, to members on its internal websites; b. post information, including pamphlets and posters, in each CPD facility in areas frequented by officers; c. issue wallet-sized cards to every CPD member with contact information for the CPD support services available; d. inform and remind members about the CPD support services offered, including providing handouts with contact information, at the annual use of force training required by this Agreement, during Academy training of new recruits, and at in-service trainings relating to stress management and officer wellness; e. provide training to supervisory personnel regarding available CPD officer support services and strategies for communicating with officers about these services in a manner that minimizes any perceived stigma; and f. seek to identify and correct misperceptions among CPD members about receiving counseling services.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Secondary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Full:	***Under Assessment***

The City and CPD maintained Secondary compliance with ¶386 during the twelfth reporting period and are under assessment for Full compliance.

To assess Preliminary and Secondary compliance with ¶386, we reviewed the CPD's relevant policies and documents following the process described in the Consent Decree (¶¶626–41), which outlines applicable consultation, resolution, workout, and public comment periods. We also considered the CPD's training development, implementation, and evaluation. We considered whether the CPD developed a plan to comply with ¶386 and whether the plan would be effective when implemented. Specifically, we reviewed previous *Officer Support Systems Plans* which included plans for communicating support services to in-service members, recruits, retired members, and family members. We also reviewed roll-call trainings, online resources, suicide awareness and prevention videos, and eLearning modules which reflected an earnest commitment to disseminate thorough and accurate information regarding support services.

Despite having completed a robust communications strategy as required by ¶386, in previous reporting periods the IMT has maintained that without reliable data from the needs assessment required by ¶382, it was difficult for the IMT to determine the effectiveness of the communication strategy.

To assess Full compliance, we reviewed whether the CPD sufficiently continues efforts in outreach and communication to increase and maintain awareness of

PCD services for both sworn and non-sworn personnel by reviewing both qualitative and quantitative data including interviews of personnel at all ranks to determine awareness and officers' perceived ease of access to information.

Specifically, we reviewed emails, CPD's internal webpage The Wire, newsletters, the Cordico Wellness app, memoranda, and Superintendents messages to inform CPD members and their families about available wellness programs and services.

Going forward, we understand that the CPD plans to develop specific scripts and talking points, expanding the watch operations lieutenants' role in reducing stigma, correcting misinformation, and engaging directly with CPD members. These efforts include distributing palm cards, posting placards, conducting roll-call visits, and disseminating written announcements to emphasize wellness priorities and strategies.

The effectiveness of the CPD's communication efforts was clearly demonstrated in the *2025 Needs Assessment Summary Report*, which highlights member awareness of support services.

The IMT acknowledges the CPD's partnership with the University of Chicago, which provides an excellent opportunity to establish benchmarks for future comparative analysis. This comparative capability will be particularly valuable given the newly developed questions included in the *2025 Needs Assessment Survey*. This demonstrates the PCD's commitment to creating a robust and statistically valid survey tool.

Additionally, the CPD developed wellness training courses specifically for (a) supervisors, both sworn and civilian, and (b) recruits. While recognizing the challenge of identifying and correcting misperceptions, the IMT encourages continued emphasis on varied communication methods. Written materials, roll-call discussions, and direct interpersonal engagement offer members valuable opportunities to ask questions and obtain accurate information from subject matter experts with the PCD.

The IMT looks forward to reviewing the CPD's ongoing implementation and regular updates on its *Officer Wellness Communications Strategy*, including progress toward goals and any setbacks.

Paragraph 386 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
None

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
Secondary

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Secondary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Secondary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Secondary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Secondary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Secondary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Secondary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Secondary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Secondary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Secondary

Officer Wellness and Support: ¶388

388. *As a component of the Officer Support Systems Plan, by January 1, 2020, CPD will develop and implement a comprehensive suicide prevention initiative ("Suicide Prevention Initiative"). In designing the Suicide Prevention Initiative, CPD will examine similar initiatives implemented in other large departments and incorporate guidance available from law enforcement professional associations. The Suicide Prevention Initiative will be overseen by a licensed mental health professional working in conjunction with a command staff member.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

The City and the CPD achieved Secondary compliance with ¶388 during the twelfth reporting period.

To assess Preliminary compliance with ¶388, the IMT reviewed previous versions of the *Officer Wellness Support Plan* to determine whether it effectively addressed and planned to implement a suicide prevention initiative. We also considered the CPD's communications regarding expanded Employee Assistance Program services, and drafts of the Traumatic Incident Stress Management Plan (TISMP) directive. Recognizing this, the CPD worked to create a holistic wellness program to address the underlying concerns of ¶388. This holistic approach took the place of a stand-alone suicide prevention initiative, which is appropriate because death by suicide is a complicated outcome rooted in factors still poorly understood.

To assess Secondary compliance, we determined whether the *2025 Officer Wellness Support Plan's Wellness Suicide Prevention Strategy* was sufficient to implement a holistic wellness approach to suicide prevention that acknowledged the challenges previously noted. We also assessed whether the data regarding the utilization and provision of services demonstrated that the *Wellness Suicide Prevention Strategy* was sufficient to address the needs of CPD members related to suicide prevention if implemented.

To date, the CPD has produced three iterations of suicide prevention initiatives. Most recently, during the twelfth reporting period, the CPD produced the *2025 Wellness Suicide Prevention Strategy* (also referred to as the *2025 Suicide Prevention Strategy*), a more comprehensive model. This third iteration outlines a clear plan aimed at preventing deaths by suicide and affirms the CPD's ongoing commitment to evaluating and enhancing its approach. The *Strategy* includes efforts to promote mental health and wellness, explore innovative practices, and strengthen system-wide support. The IMT appreciates the CPD's efforts to reassess and align

its strategies, policies, and practices toward a unified, holistic approach to officer suicide prevention and employee wellness.

To achieve Full compliance the CPD must provide sufficient data to demonstrate implementation of the *2025 Suicide Prevention Strategy*.

Paragraph 388 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶389

389. *At least annually, the Director of the Professional Counseling Division will provide a written report to the Superintendent, through his or her chain of command, that includes anonymized data regarding support services provided to CPD members, how long it takes CPD members requesting counseling services to receive them, and other metrics related to the quality and availability of these services. This report will also contain resource, training, and policy recommendations necessary to ensure that the support services available to CPD members reasonably address their identified needs and comply with the Officer Support Systems Plan.*

Compliance Progress (Reporting Period: January 1, 2025, through June 30, 2025)

Recurring Schedule: At Least Annually ☑ **Met** ☐ **Missed**

Preliminary: ***In Compliance*** **(TENTH REPORTING PERIOD)**
Secondary: ***In Compliance*** **(NEW)**
Full: ***Not Yet Assessed***

The City and the CPD achieved Secondary compliance with ¶389 during the twelfth reporting period.

To assess Preliminary compliance with ¶389, the IMT reviewed the CPD's relevant policies to determine whether they require the Director of the Professional Counseling Division (PCD) to provide a written report to the Superintendent that incorporates the data required by this paragraph. Specifically, we reviewed *Standard Operating Procedure 19-01* and *CPD Directive E06-01 Professional Counseling Division*, which includes this requirement.

To assess Secondary Compliance, we assessed whether the CPD has allocated sufficient resources to submit the required annual report that includes this paragraph's requirements for anonymized data, time to receive services, and recommendations regarding support services.

During this reporting period the IMT reviewed the CPD's *2025 Annual Report to the Superintendent*. This report represented a more comprehensive and informative report compared to prior submissions. The report demonstrates that the CPD has allocated enough resources, including much needed improvements in technology and data tracking systems, to produce the annual report with the detail ¶389 requires.

Paragraph 389 requires the CPD to report on both timeliness and quality of its wellness services. The CPD addressed service quality in part through the *2025 Needs Assessment Survey*. While this survey provides valuable insights, the IMT notes its limitations, particularly as it may not capture feedback from all direct consumers of PCD services. To address this gap, the PCD plans to implement a QR

code feedback system for CPD members who receive services. This tool is expected to generate timely, service-specific responses that can supplement survey data and align with newly captured scheduling timestamps from the CPD's Column Case Platform. This data may be used to enhance the next annual report to the Superintendent.

To achieve Full compliance, the CPD must provide integrated data that reflect both timeliness and quality of services. The IMT anticipates the release of Column Case metrics in the third quarter of 2025, along with data from the QR code tool, to provide a more accurate and real-time picture of service delivery.

Paragraph 389 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: None	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: None	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: None
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: None	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: None	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: None
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶391

391. *CPD will initially increase the staffing level in its Professional Counseling Division to at least ten full-time licensed mental health professionals (or a combination of full- and part-time licensed mental health professionals capable of providing an equivalent amount of weekly clinical therapy hours) by January 1, 2020. CPD may contract with licensed mental health professionals external to CPD on an interim basis while CPD completes the process for creating these new positions and hiring individuals to fill them. Additional changes to staffing levels will be made consistent with the results of the needs assessment and Officer Support Systems Plan.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(SECOND REPORTING PERIOD)**
Secondary:	***In Compliance*** **(THIRD REPORTING PERIOD)**
Full:	***In Compliance*** **(NEW)**

The City and the CPD achieved Full Compliance with ¶391 during the twelfth reporting period.

To assess Preliminary compliance, we determined whether the CPD increased its staffing levels, including external contractors and considered additional changes to staffing to meet best practice standards identified in the needs assessment. To assess Secondary compliance, we considered whether the CPD had sustainably staffed and developed the PCD without the need for external contractors.

To assess Full compliance, we assessed whether the CPD has changed staffing levels consistent with the results of the *2025 Needs Assessment Survey, the 2025 Wellness Needs Summary Report,* and the *2025 Officer Wellness Support Plan.* We also assessed whether staffing levels and assignments are regularly appraised, maintained—and if insufficient—addressed. We also assessed whether those staffing processes are informed by a fully implemented software solution to adequately track necessary data to determine if staffing resources are sufficient to meet demand for services.

As of the end of this reporting period, the CPD's Employee Assistance Program website[2] lists 19 "clinical therapists" – well beyond the ten required by this paragraph. The CPD has indicated its goal of having one therapist assigned to each of the CPD's 22 Districts which follows the recommendations of the LA Model. The IMT appreciates this growth and understands the structured process in place for submitting NOJOs to support continued unit growth given the current obstacles in hiring. With the department-wide workforce allocation study currently underway,

[2] *Employee Assistance Program (EAP)*, CHICAGO POLICE DEPARTMENT (last visited July 30, 2025), https://www.chicagopolice.org/employee-assistance-program-eap/.

the IMT looks forward to recommendations that inform not only future staffing needs but also the methodology for determining appropriate staffing levels.

To maintain Full Compliance, the CPD must continue to produce supporting documentation, including staffing numbers, referral data, *Needs Assessment Surveys*, workforce studies, and *Officer Support Systems Plans*.

Paragraph 391 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Preliminary	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Secondary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Secondary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Secondary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Full

Officer Wellness and Support: ¶393

393. *In order to provide support services that are culturally appropriate, sensitive to differing circumstances, and attentive to the issues facing all CPD members, including, but not limited to, women, people of color, religious minorities, and LGBTQI individuals, CPD will ensure that: a. the licensed mental health professionals and counselors employed by CPD are trained and equipped to provide services in a manner respectful of these diverse experiences and perspectives; b. CPD members receiving services have the opportunity to provide feedback regarding whether such services are culturally appropriate and adapted to diverse experiences and perspectives; and c. appropriate corrective action is taken to the extent necessary based on feedback received.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Full:	***Under Assessment***

The City and the CPD are under assessment for Full compliance with ¶393 during the twelfth reporting period.

To assess Preliminary compliance, we reviewed relevant policies and documents to determine whether CPD memorialized its requirement to provide culturally appropriate support services, provide CPD members with the opportunity to give feedback, and implement that feedback per ¶393(a)–(c). To assess Secondary Compliance, we reviewed whether the CPD had qualified and diverse personnel who were trained to address the wellness needs and concerns of a diverse population.

Specifically, we reviewed the then-current version of the *Officer Wellness Support Plan*, which includes information about PCD staff. The plan demonstrated that PCD staff were diverse and experienced with a variety of populations. Furthermore, the plan showed that PCD had established support groups to better provide care for different groups within the CPD, which were developed based on surveys of command staff and patrol officers, as well as in-service seminars. Finally, the plan laid out expectations for the training and development of officer wellness initiatives sensitive to the diverse members of the CPD and the community. The IMT acknowledges that beginning in 2025, Illinois Public 103-0531 required health care professionals to complete one hour of cultural competency training to renew their licensure. However, is it not clear that one hour of cultural competency training is

sufficient to equip a professional to meet the unique needs of the diverse and varied membership of the CPD. Additionally, since the law is effective only as of January 2025, it is possible, and in fact likely, that licensed mental health professionals and counselors are licensed but would not yet have completed this training. Therefore, licensure as a health professional in Illinois is not dispositive at this time of whether the mental health professionals and counselors employed by the CPD are sufficiently trained and equipped as required by subparagraph (a) of ¶393.

To assess Full compliance, the IMT considered whether the CPD has sufficient resources in place to provide support services that are culturally appropriate for all CPD members, sworn and non-sworn.

During the twelfth reporting period, the CPD employed credentialed counselors with training and certifications designed to provide culturally competent services and the *2025 Needs Assessment Survey* captured CPD member perceptions regarding cultural diversity among staff. While not *all* respondents were direct consumers of PCD services, their feedback aligns with the requirements of ¶393(b).

However, ¶393(b) requires input from members who have directly received PCD services. To address this requirement, the CPD has taken steps to develop a QR code survey tool to collect real-time feedback from services recipients. The IMT reviewed draft QR code questions during the twelfth reporting period and anticipates the tool's implementation in the thirteenth reporting period. The CPD also noted that members will be able to provide feedback on Quiet Rooms and gym facilities through this platform.

Finally, ¶393(c) requires the CPD to take "appropriate corrective action" in response to the feedback it receives. The CPD must demonstrate how this feedback is reviewed and how corrective actions are determined. The IMT looks forward to assessing future progress toward Full Compliance as these mechanisms are implemented and evaluated.

Therefore, the City and the CPD have maintained Secondary compliance and are under assessment for Full compliance with ¶393. To achieve Full compliance, the CPD must demonstrate compliance with the requirements of ¶393(b) and (c).

Paragraph 393 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
None

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
None

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Secondary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Secondary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Secondary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Secondary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
None

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
None

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Secondary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Secondary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Secondary

Officer Wellness and Support: ¶394

394. *CPD will offer members referrals for counseling services by external clinical service providers, including, but not limited to, private therapists, specialists, outside agencies, or hospitals, when a member requires specialized counseling that is beyond the training and expertise of CPD's licensed mental health professionals or certified counselors.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary: ***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary: ***In Compliance*** **(TENTH REPORTING PERIOD)**
Full: ***In Compliance*** **(NEW)**

The City and the CPD achieved Full compliance with ¶394 during the twelfth reporting period.

To assess Preliminary Compliance, the IMT reviewed the CPD's policies to determine whether the CPD had memorialized its requirement to provide counseling services through external referrals for members requiring "specialized counseling that is beyond the training expertise of CPD's licensed mental health professionals or certified counselors."

To assess Secondary compliance, we assessed whether the CPD had sufficient data collection methods to evaluate whether the CPD was providing external referrals to members. Specifically, the IMT reviewed anonymized CPD data and documentation demonstrating efforts to improve its data collection.

To assess Full compliance, the IMT assessed whether the CPD was sufficiently offering sworn and non-sworn members referrals to external clinical providers for specialized counseling when necessary. During the twelfth reporting period, the IMT reviewed documentation demonstrating that members were referred to external providers when cases exceeded the scope of internal services or required long-term or ongoing treatment. The data provided included PCD statistics for March and April 2025, as well as EAP referral data from January to March 2025. During that first quarter of 2025, the CPD had fifty-three external clinician referrals, and 90 referrals to alcohol and drug counselors. In addition, the Director of PCD services conducted site visits to external referral facilities, both in and out of state, to ensure appropriate standards of care. The CPD has begun to routinely collect data on external referrals, which are provided to the IMT monthly.

Therefore, the CPD achieved Full compliance with ¶394 in the twelfth reporting period. To maintain Full compliance, the CPD must provide reliable and valid data on external referrals, rather than charts presented on the monthly calls to the IMT and OAG.

Paragraph 394 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
Not Applicable

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
Not Applicable

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Preliminary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Secondary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Secondary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Full

Officer Wellness and Support: ¶395

395. *CPD will ensure that CPD members have access to: a. non-emergency, generalized counseling sessions with CPD's licensed mental health professionals within two weeks of a member's request; and b. generalized emergency counseling by CPD's licensed mental health professionals within 24 hours of a member's request.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

The City and the CPD achieved Secondary compliance with ¶395 during the twelfth reporting period.

To assess Preliminary compliance with ¶395, we reviewed the CPD's relevant policies and documents showing that the CPD memorialized its requirement to provide non-emergency and emergency counseling in the timeframes outlined by (a) and (b) of ¶395. Specifically, the IMT reviewed *Professional Counseling Division* directive (E06-01) and Standard Operating Procedure 19-01 (19-01). These detail CPD's established on-call system in which a licensed clinician is available twenty-four hours a day to respond to crises and traumatic incidents, and that non-emergency counseling sessions would be held within two weeks of a members request as required by ¶395.

To assess Secondary compliance, the IMT reviewed data sources and considered the data PCD is collecting to ensure that they are collecting the data elements necessary (i.e., timeframes) to identify, verify and sustain reform efforts. The newly implemented case management platform, Column Case, offers the capability to track clinician activity, appointment scheduling, and reasons for delays when services fall outside the two-week window (¶395(a)).

The PCD has not yet provided sufficient evidence to demonstrate consistent adherence to the two-week requirement for non-emergency services but is working toward complying with this requirement. The IMT looks forward to reviewing data from Column Case during the next reporting period.

Therefore, the City and the CPD achieved Secondary compliance with ¶395 during the twelfth reporting period.

Paragraph 395 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
Not Applicable

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
Not Applicable

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Preliminary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Preliminary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Preliminary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Full

Officer Wellness and Support: ¶398

398. *CPD currently employs five drug and alcohol counselors, all of whom are sworn CPD officers operating under the supervision of the Director of the Professional Counseling Division. These counselors provide free counseling for alcohol and substance abuse. CPD will continue to offer counseling services to CPD members for alcohol and substance abuse.*

Compliance Progress

(Reporting Period: July 1, 2024, through December 31, 2024)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(ELEVENTH REPORTING PERIOD)**
Full:	***In Compliance*** **(NEW)**

The City and the CPD achieved Full compliance with ¶398 during the twelfth reporting period.

To assess Preliminary compliance, the IMT reviewed the CPD's relevant policies and directives regarding how the CPD provides drug and alcohol treatment services. Specifically, we reviewed E06-01 *Professional Counseling Division*, which requires PCD counselors to hold regularly scheduled anonymous meetings, support groups, and programs for members, their families, and retired members. E06-01 also outlines the required credentials of the sworn officers providing the services and requires the PCD director to conduct a review of each program to ensure they adhere to generally accepted practices in the field of addiction and treatment.

To assess Secondary compliance, we reviewed anonymized CPD data demonstrating drug and alcohol services provided. We also assessed whether the CPD continued to employ qualified personnel to provide drug and alcohol services.

In the eleventh reporting period, the City and the CPD submitted the *PCD EAP Accomplishment and Activities Month-to-Month Trend Analysis of EAP Services Usage (Q2 April 2024 – June 2024)*. This report demonstrates the continued provision of counseling services regarding drugs and alcohol to CPD members. Additionally, we reviewed the *03 June 2025 Officer Wellness Slide Deck*, which showed that the CPD had served over four thousand four hundred CPD members and members of their family year-to-date.

To assess Full compliance, the IMT determined that the CPD actively worked to maintain the number of drug and alcohol counselors necessary to serve its sworn and non-sworn members. Specifically, we reviewed the *Staff Listings of Alcohol and Drug Counselors with Certifications*, which contained the certifications of two drug alcohol counselors joining the PCD. We also note that as of the writing of this

report, the CPD's Employee Assistance Program website[3] lists five "Alcohol and Substance Abuse Counselors and Staff" which is the number of staff required by this paragraph.

Paragraph 398 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Not Applicable
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Full

[3] *Employee Assistance Program (EAP)*, CHICAGO POLICE DEPARTMENT (last visited July 30, 2025), https://www.chicagopolice.org/employee-assistance-program-eap/.

Officer Wellness and Support: ¶399

399. *CPD will ensure the number of drug and alcohol counselors available, either on staff or through referrals, meets the needs of CPD members consistent with the needs assessment and the Officer Support System Plan.*

Compliance Progress (Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary: ***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary: ***Under Assessment***
Full: ***Not Yet Assessed***

The City and the CPD are under assessment for Secondary compliance with ¶399 in the twelfth reporting period.

To assess Preliminary compliance, we reviewed policies and documents which demonstrate the CPD has developed a sufficient plan to ensure that staffing of drug and alcohol counselors is sufficient to meet the needs of CPD members as outlined in the needs assessment and *Officer Support Systems Plan*. Specifically, we reviewed *Professional Counseling Division* directive (E06-01), which sets requirements for counselors to track their activities and deployed resources.

To assess Secondary compliance, we determined whether the CPD has sufficient data to demonstrate that the CPD's staff of drug and alcohol counselors meet the needs of CPD members. We look forward to reviewing data from PCD's implementation of the Column Case Management system in the next reporting period.

During the twelfth reporting period, the CPD conducted a *Needs Assessment Survey*, which included several questions related to services provided by drug and alcohol counselors. It is important to note that not all survey respondents were direct recipients of PCD services. The CPD plans to conduct a more targeted and valid assessment of these services with the implementation of a QR code feedback tool designed to collect responses from those who have received PCD support directly.

According to the *Needs Assessment Survey Summary Report* (p. 43), 39% of respondents reported being moderately satisfied with services, while 26% expressed lower levels of satisfaction ('a little' or 'not at all'). The CPD has acknowledged this feedback as an opportunity to improve service delivery and communication. Additionally, during the twelfth reporting period, the CPD added a new position to the Drug and Alcohol Unit, signaling a commitment to strengthening the unit's capacity. As of the writing of this report, the CPD's Employee Assistance Program website[4] lists five "Alcohol and Substance Abuse Counselors and Support Staff." How-

[4] *Employee Assistance Program (EAP)*, CHICAGO POLICE DEPARTMENT (last visited July 30, 2025), https://www.chicagopolice.org/employee-assistance-program-eap/.

ever, the implementation of the QR Code feedback tool, the results of the upcoming workforce allocation study, and the continued efforts by the CPD to improve both service delivery and communication are essential when determining Secondary compliance.

The CPD is under assessment for Secondary compliance in the twelfth reporting period for ¶399. To assess Full Compliance, the IMT will monitor the implementation of the *Officer Support System Plan,* and review how real-time QR code feedback is used in conjunction with survey results to guide service improvements—whether through direct staff support or appropriate referrals.

Paragraph 399 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Not Applicable
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Preliminary

Officer Wellness and Support: ¶402

402. *CPD will train all supervisors regarding recognizing signs and symptoms of alcoholism and substance abuse, how to recommend available support services to CPD members experiencing alcoholism and substance abuse issues, and their obligations under CPD policy to report members exhibiting signs of alcohol or drug impairment.*

Compliance Progress

(Reporting Period: July 1, 2024, through December 31, 2024)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(ELEVENTH REPORTING PERIOD)**
Full:	***In Compliance*** **(NEW)**

The City and the CPD achieved Full compliance with ¶402 in the twelfth reporting period.

To assess Preliminary compliance, we reviewed policies and documents to determine whether the CPD has memorialized these requirements. Specifically, we reviewed E06-01 *Professional Counseling Division* directive, which requires that supervisors be trained regarding the signs and symptoms of alcohol and substance abuse and recommending appropriate support services. Further, it requires supervisors to make referrals when they observe members "exhibiting unusual behavior" and clarifies that "supervisory personnel have the authority and the responsibility to make members under their supervision aware of the EAP when appropriate."

To assess Secondary compliance, we determined whether CPD's training courses were sufficient to effectively educate supervisors on the topics outlined in ¶402; these topics were included in the *2024 In-Service Supervisor Training*. We also reviewed attendance records demonstrating that all supervisors attended these trainings, both sworn and non-sworn.

To assess Full compliance, the IMT determined whether the CPD sufficiently trains and provides ongoing education to supervisors regarding recognizing signs of alcohol and substances abuse and how to effectively address related issues.

In the twelfth reporting period, the IMT reviewed the CPD's revised Wellness curriculum included in the *2025 In-Service Supervisors* training to incorporate content specific to supervisor recognition of alcohol and substance use and required actions.

To maintain Full compliance, the CPD must continue to sufficiently train supervisors on the requirements of ¶402.

Paragraph 402 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
Not Applicable

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
Not Applicable

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Preliminary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Preliminary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Secondary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Full

Officer Wellness and Support: ¶404

404. *CPD will maintain a peer support program, ensuring that: a. a licensed mental health professional assigned to the Professional Counseling Division oversees and adequately manages the program; b. Peer Support Officers receive initial training in stress management, grief management, officer wellness, obligations and limitations regarding confidentiality and privacy, communication skills, common psychological symptoms and conditions, suicide assessment and prevention, dependency and abuse, and support services available to CPD members; c. Peer Support Officers are trained to recommend the services offered by the Professional Counseling Division in situations that are beyond the scope of their training; d. CPD offers Peer Support Officers the opportunity to meet at least annually to share successful strategies and identify ways to enhance the program; e. Peer Support Officers receive and comply with a written procedures manual approved by a licensed mental health professional assigned to the Professional Counseling Division; f. Peer Support Officers are offered sufficient non-monetary incentives and recognition to ensure broad recruitment of volunteers and widespread access to peer support services; and g. the scope and quantity of peer support services provided to CPD members are identified in a manner that facilitates effective management of the program and that preserves the anonymity and confidentiality of members receiving peer support services.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary: ***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary: ***In Compliance*** **(NINTH REPORTING PERIOD)**
Full: ***In Compliance*** **(NEW)**

The City and the CPD achieved Full compliance with ¶404 during the twelfth reporting period.

To assess Preliminary compliance with this paragraph, we considered whether the CPD had allocated sufficient resources to maintain the peer support program, whether the CPD offers Peer Support Officers the opportunity to meet at least annually to share strategies and enhance the program and we reviewed E06-01 *Professional Counseling Division.* To evaluate Secondary compliance, we determined whether the CPD had made significant progress towards producing data and trainings that were relevant to requirements (a)–(g) of ¶404 by reviewing the *Peer Support Program Suite*, which provided records demonstrating compliance with subparagraphs (a) through (g).

To assess Full compliance, we evaluated whether the CPD has fully implemented the requirements of the peer support program as required by ¶404 and whether the CPD had allocated sufficient resources to make that implementation sustainable.

The CPD had previously satisfied the subparagraph requirements of ¶404; however, data related to peer support activity, measured during the eleventh reporting

period, had not been captured until that time. That information is now being collected regularly, alongside other PCD data and records.

Subparagraph	CPD efforts Demonstrating Compliance
(a)	Director of PCD's résumé as of April 2025
(b)	• 2024 8-Hour Peer Support Refresher Training Lesson Plan • 2024 8-Hour Peer Support Refresher Training PowerPoint • 2024 Peer Support Refresher Post-Test Questions • Attendance records for 2024 Peer Support Refresher Training
(c)	
(d)	• 2025 Peer Support Team Leader Meeting Attendance and Agenda from March 2025
(e)	Peer Support Solutions (PSS), LLC Training Manual
(f)	Peer Support Awards May 2024 – March 2025
(g)	• Attendance records for 2024 Peer Support Refresher Training • 2025 Peer Support Team Leader Meeting Attendance and Agenda from March 2025 • Select Peer Support Contact Forms, February-April 2025

The IMT appreciates the CPD's efforts to achieve Full compliance and reminds the CPD of the need to establish a sustainment plan to ensure continued adherence to all requirements of ¶404 moving forward.

Paragraph 404 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
Not Applicable

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
Not Applicable

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Preliminary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Secondary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Secondary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Secondary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Full

Officer Wellness and Support: ¶406

406. *By January 1, 2020, CPD will develop and adopt a standard operating procedure ("SOP") outlining the roles and responsibilities of the Chaplains Unit. The Chaplains Unit SOP will identify that: a. the purpose of the Chaplains Unit is to: i. support the wellness of CPD members who voluntarily seek consultation with representatives of the Chaplains Unit; ii. make referrals to licensed mental health professionals and other service providers, when appropriate; iii. provide pastoral care to CPD members who voluntarily seek such services; iv. offer voluntary preventive programs for the purposes of supporting, encouraging, and affirming CPD members in their professional and family lives; and v. provide support in moments of crisis as requested by CPD members. b. when acting in the official capacity of a CPD Chaplain, representatives of the Chaplains Unit will refrain from actions or statements that are inconsistent with CPD policy. c. representatives of the Chaplains Unit, including CPD members and non-CPD members, will receive training regarding the roles and responsibilities of the Chaplains Unit.*

Compliance Progress (Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary: ***In Compliance*** **(SECOND REPORTING PERIOD)**
Secondary: ***In Compliance*** **(THIRD REPORTING PERIOD)**
Full: ***In Compliance*** **(NEW)**

The City and CPD achieved Full Compliance with ¶406 during the twelfth reporting period.

To assess Preliminary compliance, we assessed whether the City and the CPD developed an SOP outlining the requirements of the Chaplains Unit as required by ¶406. Specifically, we reviewed SOP 20-01 *Police Departments Chaplains Unit,* which addresses the purpose of the unit as required by (a), describes the services it offers, and outlines roles and responsibilities of members of the unit.

To assess Secondary compliance, we reviewed the CPD's training materials to determine whether the training is sufficient to train representatives of the Chaplains Unit as required by subparagraph (c) of ¶406.

To assess Full compliance, we determined whether the CPD has sufficiently implemented its policy and training. We also assessed whether the Chaplains Unit is operating in a manner consistent with the policy and training and determined by reviewing training records, referral records, and numbers of CPD members served, which demonstrates Full compliance with the requirements of ¶406.

The IMT notes that moving forward, as with other staffing decisions, we expect a clear explanation of the methods used to assess and justify the need for additional positions, including chaplains. While we recognize that the Workforce Allocation study is underway, establishing a consistent, data-informed process to determine

staffing needs is essential to ensure the CPD can effectively meet member demands for services. The IMT looks forward to further discussion and a routine demonstration of how staffing levels are evaluated and requested.

Paragraph 406 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Preliminary	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Secondary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Secondary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Secondary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Full

Officer Wellness and Support: ¶407

407. *CPD will continue to require that whenever a CPD member has experienced a duty-related traumatic incident, the member must attend counseling with a licensed mental health professional. The Director of the Professional Counseling Division or his or her designee will be responsible for documenting that a CPD member has attended the mandatory counseling and has completed the requirements of the Traumatic Incident Stress Management Program prior to the member returning to regular duty assignment. CPD will require any CPD member who has experienced a duty-related traumatic incident, unless medically unable to do so, to meet with a licensed mental health professional within seven days of the incident, and will ensure that it has an adequate staff of licensed mental health professionals who can accommodate this timing requirement.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

The City and the CPD achieved Secondary compliance with ¶407 during the twelfth reporting period.

To assess Preliminary compliance, we assessed the CPD's policies and documents to determine whether the CPD's policies were sufficient to ensure that members who experience traumatic incidents would receive counseling as required by ¶407. Specifically, we reviewed E06-03 *Traumatic Incident Stress Management Program*, which identifies the types of incidents for which members are referred to counseling, and determines deadlines for how soon a member experienced an enumerated incident must receive their initial counseling session.

To assess Secondary compliance, we determined whether CPD has created a mechanism that systematically identifies members (sworn and non-sworn) involved in traumatic incidents as defined by Sections III.A-III.C. of E06-03, *Traumatic Incident Stress Management Program*. We also determined whether the CPD has sufficiently trained watch operations lieutenants, tactical lieutenants, and all relevant supervisors regarding their duties to refer members (sworn and non-sworn) to the *Traumatic Incident Stress Management Program* as outlined in Directive E06-03.

The IMT also reviewed the CPD Audit Division's *Annual Audit of the Traumatic Incident Stress Management Program*, which relied upon data between January 2024 and December 2024 (the audit was completed in May 2025). The IMT continues to express concern over recurring procedural gaps that compromise the trauma-informed approach required for individuals exposed to traumatic events. These lapses, if unaddressed, may pose risks to both individual employees and the

agency. Given the unpredictable nature of trauma exposure, consistent adherence to trauma-informed protocols is essential.

The CPD currently relies on the CPD Audit Division's annual audit to identify deficiencies in policy implementation, notably in identifying all members who have experienced a traumatic incident and thereby must be referred to participate in TISMP. However, the cadence of these annual audits may delay necessary interventions. Moreover, the CPD has not acted upon the Audit Division's recommendations for improvement. The 2024 Audit Division's report on TISMP states:

> *As described in the findings below, while the Department is in compliance with some aspects of E06-03, and while improvements in other areas were made relative to last year's annual audit, continued improvements are required to bring the Department into full compliance. The Audit Division maintains that the implementation of recommendations made in previous years' audits would help close the ongoing gaps in compliance. As such, this report does not include new recommendations.*

To achieve Full Compliance, the CPD must implement the recommendations of the Audit Division and a consistent and timely schedule of interim checks, reviews, and oversight. The CPD must also document how deficiencies in identifying members who require TISMP participation have been addressed by specifying the corrective steps were implemented. The IMT looks forward to reviewing these processes as they develop.

Paragraph 407 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: None
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶408

408. *In addition to providing mandatory initial consultations and additional consultations as appropriate or as requested by CPD members, CPD's licensed mental health professionals will follow up with members who have experienced a duty-related traumatic incident within six months to offer additional support services.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

The City and the CPD achieved Secondary compliance with ¶408 during the twelfth reporting period.

To assess Preliminary compliance, we reviewed the CPD's policy E06-03 *Traumatic Incident Stress Management Program* to determine whether it was sufficient to ensure that CPD's mental health professionals would follow up with members who experience a traumatic incident within six months.

To assess Secondary compliance, the IMT reviewed the CPD's training materials and training attendance records to determine whether the training was sufficient to ensure that CPD's licensed mental health professionals were following up with members as required by ¶408.

We note that as part of the CPD Audit Division's annual 2023 TISMP Audit, the CPD revised the start date used for calculating the six-month follow-up period, aiming to ensure consistency in data collection. This adjustment is intended to promote timelier follow-up by anchoring the timeline to the onset of the traumatic event. With consistent tracking, this change should reduce service gaps and improve the delivery of internal and external support for individuals experiencing trauma.

The IMT looks forward to reviewing updated data in the next audit, particularly regarding policy adherence and the adherence to the required six-month follow-ups. As noted during the eleventh reporting period, the IMT continues to encourage the City and the CPD to implement a routine review process for all aspects of the TISMP. Relying solely on an annual audit may delay the identification and resolution of issues that arise earlier in the year.

To achieve Full Compliance, the CPD must continue to complete not only annual audits but also the corrective actions taken in response to audit findings of inconsistent practices. A proactive approach is necessary to ensure timely intervention and adherence to trauma-informed protocols.

Paragraph 408 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
None

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
None

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
Preliminary

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Preliminary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Preliminary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Secondary

Officer Wellness and Support: ¶409

409. *CPD has implemented a mandatory program for members who have experienced an officer-involved firearms discharge that consists of peer group discussions and other components. CPD will ensure that this program is overseen by a licensed mental health professional assigned to the Professional Counseling Division, reflects best practices, and comports with CPD's use of force policies and training.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FIRST REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

During the twelfth reporting period, the City and the CPD achieved Secondary Compliance with ¶409.

To assess Preliminary compliance, the IMT reviewed E06-03, *Traumatic Incident Stress Management Program* (TISMP) to ensure that the requirements for this mandatory program were memorialized in policy. The TISMP is overseen by the Director of Professional Counseling Division (PCD).

To assess Secondary compliance, we reviewed the CPD's training development, implementation, and evaluation of the mandatory program required by ¶409. We also assessed whether the CPD had qualified personnel fulfilling the responsibilities outlined in ¶409.

Specifically, we reviewed an audit conducted by the CPD's Audit Division entitled *Audit of Administrative Duty Following a Qualifying Firearms Discharge*, which indicates that 100% of the 31 members involved in a qualifying firearms discharge incident—and returned to the field—completed the requirements of E06-03, *Traumatic Incident Stress Management Program* (TISMP). The *Firearms Discharge Audit*, which was completed in May 2025, addresses incidents between January 2024 and December 2024. This demonstration of compliance with policy enabled the CPD to achieve Secondary compliance with ¶409.

In accordance with ¶409, the CPD's mandatory TISMP program consists of multiple "components." Recognizing that both the *TISMP Audit* and the *Firearms Discharge Audit* are conducted separately, the IMT requests that all relevant components be clearly identified.

To assess Full compliance, the CPD must provide a comprehensive accounting of all program elements, including any cross-referenced mandates that apply to both audits, as well as related components such as *Individualized Critical Incident Over-*

view Training and other associated training. In addition to reporting facts and findings from each audit, the CPD must demonstrate how it addresses inconsistencies and implements corrective actions to resolve identified issues.

Paragraph 409 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Preliminary	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Preliminary	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶410

410. *CPD will continue to place any CPD member who has discharged a firearm, excluding training discharges, unintentional discharges, or discharges for the destruction of an animal where no person was injured, on mandatory administrative duty assignment for a minimum period of 30 days. Prior to permitting the member to return to regular field duties, CPD will require the member to (a) complete the Traumatic Incident Stress Management Program and any training determined by CPD to be appropriate; and (b) receive authorization from the First Deputy Superintendent. Authorization to return to regular field duties may be withheld pending the outcome of any administrative or criminal investigation.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

During the twelfth reporting period, the City and the CPD achieved Secondary compliance with ¶410.

To assess Preliminary compliance, we reviewed CPD policies and documents to determine whether they are sufficient to ensure that CPD members involved in firearm discharges are placed on leave in accordance with ¶410. Specifically, we reviewed the E06-03 *Traumatic Incident Stress Management Program,* which delineates which types of firearm discharges mandate referral to the Traumatic Incident Stress Management Program (TISMP).

To assess Secondary compliance, we determined whether the CPD has a system in place that systematically identifies all officers involved in the discharge of the firearm as described in this paragraph. We also determined whether CPD officers and supervisors have received sufficient training related to the requirements of ¶410.

Paragraph 410 requires officers to be approved for return to duty by the First Deputy Superintendent. The CPD currently uses the TISMP tracking application within CLEAR to document attendance and referrals. While the CPD's Audit Division completed the *2024 Audit of Administrative Duty Following a Qualifying Firearms Discharge*, the IMT recommends implementing periodic checks and internal reviews prior to the annual audit to allow for more timely corrective actions.

The most recent *Firearms Discharge Audit* notes that prior recommendations regarding the review of training records and duty status before personnel return to full duty were not implemented. However, several other recommendations were acknowledged and accepted by the Office of the First Deputy Superintendent.

While the CPD identifies the TISMP Annual Audit as a primary mechanism to track members involved in traumatic incidents, the IMT does not support relying solely on the audit for this purpose. Both the annual *TISMP Audit* and *Firearms Discharge Audit* demonstrate that audits are only one component of a broader system. A more comprehensive, routine review process is needed to identify strengths, weaknesses, opportunities, and threats within the TISMP and Firearm Discharge processes.

The IMT has consistently requested the development of a structured review process to minimize the gaps revealed by annual audits. Reliance on retrospective audit findings increases the risk of delayed action and may present liability when personnel are not adequately tracked or cleared before returning to full duty. A more proactive, ongoing review system is essential to ensure compliance with all TISMP and firearm-related requirements. To assess Full compliance, the IMT will review the overall system in place for ensuring compliance with ¶410.

Paragraph 410 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: None
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶411

411. *At least annually, CPD will determine whether members who have experienced a duty-related traumatic incident have attended the mandatory counseling sessions and have completed the Traumatic Incident Stress Management Program.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025

Recurring Schedule: Annually ☑ **Met** ☐ **Missed**

Preliminary: ***In Compliance*** **(SECOND REPORTING PERIOD)**
Secondary: ***In Compliance*** **(NEW)**
Full: ***Not Yet Assessed***

During the twelfth reporting period, the City and the CPD maintained Preliminary Compliance and achieved Secondary Compliance with ¶411.

To assess Preliminary compliance, the IMT reviewed E06-03 *Traumatic Incident Stress Management Program*, which required the Audit Division to conduct an annual assessment, specifically aimed at evaluating the referrals to the TISMP, attendance at the mandatory debriefing sessions, completion of the TISMP, and follow-up communications or services.

To assess Secondary compliance, the IMT determined whether the CPD's training efforts were sufficient to ensure that the CPD is conducting the required annual audits of the mandatory counseling sessions and TISMP audits.

The CPD has produced several TISMP audits in accordance with the requirements of this paragraph. While ¶411 requires an annual audit, the IMT notes that such an audit must go beyond basic reporting and reflect the complexity of TISMP-related requirements.

To assess Full Compliance, the IMT will review whether the audits are more comprehensive than previous versions. During the twelfth reporting period, the IMT met with the audit team, which proposed a revised format intended to better capture the key components of relevant Consent Decree paragraphs.

Although the CPD has conducted multiple audits, they have not followed a consistent cadence, nor has the CPD demonstrated how findings have been addressed. The audits to date have primarily served as documentation of results, without evidence of follow-up or corrective action. For example, the 2023 audit was produced at the end of the eleventh reporting period and presented in February 2025 (the twelfth reporting period), yet no accompanying documentation demonstrating how identified issues were resolved was included.

The CPD has also applied a tiered system—categorizing audit findings as low, medium, or high priority. However, there is currently no explanation of how these ratings are determined, nor any indication of follow-through on addressing the tiered findings. Reporting without a defined process for remediation does not support progress toward Full Compliance.

The IMT looks forward to reviewing the revised audit format on a timelier audit schedule along with CPD's corrective action plans. Additional review of the *2024 TISMP Audit* and documented remedies from prior audits will be critical to future compliance assessments.

Paragraph 411 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Preliminary	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Preliminary
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶412

412. *Where it would add to the quality or effectiveness of the training, CPD will involve mental health professionals, as feasible, practical, and appropriate, in developing and reviewing recruit and in-service training on stress management, alcohol and substance abuse, officer wellness, and the support services available to CPD members.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FIFTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Under Assessment***

During the twelfth reporting period, the City and the CPD achieved Secondary Compliance and are under assessment for Full Compliance with ¶412.

To assess Preliminary compliance, we reviewed the CPD's S11-10 *Department Training* and documents for whether they were sufficient to ensure that the CPD would involve mental health professionals (subject matter experts or SMEs) in developing trainings on the topics outlined in ¶412.

To assess Secondary compliance, we determined whether the CPD has a system in place to regularly and reliably (1) identify which training programs as described in this paragraph would benefit from involvement by mental health professionals and (2) identify which professionals should be involved.

The IMT has observed increased reliance on mental health professionals and other SMEs—both internal and external—in the development of training curricula.

To achieve Full Compliance, the CPD must clearly demonstrate the relevant training courses in which SMEs are included and demonstrate how SMEs are selected to develop and deliver instruction. Establishing and documenting this as a consistent practice, while ensuring the content remains current and relevant, will be critical.

The IMT looks forward to reviewing high-quality training materials on substantive wellness topics and expects these to reflect a routine standard of practice aligned with the Consent Decree's training requirements. Before the twelfth reporting period, the CPD began incorporating SME-developed content into its training programs. Examples include nationally recognized curricula such as ABLE, LEMART, and modules on nutrition and sleep wellness. Additionally, as part of its broader wellness programming, the CPD has engaged representatives from a local credit union to provide training on financial literacy.

Paragraph 412 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
None

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
None

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
None

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Preliminary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Preliminary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Secondary

Officer Wellness and Support: ¶413

413. *CPD will involve experts, such as psychologists and cognitive and behavioral scientists, in developing training on use of force where their expertise would enhance the effectiveness of the training. The training topics that may benefit from such expertise could include: a. peer intervention by fellow officers to stop the use of excessive force; b. the interaction of human perception and threat assessment; and c. de-escalation and defusing techniques, including psychological methods of situation control, verbal control and communication, conflict resolution, and anger management.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FIFTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(NEW)**
Full:	***Not Yet Assessed***

During the twelfth reporting period, the City and the CPD achieved Secondary Compliance with ¶413.

To assess Preliminary compliance, we reviewed the CPD's S11-10 *Department Training* and documents to ensure they were sufficient to require the CPD to involve experts in training on use of force on the topics required in ¶413. To assess Secondary compliance, we determined whether the CPD has a system in place to regularly and reliably identify (1) which use of force training programs would benefit from involvement by experts as described by this paragraph and (2) which professionals the CPD should involve.

In the twelfth reporting period, we reviewed training courses, as well as Training Oversight Committee meeting minutes, which demonstrated that the CPD appropriately adhered to the requirements to achieve Secondary compliance. Specifically, the *2025 Crisis Intervention-Wellness In-Service Training* was developed by external experts, and the *TOC Meeting Minutes* indicated that the CPD has a process to assess which Use of Force training programs would benefit from involvement by experts.

To achieve Full Compliance, the CPD must continue to identify subject matter experts (SMEs) and clearly reference, in alignment with the relevant training paragraphs, who these individuals are and how they were selected to contribute to curriculum development or serve as instructors. Documenting the selection process and the qualifications of SMEs will help ensure consistent, credible, and effective training delivery.

Paragraph 413 Compliance Progress History

FIRST REPORTING PERIOD
MARCH 1, 2019 – AUGUST 31, 2019
COMPLIANCE PROGRESS:
Not Applicable

SECOND REPORTING PERIOD
SEPTEMBER 1, 2019 – FEBRUARY 29, 2020
COMPLIANCE PROGRESS:
None

THIRD REPORTING PERIOD
MARCH 1, 2020 – DECEMBER 31, 2020
COMPLIANCE PROGRESS:
None

FOURTH REPORTING PERIOD
JANUARY 1, 2021 – JUNE 30, 2021
COMPLIANCE PROGRESS:
None

FIFTH REPORTING PERIOD
JULY 1, 2021 – DECEMBER 31, 2021
COMPLIANCE PROGRESS:
Preliminary

SIXTH REPORTING PERIOD
JANUARY 1, 2022 – JUNE 30, 2022
COMPLIANCE PROGRESS:
Preliminary

SEVENTH REPORTING PERIOD
JULY 1, 2022 – DECEMBER 31, 2022
COMPLIANCE PROGRESS:
Preliminary

EIGHTH REPORTING PERIOD
JANUARY 1, 2023 – JUNE 30, 2023
COMPLIANCE PROGRESS:
Preliminary

NINTH REPORTING PERIOD
JULY 1, 2023 – DECEMBER 31, 2023
COMPLIANCE PROGRESS:
Preliminary

TENTH REPORTING PERIOD
JANUARY 1, 2024 – JUNE 30, 2024
COMPLIANCE PROGRESS:
Preliminary

ELEVENTH REPORTING PERIOD
JULY 1, 2024 – DECEMBER 31, 2024
COMPLIANCE PROGRESS:
Preliminary

TWELFTH REPORTING PERIOD
JANUARY 1, 2025 – JUNE 30, 2025
COMPLIANCE PROGRESS:
Secondary

Officer Wellness and Support: ¶414

414. *CPD will ensure that all CPD members are provided in-service training on stress management, alcohol and substance abuse, and officer wellness at least every three years. CPD will include training regarding stress management, alcohol and substance abuse, officer wellness, and support services in the recruit training program.*

Compliance Progress (Reporting Period: January 1, 2025, through June 30, 2025)

Preliminary:	***In Compliance*** **(FOURTH REPORTING PERIOD)**
Secondary:	***In Compliance*** **(ELEVENTH REPORTING PERIOD)**
Full:	***Under Assessment***

The City and the CPD maintained Secondary compliance and are under assessment for Full Compliance with ¶414 during the twelfth reporting period.

To assess Preliminary compliance, the IMT determined whether the CPD's policies and documents to determine whether they would ensure CPD was providing in-service training on the mental health topics covered in ¶414. Specifically, the IMT reviewed E06-01 *Professional Counseling Division*, which requires the Employee Assistance program (EAP) to not only offer initial recruit training but also provide in-service training to all CPD members no less than every three years, and delineates the topics that the initial recruit and in-service training must address.

To assess Secondary compliance, we determined whether the Officer Wellness training outlined by ¶414 has been provided to both sworn and non-sworn personnel as required by the paragraph. Specifically, the IMT reviewed attendance records demonstrating that over 95% of eligible members completed the *2024 Annual In-service Supervisors Training*, the *Traumatic Incident Stress Management (TISMP)* eLearning, the *Law Enforcement Medical and Rescue Training/Officer Wellness and Resilience training* ("LEMART Training"), the *2024 De-Escalation, Response to Resistance, and Use of Force*, the *Coordinated Multiple Arrests Training*, and the CPD *WELMART Training Enhancements*. This documentation demonstrates that Officer wellness training is being provided as required by ¶414.

The CPD also provided wellness training for civilian personnel during the twelfth reporting period, marking a meaningful step forward in expanding wellness education across the Department. The IMT acknowledges this progress and emphasizes the importance of making such training routine. Topics such as stress management, alcohol and substance use, and overall wellness must be consistently included in training for all CPD employees.

During the eleventh and twelfth reporting periods, the CPD also developed and delivered wellness training to the recruit class, contributing to a more comprehen-

sive training approach. These efforts must continue in alignment with the Department's Training Plan to ensure all personnel—sworn and civilian—receive wellness education.

To assess Full Compliance, the IMT expects the CPD to provide a clearly articulated, intentional plan that includes consistently scheduled training for CPD civilians and civilian supervisors. While the *2025 Training Plan* (5-year plan) includes future in-service wellness training for supervisors, it does not yet reflect a cadenced approach for civilian staff. To achieve Full compliance, the CPD must establish wellness training as a regular component of in-service training, similar to other required topics.

Paragraph 414 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: None
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Secondary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary

Officer Wellness and Support: ¶415

415. *By July 1, 2020, and periodically thereafter, CPD will conduct a department-wide equipment and technology audit to determine what equipment is outdated, broken, or otherwise in need of repair or replacement. During each audit, CPD will solicit feedback from representatives of the collective bargaining units representing CPD members.*

Compliance Progress

(Reporting Period: January 1, 2025, through June 30, 2025)

Recurring Schedule: Ongoing ☑ **Met** ☐ **Missed**

Preliminary: ***In Compliance*** **(NINTH REPORTING PERIOD)**
Secondary: ***In Compliance*** **(NEW)**
Full: ***Not Yet Assessed***

The City and the CPD achieved Secondary Compliance with ¶415 during the twelfth reporting period.

To assess Preliminary compliance, the IMT determined whether the CPD had created a policy directing the completion of periodic audits and solicitation of feedback from the collective bargaining units as required by ¶415. Specifically, we reviewed U05-02 *Department Equipment and Property Control System*, which memorializes these requirements.

To assess Secondary compliance, the IMT determined whether the CPD had produced data or evidence to show that the CPD solicited feedback from all the applicable bargaining units for each audit as required by ¶415. Previously, the IMT reviewed the *Audit Report from the Officer of Public Safety Administration for the Assets of the Chicago Police Department* ("2023 Equipment Audit"). The IMT noted that, "While the 2023 Equipment Audit includes an inventory list of equipment owned by the CPD, the inventory list does not show the condition of any equipment. Future equipment and technology audits should specify how the CPD is tracking the age and condition of its equipment and how the CPD is determining which items require repair or replacement."

During the twelfth reporting period, the IMT reviewed a revised policy U05-02 *Department Equipment and Policy Control System*, along with a memorandum outlining the implementation of the audit schedule for department-wide equipment and technology. The updated U05-02 policy includes audit schedule guidance, details the notification process for departmental units, explains expectations for physical inventory and recordkeeping, and includes a technology and equipment plan to address findings.

Also, during the twelfth reporting period, the IMT reviewed the CPD's *2025 Exercise Equipment Audit*, which included purchasing records and detailed, color-

coded spreadsheets detailing equipment status, condition, and serial numbers by location. The IMT also reviewed the *Received Inventory Audit 2025*, which demonstrated the CPD received inventory audit submissions from all CPD units and the dates those submissions were received.

While the IMT reviewed the revised policy and inventory records during the twelfth reporting period, the CPD has not yet produced a full implementation plan for coming into compliance with the requirements of ¶415. The IMT looks forward to reviewing this plan and emphasizes that it must go beyond outlining current audit procedures. The plan should also explain how findings from previous audits were addressed. Audits must do more than report deficiencies—they should include recommendations for corrective actions to be taken and steps to be implemented to support long-term improvements and best practices. While ¶415 does not specifically require an implementation plan, without a cadenced approach to regularly conducting audits and some plan to remedy deficiencies the audit identifies, the CPD will not be in Full compliance with the paragraph. Going forward, the IMT will look to whether the CPD has its own interpretation of how often an audit must be conducted to meet the 'periodic' requirement of ¶414.

To assess Full compliance, the IMT will determine whether CPD conducts sufficient and timely equipment and technology audits to determine state of its equipment.

Paragraph 415 Compliance Progress History

FIRST REPORTING PERIOD MARCH 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable	SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: None	THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: None
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: None	FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: None	SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: None
SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: None	EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: None	NINTH REPORTING PERIOD JULY 1, 2023 – DECEMBER 31, 2023 COMPLIANCE PROGRESS: Preliminary
TENTH REPORTING PERIOD JANUARY 1, 2024 – JUNE 30, 2024 COMPLIANCE PROGRESS: Preliminary	ELEVENTH REPORTING PERIOD JULY 1, 2024 – DECEMBER 31, 2024 COMPLIANCE PROGRESS: Preliminary	TWELFTH REPORTING PERIOD JANUARY 1, 2025 – JUNE 30, 2025 COMPLIANCE PROGRESS: Secondary