

# Appendix 8

## Officer Wellness and Support

### Compliance Assessments, by Paragraph

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¶381	¶390	¶399	¶410
¶382	¶391	¶400	¶411
¶383	¶392	¶401	¶412
¶384	¶393	¶402	¶413
¶385	¶394	¶404	¶414
¶386	¶395	¶406	¶415
¶387	¶396	¶407	¶416
¶388	¶397	¶408	¶417
¶389	¶398	¶409	¶418

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b>In Compliance (FOURTH REPORTING PERIOD)</b>
<b>Secondary:</b>	<b>In Compliance (FOURTH REPORTING PERIOD)</b>
<b>Full:</b>	<b>Not in Compliance</b>

The City and the CPD maintained Secondary compliance with ¶381 during the eighth reporting period.

To assess Preliminary compliance with ¶381, we reviewed the CPD’s relevant policies and records. For Secondary compliance, we reviewed records that are sufficient to show that the CPD has qualified personnel fulfilling the responsibilities required by ¶381. We also considered whether the staff is sufficiently trained to provide the services required by the paragraph.

To evaluate Full compliance with ¶381, we considered data sources necessary or helpful to identify and verify sustained compliance and reform efforts relevant to the requirements of the paragraph. Specifically, we determined whether the CPD has sufficient methods for tracking, analyzing, and responding to various data points regarding wellness services to all CPD members, including sworn and non-sworn personnel.

### *Progress before the Eighth Reporting Period*

In the fourth reporting period, the City and the CPD achieved Preliminary compliance with ¶381 by submitting the *Professional Counseling Division (PCD) Policy (E06-01)*, the CPD’s *Officer Wellness Support Plan*, and the CPD’s *Standard Operating Procedure (SOP) 19-01*. The combination of E06-01, the *Officer Wellness Support Plan*, and SOP 19-01 established a robust foundation for providing CPD members with a range of services contemplated in ¶381.

The City and the CPD achieved Secondary compliance with ¶381 by providing record of the clinicians’ certifications and evidence the staff have necessary training

and credentials as well as a breadth of experience providing the services contemplated by E06-01 and ¶381.

During the fifth reporting period, the City and the CPD maintained Preliminary and Secondary compliance with ¶381 but did not reach Full compliance. The IMT noted that we anticipated the CPD to implement a technology solution to adequately track and evaluate services offered, including data that reflects the efficiencies of tracking programs and services to all CPD personnel, and we specified the type of data we would expect to see tracked. In the sixth reporting period, the IMT reiterated the importance of collecting anonymous data to support the efficiency, effectiveness, and the planning for and forecasting of additional resources. During these discussions, the Professional Counseling Division (PCD) informed the IMT about their upcoming implementation of iCarol, a software system, which would provide the necessary data and related information. The full launch of the iCarol system was delayed and did not launch during the sixth reporting period.

During the sixth period, the IMT reviewed the PCD's 2022 Communication Strategy. The strategy was a great start to increase in mental health awareness for CPD personnel, but lacked other facets of wellness (*i.e.*, financial, physical, and spiritual) as referenced in the strategy. The IMT recommended the PCD provide details relating to how non-sworn members of the CPD access the same information about the available services because they do not attend roll calls or in-service training like the sworn personnel.

Additionally, in the sixth reporting period, the IMT reviewed training curricula, including the *Peer Support Refresher* training, the *Traumatic Incident Stress Management Program* (TISMP) eLearning, and the *Active Bystandership for Law-Enforcement* (ABLE) training. The City's Department of Human Resources (DHR) also posted job openings for an additional 11 clinician positions to aid in the delivery of these confidential services, after the CPD obtained budgetary approval.

During the seventh reporting period, the PCD began its pilot of the iCarol system and continued to work with the City's DHR to post available mental health clinician positions. In October 2022, the IMT held a virtual community listening session, which included discussions regarding stressors that contribute to the demand for PCD services. The audience, which consisted primarily of CPD officers, shared their opinions and concerns about PCD services provided. Some participants voiced concerns that ranged from uncertainty about the available resources to outright distrust of service delivery for counseling. Other officers expressed they were satisfied with the services they received from the PCD.

#### *Progress in the Eighth Reporting Period*

During the eighth reporting period, the IMT reviewed Clinician's Hiring Packets and the Biography and District Assignments for each clinician. The IMT also reviewed

training that promotes officer wellness and support, including the *Officer Wellness and Support Training*, which addresses officer resilience, nutrition, sleep, and fatigue. We appreciate that several facets of the lesson plans were created by mental health experts as researchers, as required by ¶412. The IMT inquired about whether the training being provided to CPD’s non-sworn staff. The CPD indicated that the Officer Wellness and Support Training would be modified for non-sworn personnel.

The IMT also reviewed a second lesson plan for the *Active Bystandership for Law Enforcement (ABLE)* training, which included a module focusing on wellness. The IMT appreciates the CPD’s recognition of the continuous need for the *ABLE* curriculum and instruction.

During the eighth reporting period, the CPD continued efforts to roll out the Officer Support System (OSS), an automated electronic system that will be used to proactively identify officers with a heightened risk for future adverse events and to provide interventions to minimize such risks (see ¶¶583–98). The OSS is designed to allow supervisors to routinely and proactively support officers and their well-being, collaborating on plans to access support. The OSS is still evolving, as detailed in our review of ¶583.

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The City and the CPD maintained Secondary compliance with ¶381 during the eighth reporting period. Moving forward, we will look for the CPD to prioritize staff and aspects of wellness that reflect a support system necessary to achieve a healthy and effective police department. To reach Full compliance, the City and the CPD will need to demonstrate that they have sufficient methods for tracking, analyzing, and responding to various data points regarding wellness services to all CPD members.

### Paragraph 381 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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: 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	

## Officer Wellness and Support: ¶382

**382.** CPD currently offers clinical counseling services, programs regarding alcoholism and other addictions, and a peer support program to help CPD members cope with the psychological and personal toll their jobs can impose. By September 1, 2019, CPD will complete a needs assessment to determine what additional resources are necessary to ensure the support services available to CPD members comport with best practices and mental health professional standards.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Secondary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Full:</b>	<b><i>Not in Compliance</i></b>

The City and the CPD maintained Secondary compliance with ¶382 in the eighth reporting period.

To assess Preliminary and Secondary compliance with ¶382, we reviewed the CPD’s relevant policies and records including the required needs assessment and the CPD’s *Officer Wellness Support Plan*. To assess Full compliance, we sought to determine whether the CPD has implemented a system to track the provision and use of wellness services and provided updated timelines for plans to accurately and efficiently address the needs of all members, sworn and non-sworn, that these sources identified.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶382 in the third reporting period by completing the required needs assessment and addressing additional concerns via the CPD’s *Officer Wellness Support Plan*. However, the CPD had not demonstrated that the *Officer Wellness Support Plan* robustly supplements the initially conducted needs assessment.

Further, we noted that the CPD must implement a system to track the provision and use of wellness services and provide updated timelines for plans to accurately and efficiently address the CPD employee needs that these sources identified. As we noted in the fourth reporting period, an updated timeline will allow the Professional Counseling Division (PCD) to establish a definitive timeframe as the goals and needs of both the division and the CPD members continue to evolve. In the sixth reporting period, the PCD submitted the *2022 Communication Strategy*; however, it had not been fully implemented.

During the seventh reporting period, the CPD and the PCD recognized the need to complete an assessment more frequently than it had been done in the past. The IMT concurred with the need to conduct more frequent needs assessments, as the CPD completed the last wellness assessment in 2019 and an initial communication strategy in 2020. Additionally, we noted that the follow-through in response to the assessment findings must be implemented and remain flexible enough to improve delivery, efficiency, and effectiveness.

*Progress in the Eighth Reporting Period*

The City and the CPD made limited progress toward compliance with this paragraph's requirements in the eighth reporting period. Much has occurred within the CPD that has either impacted officer wellness since the needs assessment completed in 2019. During a site visit in the eighth reporting period, the IMT met with various CPD members, including police officers, sergeants, detectives, non-sworn personnel, management, and individuals from units within the PCD. CPD members shared strengths, deficiencies in some areas, and opportunities for improvement in other areas.

During the previous reporting period, the City and the CPD had recognized the need to complete an assessment on a more frequent basis. However, to date, four years have passed since the last assessment. Although some efforts have been made, the compilation of the progress made compared to the findings in the 2019 assessment have not been presented to the IMT. The CPD has not indicated when the next assessment will be conducted, nor has it provided an update on the status of the development of any assessment that may be forthcoming or currently under development.

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The City and the CPD maintained Secondary compliance but have yet to achieve Full compliance with ¶382. Moving forward, we will look for an update regarding the development, status, and deployment of the next needs assessment with a progress report of what has been completed or is no longer pursued from the initial 2019 assessment. To achieve Full compliance, the CPD must implement a system to track and demonstrate the provision and use of wellness services and to provide updated timelines for plans to accurately and efficiently address the needs of all members, sworn and non-sworn, that these sources identified.

## Paragraph 382 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Preliminary:** *In Compliance (THIRD REPORTING PERIOD)*  
**Secondary:** *In Compliance (THIRD REPORTING PERIOD)*  
**Full:** *Not in Compliance*

The City and the CPD maintained Preliminary and Secondary compliance with ¶383 during the eighth reporting period.

To evaluate Preliminary compliance with ¶383, we determined whether the CPD has allocated sufficient resources to conduct a needs assessment as required by this paragraph. To evaluate Secondary compliance, we determined whether the CPD had conducted the corresponding needs assessment.

To assess Full compliance with ¶383, we considered whether the CPD has the technology necessary to accurately collect and report data regarding the Professional



Counseling Division (PCD) services, staffing, and consumption of those services. The CPD should be striving to reach a point at which they can continually assess and adapt the services the PCD provides to better meet the needs of CPD members.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶1383 by developing the *Officer Wellness Support Plan*, which built upon the needs assessment. The *Officer Wellness Support Plan* created a framework for future assessments of the CPD's wellness-related needs. Additionally, we found the PCD continued to utilize stopgap measures to track the use and provision of services, compiled, and submitted the 2021 Report to the Superintendent based on anecdotal evidence.

In the fifth reporting period, the IMT noted that the CPD should establish the necessary benchmarks to determine what the PCD's true capacity for providing services is to further determine where and when future resources may be needed. This is applicable to several sub-paragraphs (c, e, f, g, i, and k). In the sixth reporting period, the IMT sought a workload analysis (subparagraph b) to understand whether the PCD units were adequately providing the most effective and efficient services they can to the CPD membership. The CPD did not submit data that delineated the active or closed caseloads by any of the service units within the PCD. The PCD has indicated that the length of time between the request for services and the appointment (subparagraph c) has been reduced, but the IMT has not received any data to demonstrate that.

During the sixth reporting period, the CPD introduced the eLearning curriculum on the *Traumatic Incident Stress Management Program* (TISMP) (subparagraph j). The IMT appreciated the quality of this training and requested to review the pre- and post-tests for the training. The IMT also reviewed the *Suicide Prevention Initiative* and the *Active Bystandership for Law Enforcement* (ABLE) training.

During the fifth and sixth reporting periods, the PCD demonstrated its efforts to increase staffing by posting notification for job opportunities for 11 additional counselors who were approved in a budget process in early 2022. In the seventh reporting period, because of the difficulties it encountered filling the positions, the PCD worked with the City's Department of Human Resources (DHR) to develop more marketable positions.

#### *Progress in the Eighth Reporting Period*

Since 2021, the CPD has not produced any updated needs assessments. However, as stipulated in ¶1383, the subparagraphs (a-k) are data-driven to ensure that the

CPD can determine what resources are needed to support available services to CPD members that model best practices and mental health professional standards.

¶383(a) The CPD has been challenged with filling clinician vacancies for numerous reasons. Regarding the recent budget allocations of 11 additional clinicians, the IMT was informed of the decreased number of applications and was apprised that several job offers had been made, but in several instances, the applicants declined the offers. One of the primary reasons that the PCD staff noted was that pay was significantly less than the current market rate for clinicians in similar roles in the NGO environment. Additionally, it was also noted that offers were also declined due to the hours worked, on-call status, and the level of potential call-outs. At the end of the eighth reporting period, the CPD informed the IMT in a monthly meeting about the progress towards revising the Clinical Therapist III position, which the CPD had shared they previously were revising to more accurately reflect the duties performed by the clinicians working for the CPD. As of the end of June 2023, the CPD had worked with the Department of Human Resources to create three (3) Police Clinical Therapist Supervisor positions which would be assigned to each decentralized location. One of these positions had already been posted<sup>1</sup>, and the two others would soon be posted. The CPD informed the IMT that after these three positions were filled, a NOJO would be posted for the remaining four (4) positions for the clinical therapist III (renamed police clinical therapist to adjust for the specialized nature of their job duties).

¶383(b,c,e) Summarily, the data collection regarding caseload management has not been shared with the IMT since the inception of the Consent Decree. While anecdotal information has been shared that the time it takes to request a meeting and being seen by a clinician has been shortened, and that the turnaround time is timelier and sooner than experiences in the past, the CPD has not shared any relevant data that validates timelines or reasons for referrals. Without such data, it is difficult to best determine the ratio of mental health professions to sworn or non-sworn employees who see counseling services.

¶383(f,g) In this reporting period, the iCarol system, which concluded its pilot phase in November 2022, has yet to be implemented. The iCarol system, as the PCD staff explained, would allow the clinicians to enter data and notes that reflect the counseling sessions. This would allow the CPD and the IMT to discuss real time data that addresses caseloads, hours worked, and perhaps ratio of clinicians to clients. However, during this reporting period, the IMT and the OAG were made aware that the contract that was completed and signed prior to the launch of the pilot, and throughout the development of this product with the vendor, did not include the necessary verbiage regarding the required specific language regarding

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<sup>1</sup> See Supervising Police Mental Health Clinician (June 21, 2023), <https://www.ziprecruiter.com/c/City-of-Chicago/Job/Supervising-Police-Mental-Health-Clinician/-in-Chicago,IL?jid=0f8bce4e8cbe9682>.

HIPAA nor a necessary business user agreement. Therefore, the project has been halted, and the IMT was informed that the revised contract was pending further review with the City's Attorney's office.

At the end of the eighth reporting period, the CPD advised the IMT that they expected iCarol to be functional in the ninth reporting period. However, we also learned that iCarol is not expected to be a permanent data collection and reporting solution, and that the CPD expected to phase out iCarol when the CPD's new Records Management System (RMS) is procured and launched. The CPD shared that the expectation is to use iCarol for at least a year and a half before phasing it out, and that the data collected through iCarol would be transferred to the RMS. The IMT looks forward to additional updates about the software systems in the future. However, with at least six months of no use of the iCarol system, the CPD has yet to produce any anonymized data captured during the pilot phase that could offer additional outcomes to determine quality, efficiency, or quality of services provided, as required in ¶1383(f). Additionally, the same data issues impact the ability to gain a true grasp of what percentage of the clinicians' time is spent counseling clients.

¶1383(h) The IMT has no evidence that the CPD has sought and gained guidance from the law enforcement professional associations. It is important to note that the International Association of Chiefs of Police hosted a Wellness Conference—Officer Safety and Wellness Symposium—during the eighth reporting period. The Director of the PCD shared information with the audiences regarding the importance of psychological counseling.

¶1383(j, k) The CPD submitted training curricular during the eighth reporting period. However, the IMT has not been made aware of the status on completion of some of the courses presented for production. The IMT had reiterated the need to include non-sworn employees on those topics that reference all members regarding wellness. The IMT applauds the CPD on several topics ranging from resilience, sleep, and nutrition to Active Bystandership for Law Enforcement (ABLE), including a wellness module. These quality topics involve instruction and input from renowned authors and practitioners within specific areas of expertise relative to the topic. Several of the topics (*i.e.*, resilience and ABLE) are to be presented to the recruit classes as well. However, the IMT has not received any evidence that those courses have been delivered to the recruits yet.

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The City and the CPD maintained Secondary compliance in the eighth reporting period. To reach Full compliance, the CPD must take the necessary steps to collect data from multiple platforms to generate the necessary data required in ¶1383 and in many other paragraphs throughout the Officer Wellness and Support section.

## Paragraph 383 Compliance Progress History

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

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b>In Compliance (THIRD REPORTING PERIOD)</b>
<b>Secondary:</b>	<b>Under Assessment (NEW: LOST COMPLIANCE)</b>
<b>Full:</b>	<b>Not Yet Assessed</b>

The City and the CPD maintained Preliminary compliance but did not maintain Secondary compliance with ¶384 during the eighth reporting period. At the end of the eighth reporting period, the City and the CPD remained under assessment for Secondary compliance.

To assess Preliminary compliance with ¶384, we determined whether the CPD developed a sufficient *Officer Wellness Support Plan* to prioritize and address the needs assessment. To assess Secondary compliance, we determined whether the *Officer Wellness Support Plan* sufficiently addresses the needs assessment and meets the requirement of this paragraph.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶384 by finalizing the *Officer Wellness Support Plan*, which provides a framework for iterative review and assessment of the CPD’s ability to meet the wellness needs of its members. However, the Professional Counsel Division’s (PCD’s) technological limitations preventing the PCD from scheduling, tracking, and reporting on its activities efficiently and accurately hindered Full compliance.

While the *Officer Wellness Support Plan* clearly specifies areas that offer a comprehensive approach to long-term solutions, the timeline for implementation, is too broad as it references specific paragraphs with the timeline for project completion. There are aspects of the *Officer Wellness Support Plan* that indicate implementation phases but do not create substantive and definitive steps to support the priorities, nor demonstrate the processes to address the needs delivered in the *Officer Wellness Support Plan* and the needs assessment.

In the seventh reporting period, the CPD again did not produce necessary data to demonstrate that they have met the requirements as described in the most recent needs assessment, which was conducted in the third reporting period. Without data from the previous assessment, the timeliness of its efforts to meet these needs cannot be properly assessed. During a virtual meeting in the seventh reporting period, the PCD acknowledged that it should produce a needs assessment more frequently but did not do so.

*Progress in the Eighth Reporting Period*

In the eighth reporting period, the CPD again failed to produce relevant data that comprehensively addresses the needs identified in the needs assessment. Also, the CPD has yet to implement a data-driven plan with technological solutions that identify efficiencies and steps taken to determine the efficacy of the needs assessment and the *Officer Support Systems Plan*.

Without the necessary data, the City and the CPD cannot move forward towards Full compliance, as the data must drive priorities and timelines. The last needs assessment was completed in 2019. Since then, despite acknowledging the need to conduct more frequent needs assessments, the CPD has not produced any evidence that those efforts are underway.

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The City and the CPD are under assessment for Secondary compliance with ¶1384 in the eighth reporting period. Moving forward, we will look to receive the necessary comprehensive data and the CPD’s presentation of what its plans are to ensure assessments are ongoing and continuous.

**Paragraph 384 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b>In Compliance (THIRD REPORTING PERIOD)</b>
<b>Secondary:</b>	<b>In Compliance (THIRD REPORTING PERIOD)</b>
<b>Full:</b>	<b>Not in Compliance</b>

The City and the CPD maintained Preliminary and Secondary compliance with ¶385 during the eighth reporting period.

To assess Preliminary compliance, we reviewed whether the CPD had a sufficient plan to develop and implement a communications strategy per ¶385. To assess Secondary compliance, we 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 evaluate Full compliance with ¶385, we considered whether the CPD has implemented and sustained implementation of a communications strategy to effectively disseminate information, dispel misinformation, and emphasize the CPD's commitment to wellness for both sworn and non-sworn personnel. We also considered the extent to which the CPD is continuously assessing its communications strategy and making appropriate adjustments.

#### *Progress before the Eight Reporting Period*

During the third reporting period, the City and the CPD achieved Preliminary and Secondary compliance by submitting the *Officer Wellness Support Plan* to develop and implement a communication strategy that would fulfill all requirements of ¶385. The *Officer Wellness Support Plan* includes sufficient communications strategies for both general dissemination of information regarding Professional Counseling Division (PCD) services and targeted outreach. The CPD also submitted evidence of varied, extensive, and continued efforts to disseminate information that emphasizes member wellness, works to dispel misinformation, and informs members of wellness services available to them.

In the fifth reporting period, the Professional Counseling Division made significant progress toward Full compliance with ¶1385 by demonstrating dissemination of materials to promote several aspects of effective communication, including in various training curricula, but the dissemination was not sustained.

Additionally, during the fifth and sixth reporting periods, the IMT observed an in-service training focused on officer wellness in which some participants indicated familiarity with the PCD's services, while others did not. The PCD and CPD leadership should strive to ensure all CPD personnel are aware of the available services as this paragraph contemplates. During the sixth reporting period, the PCD submitted the *2022 Communications Strategy*, focused on three primary facets: the calendar, the contents, and the distribution of information.

During the seventh reporting period, the CPD conducted a survey for all employees regarding interest in utilizing a third-party wellness application. The IMT appreciated this effort to explore a wellness app, as it further supports the objectives of the communication strategy by informing employees of available services at their fingertips. It also further attempts to address potential barriers and demonstrates an innovative way to support wellness using a smart device.

#### *Progress in the Eighth Reporting Period*

During this reporting period, the CPD submitted the *2022 Communications Calendar* that reflects the volume of disseminated materials sent out to CPD employees. The calendar identifies the various topics of the communications (*e.g.*, Veteran's Support Group, No Cop Outs Meeting, Chaplain's newsletter, Memos, and Announcements for Blue Blessing, Get Unscrooged, Suicide Awareness Event, and Animal Therapy).

The IMT visited several district stations in the eighth reporting period to observe interactions and posted signage, and to further assess how the CPD communicates services that are available to employees. During these visits, we observed a random clinician visit to the district, quiet rooms, and posted signage on the wellness bulletin boards. At the time of the IMT site visit in the eighth reporting period, we continued to hear about at least one quiet room being repurposed to a supervisor's office, contrary to CPD policy.

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The City and the CPD maintained Secondary compliance with ¶1385 in the eighth reporting period. Communication with non-sworn employees is inconsistent regarding wellness-related services. The IMT encourages the CPD to strive towards closing this gap in communicating wellness matters (*e.g.*, training and counselor visits) to all CPD employees. Toward the end of this reporting period, the CPD informed the IMT about the hiring of an individual to assist with communications



internal and external to the agency. The IMT encourages the CPD to develop a comprehensive means that shows the implementation and completion of aspects of the communication strategy that help to determine where gaps, strengths, and opportunities exist. Routine assessment allows for the consistent delivery of services and for sound, relevant goal setting.

### Paragraph 385 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Secondary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Full:</b>	<b><i>Not in Compliance</i></b>

During the eighth reporting period, the City and the CPD maintained Preliminary and Secondary compliance with ¶386.

To evaluate Preliminary and Secondary compliance with ¶386, we reviewed the CPD’s relevant policies, documents, and 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.

To assess Full compliance with ¶386, we considered evidence of continued outreach and communications related to wellness services. The communications should maintain both sworn and non-sworn personnel’s awareness of services provided by Professional Counseling Division (PCD). We also looked for qualitative and quantitative data necessary to assess CPD members’ awareness of PCD services and determine whether members are aware of how to access desired information regarding these services.

### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶1386 by crafting a communications strategy set out in the *Officer Wellness Support Plan*. While the communication materials reflected an earnest commitment to disseminating robust and accurate information regarding the CPD's wellness services, we stressed the importance of keeping posted information updated and replenished on a regular basis.

During the fifth reporting period, the CPD took significant steps to increase the awareness of the PCD services by developing training materials, including the *Officer Wellness* in-service training, the *Supervisors* training, and the *Employees Assistance Program* (EAP) training.

During the sixth reporting period, the City and the CPD provided a draft of the *Professional Counseling Division 2022 Communications Strategy* for IMT review. The IMT provided feedback and further iterated that the communications strategy was a great start to increase mental health awareness for CPD personnel. However, in the seventh reporting period, the IMT did not receive any evidence that the *Communications Strategy* was being measured.

During the seventh reporting period, the IMT reviewed curricula for a supervisory training on CPD support services, the *Recruit Employee Assistance Program* training, and the Annual Use of Force Integrating Communications Assessment and Tactics (ICAT) Training. The IMT also visited the CPD district stations during the seventh reporting period, which afforded the opportunity to locate, inspect, and observe the available postings and printed material regarding PCD support services. The PCD also attended in-person roll calls to share and present information regarding its available services in the seventh reporting period. In addition, the PCD hosted an open house event at the PCD's main location to introduce themselves and inform CPD employees and their families about what services they provide.

### *Progress in the Eighth Reporting Period*

The CPD made limited progress toward compliance with this paragraph during the eighth reporting period. Without reliable data, it remains difficult for the IMT to determine the effectiveness of the communications strategy regarding all CPD employees.

Importantly, during officer focus groups the IMT held in the eighth reporting period, officers indicated misperceptions and a lack of clarity in understanding how the Officer Support System (OSS) works, its purpose, and its levels of privacy. The CPD must ensure that officers understand the OSS program beyond the policy, including (1) how the information is to be utilized, (2) what the expected outcome of such a system should produce in the data that is captured; (3) if the results can

impact FOID card eligibility; (4) whether there any aspects of wellness that are applicable to non-sworn personnel in the OSS.

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In this reporting period, the City and the CPD maintained Secondary compliance. The IMT continues to look forward to the data driven results that address the requirements of ¶386. To achieve Full compliance with ¶386, the CPD must adapt the communications strategy when needed; demonstrate effectiveness in providing information to employees; and identify and address the topics and issues pertinent to CPD members' stigma and misperceptions related to seeking counseling services.

### Paragraph 386 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## Officer Wellness and Support: ¶387

**387.** *Within 180 days of the Effective Date, CPD will develop and implement a roll call training to explain and address the effects on Firearm Owners Identification (“FOID”) card eligibility, if any, when a CPD member seeks or receives CPD support services, including, but not limited to, counseling and mental health treatment.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Secondary compliance with ¶387 during the eighth reporting period. The City and the CPD remain under assessment for Full compliance while the parties discuss the evidence necessary to demonstrate Full compliance.

To assess Preliminary and Secondary compliance, we reviewed information to determine whether the roll-call training was sufficient to explain and address the effects per ¶387. To evaluate Full compliance with ¶387, we reviewed a variety of data sources to determine whether the CPD continued to provide the FOID card training as necessary to ensure officers and recruits are aware of the effects support services has on FOID card eligibility.

#### *Progress before the Eighth Reporting Period*

In earlier reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶387 by developing a FOID card roll-call training, providing documentation demonstrating that 99% of eligible employees had received the training, and providing post-training survey data indicating the CPD members found the training helpful.

During the fifth reporting period, the IMT reviewed data and information that explained and addressed the effects of the FOID card eligibility when CPD officers are seeking counseling and mental health treatment. During the sixth reporting period, the IMT reviewed relevant training that address the FOID card eligibility and the effects when members seek and receive CPD support services.

Additionally, during the sixth reporting period, the IMT reviewed the *2022 CIT In-Service Training*, which includes a module that is specific to officer wellness. Module #6 in this curriculum addresses the issue of FOID card revocation, reinstatement, and the circumstances that impact an officer's possession of the FOID card

for both voluntary and involuntary mental health treatment. The CPD did not produce any material relevant to this paragraph during the seventh reporting period.

*Progress in the Eighth Reporting Period*

During the eighth reporting period, the CPD provided data to evidence that more than 95% of CPD members had completed both *FOID Mental Health Card Eligibility eLearning* training and the *CIT In-Service Training*, which included the required FOID card eligibility training.

The IMT continues to look for information that addresses Professional Counsel Division (PCD) encounters with CPD personnel where pertinent information like FOID card eligibility is shared. The clinicians advised that they keep some type of daily/weekly log that allows them to enter such information at the end of the week. However, the IMT has not received any such compilation of data reflecting roll call training or other clinician-related duties.

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The City and the CPD The City and the CPD remain under assessment for Full compliance while the parties discuss the evidence necessary to demonstrate Full compliance with ¶387.

**Paragraph 387 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: None	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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Preliminary:** *In Compliance (THIRD REPORTING PERIOD)*

**Secondary:** *Not in Compliance*

**Full:** *Not Yet Assessed*

During the eighth reporting period, the City and the CPD maintained Preliminary compliance with ¶388.

To evaluate Preliminary compliance with ¶388, we reviewed the *Officer Wellness Support Plan* to determine whether it effectively addressed and planned to implement a suicide prevention initiative. For Secondary compliance with ¶388, we determined whether the *Officer Wellness Support Plan's* communication strategy is sufficient and meets the requisite objectives and whether the CPD implemented, reviewed, and assessed the *Officer Wellness Support Plan* to ensure that the plan meets the requisite objectives. Specifically, we reviewed data sources and considered, among other things, feedback from clinicians and CPD members to determine whether the services provided by the CPD are meeting the wellness needs of both sworn and non-sworn employees.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶388 by submitting a variety of CPD documents, including the *Officer Wellness Support Plan*, communications regarding expanded Employee Assistance Program services, and drafts of the *Traumatic Incident Stress Management Plan* (TISMP) directive. The IMT has acknowledged that there is currently no “best practice” approach to use as a benchmark to measure the CPD’s efforts related to suicide prevention. 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.

The CPD submitted the Professional Counseling Division's (PCD's) *2021 Report to the Superintendent* in the fourth reporting period. However, given the unavailability of other data regarding the consumption and provision of services, the City and the CPD had not yet reached Secondary compliance.

In the sixth reporting period, during a virtual site visit with the PCD Director, we discussed the PCD's role in conducting a forensic analysis and post-mortem assessment when incidents of suicide occur. These efforts were in very early stages—though referenced in smaller circles, no efforts have been made to approach this analytical, yet delicate process from a broader stance, which would include other key participants such as detectives and other key subject matter experts.

The CPD submitted the *Suicide Prevention Initiative* and the *CIT In-Service Training* for review in the sixth reporting period. Both the IMT and the Office of the Illinois Attorney General (OAG) appreciated the effort to develop the *Suicide Prevention Initiative*, while also noting areas of improvement. The *Suicide Prevention Initiative* will be overseen by the Director of the PCD. As a component of the *Officer Wellness Support Plan*, the *Suicide Prevention Initiative* introduced several national resources the PCD identified as best practices to create a model that supports and sustains the CPD's framework to care for its personnel. In addition, the CPD indicated its intention to expand internal resources, including the 11 additional clinician positions.

In the seventh reporting period, the CPD resubmitted the *Suicide Prevention Initiative* with the responses to the IMT's and OAG's comments, which included revisions to capture the timeline to hire additional clinicians; timeline of CPD's exploration of the wellness app; the explanation of the eventual use of iCarol to measure availability of services; efficiency and accuracy of reporting; availability of data; ongoing efforts to address the evolving and tragic topic of suicide; and a component of firearms discussion and the role they sometimes have in the mental health crisis. We continue to encourage the CPD to meaningfully evaluate its efforts.

#### *Progress in the Eighth Reporting Period*

During the eighth reporting period, the IMT discussed both prevention and postvention with the CPD. The CPD indicated that, following the aftermath of officer suicides, a letter is sent from the Superintendent to all employees. The PCD attends roll calls immediately following an officer suicide to offer assistance, and to communicate with members to clarify the availability of internal and external resources.

The PCD also provided an update on the status of hiring additional clinicians. During our eighth reporting period site visit, the PCD had a total of 18 clinicians (of the allotted 22 clinicians).



Finally, the CPD has begun the process of working with a vendor to roll out the introduction for the CPD wellness app. It will be available for both CPD employees and their families. The IMT looks forward to the implementation of this new technology and related feedback, as well as updates on the CPD's implementation of the iCarol system.

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Therefore, the City and the CPD maintained Preliminary compliance but did not reach Secondary compliance with ¶1388 in the eighth reporting period.

### Paragraph 388 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

**Preliminary:** *Not in Compliance*

**Secondary:** *Not Yet Assessed*

**Full:** *Not Yet Assessed*

The CPD in the City did not achieve Preliminary compliance with ¶389 during the eighth reporting period.

To assess Preliminary compliance with ¶389, we reviewed the CPD’s relevant policies and determined whether the Director of the Professional Counseling Division (PCD) provided a written report to the Superintendent that incorporates the data outlined in this paragraph.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶389, largely due to the PCD’s manual efforts to create weekly reports. However, the IMT had stressed the importance of a technology solution to enable the PCD to create reports so that accurate data on all points required by the paragraph could be obtained. In the fourth reporting period, the City and the CPD had not acquired, implemented, or provided evidence of significant progress toward obtaining any such technology, and thus, they fell out of Preliminary compliance with ¶389.

The CPD’s earlier iterations of the PCD’s *2021 Report to the Superintendent* did not provide 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 as required by ¶1389. During the fifth reporting period, the PCD made efforts to identify resources, partners, and revise policies. In the sixth reporting period, the IMT reviewed and re-evaluated the *2021 Report to the Superintendent*. The *Report* benchmarked its efforts to identify the goals, objectives, and steps to achieve the optimal targets for overall organizational wellness. However, the PCD does not have the data capacity to move forward in that regard.

Additionally, in previous reporting periods, the CPD finalized the *Professional Counsel Division (PCD) Policy* (E06-01). Item XI-A of E06-01 directs the completion of the annual written report to the Superintendent. However, the policy alone is insufficient to meet Preliminary compliance with this paragraph.

In the seventh reporting period, the City and the CPD remained out of compliance for ¶1389 because they could not demonstrate that they had advanced technology that afforded the production of data-driven reports to support the mission of the PCD services provided to its membership. Moreover, the City and the CPD did not submit the *2022 Report to the Superintendent*. The last submission of the Report to the Superintendent was dated 2021. During the seventh reporting period, the PCD indicated that the *2022 Report to the Superintendent* would be completed by the Director of Wellness, which remained unfilled for the duration of 2022.

#### *Progress in the Eighth Reporting Period*

During this reporting period, the CPD indicated that the *Annual Report to the Superintendent* would be placed on hold as the CPD tried to improve the process, with the Director of Wellness ensuring that the report included all relevant wellness activities, such as training, communications, and data collection.

Later in the eighth reporting period, however, the CPD completed the *2022 Annual Report to the Superintendent*. The report did not accurately capture significant milestones during 2022. For example, the report did not accurately capture the nuances of the PCD's attempts to implement iCarol. Moreover, the PCD simply does not have the data to accurately describe the required elements of ¶1389 in the *Annual Report*.

At the end of the eighth reporting period, the PCD indicated it would combine 2023 and 2024 *Annual Reports*. This issue remained unresolved at the end of this reporting period.

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The City and the CPD did not reach any level of compliance with ¶1389 during the eighth reporting period. As noted in the seventh reporting period, the IMT continues to look forward to the CPD and the PCD establishing a data-driven program

that reflects the services provided, which could be superbly highlighted in a future *Annual Report to the Superintendent*.

### Paragraph 389 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## Officer Wellness and Support: ¶390

**390.** CPD currently employs three licensed mental health professionals and a supervising psychologist who serves as the Director of CPD's Professional Counseling Division. CPD offers free counseling services to CPD members through the Professional Counseling Division and through external referrals in certain circumstances. CPD will expand its capacity to provide the counseling services to CPD members as set forth in this Agreement.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (FOURTH REPORTING PERIOD)
<b>Secondary:</b>	<b><i>In Compliance</i></b> (FOURTH REPORTING PERIOD)
<b>Full:</b>	<b><i>Not in Compliance</i></b>

The City and the CPD maintained Preliminary and Secondary compliance with ¶390 during the eighth reporting period.

To assess Preliminary compliance with ¶390, we reviewed the CPD's relevant policies. To assess Secondary compliance, we reviewed records sufficient to demonstrate that the CPD has qualified personnel fulfilling the responsibilities required by ¶390. To evaluate Full compliance, we considered whether the CPD has allocated sufficient resources to create, staff, fill, and maintain positions with qualified personnel as necessary to fulfill the Consent Decree requirements.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶390 by submitting the *Officer Wellness Support Plan*, the Professional Counseling Division's (PCD's) Standard Operating Procedure (SOP) 19-01, and directive E06-01 *Professional Counseling Division*. Together, these outline the PCD's staffing and resource needs and demonstrate efforts to ensure those resources are utilized appropriately.

The City and the CPD achieved Secondary compliance with ¶390 in the fourth reporting period by hiring additional, qualified clinicians to better address the needs of CPD members.

During the fifth reporting period, the City had approved the hiring of 11 additional mental health clinicians for the PCD. At the time, the CPD employed a total of 13 clinicians, including the Director and the Assistant Director. During the fifth, sixth, and seventh reporting period, the PCD detailed its challenges to fill additional positions. While the PCD hired some new clinicians, many of the positions remained vacant.

Additionally, despite creating 11 additional clinical positions, by the seventh reporting period, the CPD had not demonstrated the levels of PCD services through data. Without sufficient data, the CPD cannot determine whether 24 positions are sufficient to staff and manage the mental health work/caseload of services provided to all CPD employees.

*Progress in the Eighth Reporting Period*

The CPD and the PCD demonstrated little progress toward the requirements of this paragraph during the eighth reporting period. To date, the CPD and the PCD have not produced data to reflect those served, nor has it produced data to demonstrate that the PCD has offered referrals for these services to further assist with a specific need or special circumstance. Moreover, the PCD indicated that clinician caseloads were ever-changing. The IMT remains concerned with the lack of empirical data, to include the number of individuals seen (sworn and non-sworn), the demographics of the client, the number of spouses vs. children, and the ages of those seen. We also remain concerned about the timeline for full implementation of the iCarol system, which was recently halted.

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The City and the CPD maintained Preliminary and Secondary compliance during the eighth reporting period. To achieve Full compliance, the CPD must implement reliable and valid data solutions to track and assess member’s wellness needs and use of Professional Counseling Division’s services and respond to the data appropriately.

**Paragraph 390 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019</p> <p>COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020</p> <p>COMPLIANCE PROGRESS: Not Applicable</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020</p> <p>COMPLIANCE PROGRESS: Status Update</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021</p> <p>COMPLIANCE PROGRESS: Secondary</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021</p> <p>COMPLIANCE PROGRESS: Secondary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022</p> <p>COMPLIANCE PROGRESS: Secondary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022</p> <p>COMPLIANCE PROGRESS: Secondary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023</p> <p>COMPLIANCE PROGRESS: Secondary</p>	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (SECOND REPORTING PERIOD)
<b>Secondary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Full:</b>	<b><i>Not in Compliance</i></b>

The City and the CPD maintained Preliminary and Secondary compliance with ¶391 during the eighth reporting period but did not achieve Full compliance.

To evaluate Preliminary and Secondary compliance with ¶391, we considered the staffing levels of the Professional Counseling Division (PCD), the demand for services, and the types of services provided by the PCD. While the CPD may contract with mental health professionals under the paragraph, we considered whether the CPD had sustainably staffed and developed the PCD, without the need for contractors.

For Full compliance with this paragraph, we determined whether the CPD maintained appropriate staffing levels, and demonstrated a continued ability to assess and address staffing and resources needs, as informed by a fully implemented software solution that adequately tracks necessary data. The CPD must evaluate the wellness needs of all employees to ensure that the supply of services is efficiently and effectively addressing those needs.

### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶391 by hiring additional clinicians, expanding the resources of the PCD, maintaining staff levels, and strategically assigning its clinical workforce. Additionally, the PCD submitted evidence of 187 peer support members, five drug and alcohol counselors, and six chaplains providing wellness services to CPD personnel.

During the fifth reporting period, the City had approved the hiring of 11 additional mental health clinicians for the PCD. At the time, the CPD employed a total of 13 clinicians, including the Director and the Assistant Director. During the fifth, sixth, and seventh reporting period, the PCD detailed its challenges to fill additional positions. While the PCD hired some new clinicians, many of the positions remained vacant.

In the seventh reporting period, the CPD continued to struggle to produce data that supported the increase of the mental health clinicians, identifies the case-loads, or volume of services currently provided. Also, during the seventh reporting period, the CPD and the PCD began testing the iCarol system while still completing the manual forms and entering data into the new iCarol system, which has since been halted.

*Progress in the Eighth Reporting Period*

During the eighth reporting period, the CPD continued to work towards filling the vacant clinician positions. The PCD voiced challenges they face with hiring, due to competitive hiring, market-based salaries, the hours, shifts, and callouts. The PCD and the City’s Department of Human Resources (DHR) worked together to create more marketable positions.

Finally, the CPD advised they are developing the next needs assessment. We hope to review reliable data as part of the needs assessment.

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Therefore, the City and the CPD maintained Secondary compliance but did not reach Full compliance with ¶391 this reporting period.

**Paragraph 391 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	



## Officer Wellness and Support: ¶392

**392.** CPD will ensure that its staff of licensed mental health professionals includes individuals with specialized training in one or more of each of the following subjects: posttraumatic stress disorder, domestic violence, alcohol and substance abuse, anger management, depression, and anxiety.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Preliminary:** *In Compliance* (FOURTH REPORTING PERIOD)  
**Secondary:** *In Compliance* (FOURTH REPORTING PERIOD)  
**Full:** *Not in Compliance*

The City and the CPD maintained Secondary compliance with ¶392 during the eighth reporting period.

To assess Preliminary compliance with ¶392, we reviewed the CPD’s relevant policies. To assess Secondary compliance, we reviewed records indicating that the CPD has qualified personnel fulfilling the responsibilities required by ¶392. We also considered whether the CPD has allocated sufficient resources to create, staff, fill, and maintain positions with qualified personnel as necessary to fulfill the requirements of the Consent Decree. To determine Full compliance with ¶392, we sought to determine whether CPD’s licensed mental health professionals have the specialized training required by this paragraph.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶392 by submitting the *Officer Wellness Support Plan* and Standard Operating Procedure (SOP) 19-01, which include the requirements of this paragraph.

At the end of the fifth reporting period, the PCD employed 13 licensed mental-health professionals, including the Director and Assistant Director. The credentials of these clinicians reflect the diverse skill sets needed for the demands of the CPD members seeking related services. This information is conveyed in the clinicians’ respective bios and on the CPD’s wellness page of its website.<sup>2</sup> During a discussion with the IMT during the fifth reporting period, clinicians in the PCD identified the top three areas in which CPD members require services, and stated the staff had expertise in those areas, as they were not outside the scope articulated in ¶392.

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<sup>2</sup> <https://home.chicagopolice.org/inside-cpd/employee-assistance-program-eap/counseling-services/>.

During the sixth reporting period, the Professional Counseling Division lost two of the licensed clinicians due to retirements and were working to fill those vacancies. During the seventh reporting period, the PCD experienced some flux in staffing in addition to barriers to members keeping their scheduled counseling appointments. In a virtual site visit with the clinicians, the counselors advised there were considerable concerns around officers’ days off being routinely canceled because of deployment, which creates ongoing stressors for both them and their families.

*Progress in the Eighth Reporting Period*

The CPD made some progress toward Full compliance in this reporting period. For example, each district is now assigned to a specific counselor as a point of contact. During site visits this reporting period, at one of the district stations, the IMT observed a posting of background information about the counselor assigned to that district and the counselor’s contact information. We recommend that each district station do the same. We also note that the counselors referenced seeing an increase in trauma-related concerns.

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The City and the CPD maintained Secondary Compliance with ¶392 during the eighth reporting period. The IMT looks forward additional data demonstrating how the CPD ensures that “its staff of licensed mental health professionals includes individuals with specialized training” per the requirements of ¶392.

**Paragraph 392 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Not Applicable</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Secondary</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Secondary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Secondary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Secondary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Secondary</p>	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance (FOURTH REPORTING PERIOD)</i></b>
<b>Secondary:</b>	<b><i>In Compliance (FOURTH REPORTING PERIOD)</i></b>
<b>Full:</b>	<b><i>Not in Compliance</i></b>

The City and the CPD maintained Preliminary and Secondary compliance with ¶393 in the eighth reporting period.

To assess Preliminary compliance with ¶393, we reviewed the CPD’s relevant policies and data, such as the Professional Counseling Division (PCD) clinicians’ biographies, which are relevant to compliance with the requirements of this paragraph. To assess Secondary compliance, we considered whether the CPD has qualified and diverse personnel who are trained to address the wellness needs and concerns of a diverse population. To determine Full compliance with ¶393, we sought to determine whether the CPD has sufficient services in place to provide diverse support to all CPD employees, both sworn and non-sworn.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶393 by submitting the *Officer Wellness Support Plan*, which sets out expectations that promote the training and development of officer wellness initiatives that are sensitive to the diversity found within the CPD and the community at large. The City and the CPD achieved Secondary compliance with ¶393 by submitting the biographies of PCD clinicians, as well as evidence that they receive feedback regarding support services by conducting various focus groups that touched on topics of diversity within PCD services, as shown in the *2021 Report to the Superintendent*.

In the sixth reporting period, the IMT reviewed clinicians' credentials and specializations, which ranged from advance certifications in couples and family counseling to intensive trauma and stress therapy, music therapy, substance use disorder treatment, cognitive behavioral therapy, and mindfulness. The clinicians also had tenured careers that ranged from 12 to 22 years of experience.

However, as noted in the fifth reporting period, the PCD did not provide any evidence of compliance with subparagraph (b). The PCD should solicit feedback from CPD members receiving services regarding the appropriateness of those services as it relates to culture and the adaptation of diverse experiences and perspectives.

During the seventh reporting period, the PCD's data system, iCarol, was in the testing phase, and the PCD expressed its hope that it could build the system out to meet its needs. The IMT, however, has yet to review specific data that correlates PCD services to specific groups within the CPD or specific documental related to cultural competence and the requirements of this paragraph, and the iCarol system has since been halted.

#### *Progress in the Eighth Reporting Period*

In the eighth reporting period, with respect to ¶1393(a), the IMT reviewed documentation that reflects that all counselors, including the newest clinicians, have proper training.

With respect to ¶1393(b) and (c), the CPD did not produce any data specific to feedback regarding the services that members have received from the PCD. We continue to encourage the CPD and the PCD think through how best to provide opportunities for anonymous feedback and to take appropriate corrective action.

We note that the CPD has implemented several programs that specifically reflect the agency's effort to meet the needs of its diverse population, based on various subgroups within the agency as well as specific counseling needs. During both the seventh and the eighth reporting periods, the PCD offered couples retreats and hosted daily meetings for No Cop Outs.<sup>3</sup> The PCD also hosted regular meetings of LGBTQ+ members, and family-based survivor support groups.

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Therefore, the City and the CPD maintained Secondary compliance but have not reached Full compliance with ¶1393 in the eighth reporting period.

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<sup>3</sup> <https://home.chicagopolice.org/inside-cpd/employee-assistance-program-eap/alcohol-assistance-program/no-cop-outs/>.

## Paragraph 393 Compliance Progress History

FIRST REPORTING PERIOD  
SEPTEMBER 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:  
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

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary Compliance with ¶394 during the eighth reporting period.

To assess Preliminary compliance with ¶394, we reviewed the CPD's relevant policies, and to assess Secondary compliance, we interviewed the CPD counselors about external referrals and sought to review data measuring the frequency and efficacy of outside referrals that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD reached Preliminary compliance with ¶394 by addressing referral to third-party vendors in the *Officer Wellness Support Plan*, the *2021 Report to the Superintendent*, and Standard Operating Procedure (SOP) 19-01. During the fifth reporting period, the CPD detailed the various forms of referrals, the scope of work, workload, and accessibility of the Professional Counseling Division (PCD), along with the types of conditions, counseling, and services that are beyond the scope of the PCD.

During the sixth reporting period, the clinicians described the referral process to the IMT, which begins with the PCD's weekly meetings with the clinicians. During these weekly meetings, the clinicians discuss clients' status, treatment plans, and recommendations for referrals. Referrals are entered into the CLEAR System with documentation of follow-up entered at the time of the call and when debriefings occur.

During the seventh reporting period, the CPD and the PCD piloted the iCarol system, which should collect and anonymize data and allow for data analysis but has since been halted. The PCD failed to submit a report to the superintendent in 2022,

so did not provide documentation to support validation that the referrals have occurred beyond discussions during virtual meetings.

*Progress in the Eighth Reporting Period*

Since the fourth reporting period—and into the eighth reporting period—the City and the CPD have made little to no progress toward compliance with ¶394. The CPD has not provided any supporting data to show that PCD is meeting the requirements of ¶394.

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In the eighth reporting period, the City and the CPD maintained Preliminary compliance, but have yet to reach additional levels of compliance with ¶394. The City and the CPD cannot reach further levels of compliance until they collect and provide reliable data to demonstrate compliance.

**Paragraph 394 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance but did not achieve Secondary compliance with ¶395 during the eighth reporting period.

To assess Preliminary compliance with ¶395, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we interviewed the CPD counselors about the requirements of this paragraph and considered available data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶395 by finalizing Directive E06-01 and Standard Operating Procedure (SOP) 19-01. Collectively, these policies establish an on-call system whereby a licensed clinician will be available 24 hours a day to respond to all crises and traumatic incidents and that emergency counseling sessions will be conducted within 24 hours of the request.

For non-emergency situations, both policies note that general counseling sessions with the Employee Assistance Program (EAP) licensed mental-health professionals will be held within two weeks of a member’s request. Although the requirements of this paragraph are reflected in policy, the IMT has not received documentation to indicate that the span of time between request and rendering of support services adequately reflect the times stipulated in ¶395.

During the fifth and sixth reporting periods, the Professional Counseling Division (PCD) indicated that the officers’ schedules and various other demands occasionally challenge the required turnaround times. In the seventh reporting period, the PCD had begun entering data into the iCarol system, manually collected paper records, and maintained information in the CLEAR system. However, usage of the iCarol system has since halted.



It should be further noted that, during the seventh reporting period, the CPD audited the *Traumatic Incident Stress Management Program* (TISMP). Although the program is more specific to ¶¶407-08 and 411, the TISMP is also addressed in policy E06-03 and includes the necessity for the 24-hour meeting requirement. The audit found that they were gaps in the referral process that were probably created by, but not specifically limited to, the lack of training, human error, or unintentional omissions for referral. As noted in the OAG’s response to the TISMP audit production, improved accounting and recordkeeping are critical to resolve or mitigate those issues. The audit was telling, but it should also be noted that the audit used 2021 data.

*Progress in the Eighth Reporting Period*

The CPD made limited progress toward compliance during the eighth reporting period.

Given the critical nature of the work that the PCD is doing, and the increased volume of traumatic experiences they have referenced during discussions, the CPD must find the technological means to collect appropriate data to measure their work and track the time requirements of ¶395.

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The City and the CPD maintained Preliminary compliance but have not yet reached Secondary compliance with ¶395 in the eighth reporting period.

**Paragraph 395 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Not Applicable</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary</p>	

## Officer Wellness and Support: ¶396

*396. CPD will continue to ensure that any mental health counseling services provided to CPD members remain confidential in accordance with state law, federal law, and current CPD policy.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance (FOURTH REPORTING PERIOD)</i></b>
<b>Secondary:</b>	<b><i>Not in Compliance</i></b>
<b>Full:</b>	<b><i>Not Yet Assessed</i></b>

During the eighth reporting period, the City and the CPD maintained Preliminary compliance with ¶396.

To assess Preliminary compliance with ¶396, we reviewed the CPD’s relevant policies, and to assess determine Secondary compliance with ¶396, we sought to review the CPD’s training development, implementation, and evaluation.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance by submitting Directive E06-01 and Standard Operating Procedure (SOP) 19-01. Both policies stress privacy and confidentiality. During the fifth reporting period, the CPD submitted training curricula including *Employee Assistance Program (EAP)*, *Peer Support*, *Peer Support Refresher*, *Supervisor In-Service Training*, and *Officer In-Service Training*.

In the sixth reporting period, the IMT observed the *Peer Support Refresher Training* and noted the emphasis on confidentiality and its importance as it related to the expectations of those providing counseling services and those receiving the services. Also in the sixth reporting period, the CPD submitted the *Employees Assistance Program Recruit Training* curriculum for review, which introduces the Professional Counseling Division (PCD) and its counseling services along with an emphasis on the free and confidential programs available for all active and retired CPD members and their families. The IMT also reviewed the *CIT In-Service* training, which includes a module addressing officer wellness that emphasizes the importance of confidentiality, including the exceptions of confidentiality as designated by law.

During the seventh reporting period, the IMT heard some CPD members express concerns that the CPD administrators are aware of their counseling experiences and did not feel that the counseling sessions provided were confidential. The IMT strongly encouraged the CPD and the PCD to continue to identify ways to further

promote trust and confidentiality in the services they provide to the CPD membership.

*Progress in the Eighth Reporting Period*

The CPD made limited progress toward compliance with the requirements of this paragraph. The issue of confidentiality remains at the forefront of the CPD membership’s trust in Employee Assistance Program (EAP) services. The IMT looks forward to the CPD demonstrating where, when, and how confidentiality is routinely demonstrated and emphasized.

Additionally, while some CPD employees expressed distrust in the confidentiality of the PCD’s new wellness app, the CPD indicated that the wellness app was set to rollout toward the end of the eighth reporting period. The IMT is unaware of whether the rollout occurred before the end of the reporting period.

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The City and the CPD maintained Preliminary compliance with ¶396 but did not achieve further compliance levels in the eighth reporting period. We look forward to further training, development, implementation, and evaluation for the City and the CPD to reach Secondary compliance.

**Paragraph 396 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## Officer Wellness and Support: ¶397

*397. CPD will continue to ensure that licensed mental health professionals employed by the Professional Counseling Division do not participate in fitness for duty evaluations, which will be conducted exclusively by third-party licensed mental health professionals.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with ¶397 in the eighth reporting period.

To assess Preliminary compliance with ¶397, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we sought to review data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶397 by submitting Directive E06-01, *Professional Counseling Division (PCD)*, which prohibits the PCD from participating in fitness-for-duty evaluations. The requirements stipulated in E06–01 clearly articulate that the “licensed mental health professionals employed by the Employees Assistance Program will not participate in the fitness for duty evaluations,” as required by this paragraph.

During interviews with PCD staff in the fifth, sixth, and seventh reporting periods, they affirmed that they do not participate in fitness for duty evaluations and discussed the importance of not being involved in same as they are providing counseling to the various members of the CPD. The CPD, however, had not submitted data to demonstrate compliance. To provide this data, the City and the CPD will need to ensure that it has an adequate technological solution in place to collect such data.

#### *Progress in the Eighth Reporting Period*

During the eighth reporting period, the IMT met with members of the CPD’s fitness for duty unit to learn about the fitness for duty evaluation process, where we learned that the Office of Public Safety Administration is tasked with hiring and

vetting vendors for contractual services for fitness for duty evaluations. They further affirmed that members of the PCD are not involved with the fitness for duty process as is required by ¶397.

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The City and the CPD maintained Preliminary compliance with this paragraph in the eighth reporting period. To assess Secondary and Full Compliance, the IMT must review data to verify these reform efforts. The IMT will have further discussions with the City and the CPD in the ninth reporting period regarding the evidence necessary to demonstrate compliance with this paragraph.

### Paragraph 397 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary Compliance with ¶398 in the eighth reporting period.

To assess Preliminary compliance with ¶398, we reviewed the CPD’s relevant policies. To assess Secondary compliance with ¶398, we interviewed the CPD counselors about the requirements of this paragraph and sought to review anonymized data of the drug and alcohol services provided to include the various ranks, non-sworn and sworn classifications, any non-CPD departments seeking services, and all other tracking-related data.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶398 by including this paragraph’s requirements in Standard Operating Procedure (SOP) 19-01 and Directive E06-01. Furthermore, SOP 19-01 supports ¶398 compliance by requiring that all drug and alcohol counselors will be certified by the State of Illinois.

During the fourth and fifth reporting periods, the Professional Counseling Division (PCD) had five drug and alcohol counselors on staff. Three of the five counselors had received their certifications, and the other two counselors were in the process of receiving their certifications. In the sixth reporting period, the PCD had four out of six allocated full-time drug and alcohol counselors on staff, and the IMT learned five CPD officers had been interviewed to fill the two vacancies caused by retirements.

During the fifth and sixth reporting periods, it was noted that the drug and alcohol unit had manually tracked information via paper forms. The IMT inquired about the number of CPD members that are currently being served by the drug and alcohol counselors. However, the PCD did not provide empirical data to confirm the

estimates. With the iCarol system under development during the sixth reporting period, the drug and alcohol counselors could only provide anecdotal information regarding the number of CPD members they were seeing at that time.

While the counseling services are free, in the seventh reporting period, the IMT inquired again about the caseload and whether there was adequate staffing to address the needs of the CPD membership. Like other PCD units, the data must be digitized and analyzed before the IMT can gain a clear understanding of operational needs. We were also informed that historical data would not be inputted to the iCarol system, and that the iCarol implementation has since been halted.

### *Progress in the Eighth Reporting Period*

As of the eighth reporting period, the PCD had six alcohol and drug counselors, and were attempting to fill one vacancy. At least two of the counselors were still in the process of receiving their certifications, which was delayed due to the pandemic. We also note that the functionality of the unit continues to be challenged by the access to reliable CPD vehicles, and at times, the counselors use their personal vehicles, which may cause a liability issue for the CPD.

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The City and the CPD maintained Preliminary compliance in the eighth reporting period. Again, the IMT looks forward to data that supports the service delivery model of the PCD. Until the IMT can review relative anonymized data to support the delivery of free services to the CPD membership, the CPD cannot reach additional levels of compliance with ¶398.

### Paragraph 398 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with ¶399 in the eighth reporting period.

To assess Preliminary compliance with ¶399, we reviewed the CPD’s relevant policies and reviewed records that demonstrate whether the CPD has qualified personnel fulfilling the responsibilities required by ¶399. We considered whether the CPD has allocated sufficient resources to create, staff, fill, and maintain positions with qualified personnel as required by this paragraph.

To assess Secondary compliance with ¶399, we interviewed CPD counselors about the requirements of this paragraph and considered available data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶399 by creating guidance through Directive E06-01 and the *Officer Wellness Support Plan* for frequent provision of alcohol and substance use-related services, as well as guidance for tracking activities. However, to collect sufficient and reliable data that can be used to assess the extent to which services are meeting the needs of members, the City and the CPD must focus efforts on obtaining and implementing a technology solution. Additionally, we need to see evidence of data analyses related to the demand and available resources for substance and alcohol use counseling.

During the fifth, sixth, and seventh reporting periods, the Professional Counseling Division (PCD) continued to collect data regarding the available services via weekly paper tracking forms but did not show evidence that it was being measured or analyzed. As noted in ¶398, the counselors have difficulty tracking their caseload without adequate technology in place. Beyond their weekly review of their entries, they have little to no feedback on the cumulative data reflective of their respective



caseloads. Thus, the data is not available to adequately determine whether there is sufficient staffing to meet the needs of the CPD membership.

*Progress in the Eighth Reporting Period*

The CPD and the PCD made limited progress toward compliance with this paragraph during this reporting period. The CPD currently employs six alcohol and drug counselors. In the eighth reporting period, the IMT interviewed some of the counselors during a site visit, and they revealed that they were unaware of how many clients are currently in an intensive outpatient program. It is also important to note that during our interviews, the counselors shared that they did not feel they were adequately staffed. Though again, the CPD lacks the data necessary to conduct an empirical staffing analysis.

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Therefore, the City and the CPD maintained Preliminary compliance with ¶399. To reach further levels of compliance, the CPD must submit anonymized data demonstrating caseload management, volume of cases, ratio of counselor to client, the timeliness of meetings, and referrals to and from the alcohol and drug counselors.

**Paragraph 399 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## Officer Wellness and Support: ¶400

*400. CPD will ensure that its drug and alcohol counselors are certified in Illinois as Certified Alcohol and Other Drug Abuse Counselors.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<i>In Compliance (FOURTH REPORTING PERIOD)</i>
<b>Secondary:</b>	<i>Not in Compliance</i>
<b>Full:</b>	<i>Not Yet Assessed</i>

The City and the CPD maintained Preliminary compliance with ¶400 during the eighth reporting period.

To assess Preliminary compliance with ¶400, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we determined whether the CPD’s drug and alcohol counselors are properly certified. For Full compliance, we will seek to determine whether CPD systematically ensures that counselors have the necessary certifications.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance by submitting Directive E06-01, which addresses the requirements of ¶400. By the seventh reporting period, only three of the four counselors were fully certified, with the fourth counselor was awaiting notification of date, time, and location to take the state exam. Additionally, all the counselors are currently in different stages in obtaining the 40 continuing education hours every two years, as mandated by the State of Illinois.

#### *Progress in the Eighth Reporting Period*

By the end of the eighth reporting period, three of five alcohol and drug counselors are fully certified.

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The City and the CPD maintained Preliminary compliance with ¶400 during the eighth reporting period. The IMT continues to look forward to reviewing records demonstrating that all alcohol and drug counselors have completed their certifications.

## Paragraph 400 Compliance Progress History

FIRST REPORTING PERIOD  
SEPTEMBER 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

## Officer Wellness and Support: ¶401

**401.** CPD currently offers anonymous support groups and programs for alcoholism and other addictions. CPD will ensure that a licensed mental health professional assigned to the Professional Counseling Division oversees any such programs offered by CPD, that the programs adhere to generally accepted practices in the field of addiction treatment (e.g., 12-step addiction treatment program), and that each program is reviewed at least annually by the Director of the Professional Counseling Division.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Recurring Schedule:** Annually  **Met**  **Missed**

**Preliminary:** *In Compliance* (SECOND REPORTING PERIOD)

**Secondary:** *In Compliance* (THIRD REPORTING PERIOD)

**Full:** *Not in Compliance*

During the eighth reporting period, the City and the CPD maintained Preliminary and Secondary compliance with ¶401.

To determine Preliminary and Secondary compliance with ¶401, we determined whether the CPD has a licensed health professional and whether the CPD's programs adhere to generally accepted practices as required by this paragraph. To assess Full compliance, we sought to determine whether the Professional Counseling Division (PCD) Director is completing annual reviews of substance-use-disorder services as called for by the paragraph. To make this determination, we reviewed a variety of information relevant to compliance, including document submissions of the City and the CPD, and interviews with CPD members and PCD clinicians and staff.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶401 by increasing staffing of the Employee Assistance Program (EAP) with several substance use disorder treatment counselors and demonstrating the organization and supervision of the services, clinicians, and number of members utilizing the services. However, the IMT had not yet received an annual review of the services conducted by the Director of the PCD. This annual review should include an assessment of each program to ensure they are adhering to generally accepted practices in the field of addiction treatment.

In the seventh reporting period, the IMT conducted virtual site visits with a several of the various PCD units. However, while the PCD Director oversees the various

units and programs offered by the PCD, as required by this paragraph, the IMT had not received any evidence that an annual assessment has been conducted for each of the programs, which is also required under this paragraph.

*Progress in the Eighth Reporting Period*

The CPD made limited progress toward compliance with this paragraph in the eighth reporting period. The Director of the PCD is a licensed mental health professional and oversees the various PCD units. However, the Director’s annual review has not been submitted to the IMT. The evaluation of each PCD program is separate from the *Annual Report to the Superintendent*, as it offers a broader summary of wellness activities, encompassing a year in review.

Additionally, as required by this paragraph, the PCD offers anonymous support groups and programs for alcoholism and other addictions. The “No Cop Outs” meetings are premised on the group support models of AA and NA. These meetings are scheduled six days a week, and the meeting times and schedule are posted in the district stations. While the PCD counselors are holding these sessions regularly, supplies such as guidebooks were not always available.

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The City and the CPD maintained Secondary compliance with ¶401 in the eighth reporting period. None of the required information by this paragraph can be definitively determined if the CPD cannot show an effort to capture basic metrics. The IMT looks forward to improved data collection and analysis in future reporting periods.

**Paragraph 401 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance but did not achieve Secondary compliance with ¶402 during the eighth reporting period.

To assess Preliminary compliance with ¶402, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we reviewed the CPD’s training development, implementation, and evaluation. We also considered available data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶402 by submitting Standard Operating Procedure (SOP) 19-01 and Directive E06-01. These policies include provisions requiring supervisors to be trained on the signs and symptoms of alcohol use disorder, as well as be trained on recommending support services and reporting members exhibiting signs of impairment.

During the fifth reporting period, we reviewed the *Employee Assistance Program Pre-Service Promotional* training. This training addresses ¶402’s requirements and has received no objection notices from both the IMT and the OAG. In the sixth reporting period, the IMT reviewed a revised *Annual Supervisor In-Service* training for 2022. The lesson plan definitively outlined the role and expectations of the supervisor per the requirements outlined in ¶402, SOP 19-01, and Directive E06-01. In the seventh reporting period, the IMT had still not seen evidence that these trainings had been completed nor a plan for continued training on these topics.

*Progress in the Eighth Reporting Period*

During the eighth reporting period, the CPD submitted Special Order, S11–10-02, *Pre-Service Training*, which required pre-service training for sergeants and lieutenants. The policy stated that the training would include, among other topics:

- a. Recognizing signs and symptoms of alcohol use and substance use disorders, recommending the department, member to support services, and reporting obligations of members, exhibiting signs of alcohol and drug impairment.

The CPD also submitted evidence that over 95% of CPD members completed the CIT in-service training.

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The IMT acknowledges the CPD’s efforts in providing the appropriate training to supervisors. However, the CPD has not produced any evidence that they are providing training on this topic for non-sworn supervisors. Paragraph 402 requires “all supervisors” to receive training on recognizing signs and symptoms of alcohol and substance abuse, which would include both sworn and non-sworn supervisors. Therefore, the City and the CPD maintained Preliminary compliance, but have yet to reach further compliance levels with this paragraph.

**Paragraph 402 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.

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### Compliance Progress (Reporting Period: January 1, 2023, through June 30, 2023)

**Recurring Schedule:** May 3, 2023  **Met**  **Missed**

**Preliminary:** *In Compliance (FOURTH REPORTING PERIOD)*

**Secondary:** *Not in Compliance*

**Full:** *Not Yet Assessed*

The City and the CPD maintained Preliminary compliance with ¶404 during the eighth reporting period.

To evaluate Preliminary compliance with ¶404, we considered whether the CPD has allocated sufficient resources to maintain the peer support program and whether the CPD offers peer support officers the opportunity to meet at least annually to share strategies and enhance the program. We reviewed all accessible data relevant to ¶404 efforts, including records of meetings, and considered other sources of data, such as communications with CPD members, and any policies developed regarding the peer support program.



To assess Secondary compliance, we considered the CPD’s training development, implementation, and evaluation relevant to the various requirements of this paragraph, as well as other data sources showing implementation of programs or actions specified in relevant policies that direct compliance with the various subsections of this paragraph.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD reached Preliminary compliance with ¶404 by submitting Directive E06-01 and Standard Operating Procedure (SOP) 19-01, which created a framework under which the CPD can reach compliance with all subsections. The IMT reviewed documentation during the fourth reporting period showing that CPD approved an award for peer support leadership and held meetings with peer support members in 2020 and 2021. These documents demonstrate efforts in accord with the requirements of ¶404 (d) and (f). Related specifically to the requirements ¶404 (b) and (c), the CPD submitted revised *Peer Support Training* materials in the fourth reporting period to which the IMT submitted a no-objection notice.

During the sixth and seventh reporting periods, the IMT again met with the members of the Peer Support program in virtual site visits. As noted in ¶401, the Director of Professional Counseling Division (PCD), who is a licensed mental health professional, continues to oversee all entities within the division including the Peer Support program, as required by subparagraph (a). The IMT virtually met with the Director on several occasions throughout the seventh reporting period during monthly meetings and site visits.

In interviews with peer support members, they shared that there is an average of 10 members on call at a time along with one lead peer member, and that there is one car available for the unit. Many peer support members shared that they frequently responded to events via their personal vehicles. At times, depending on how many callouts occur at the same time or due to the complexity of the circumstances, members are picking up family members in their personal vehicles and transporting them to hospitals and other specific locations. The IMT suggested that the CPD further evaluate this process logistically and with consideration to any liability created using personally owned vehicles.

Furthermore, we learned that some peer support members are more involved in responding to the CPD members’ needs than others, which mirrors the findings in the Office of the General Inspector’s report on Peer Support and Supervisory Wellness Support Strategies.<sup>4</sup> We recommended that the City and the CPD review and

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<sup>4</sup> [https://igchicago.org/2022/11/02/the-chicago-police-departments-peer-and-supervisory-wellness-support-strategies/#:~:text=The%20Office%20of%20Inspector%20General,\(PSP\)%20and%20\(2\).](https://igchicago.org/2022/11/02/the-chicago-police-departments-peer-and-supervisory-wellness-support-strategies/#:~:text=The%20Office%20of%20Inspector%20General,(PSP)%20and%20(2).)

refine the notification process to ensure equitable distribution and response of the peer support members.

By the end of the seventh reporting period, the IMT still had no evidence to determine how the CPD and the PCD quantifies the scope of the Peer Support services provided to the CPD membership. The CPD had not demonstrated how it facilitates effective management of the program to preserve anonymity and confidentiality of members receiving peer support services. Moreover, peer support members were still required to manually enter their peer support engagement and service encounters on paper forms.

#### *Progress in the Eighth Reporting Period*

During the eighth reporting period, the IMT visited with peer support members and was informed that, currently, there are 198 peer support members, which also includes three non-sworn members. The IMT inquired about the process that disqualifies a member from serving as a peer support member and learned that there are several circumstances that could result in disqualifying someone, including a violation of confidentiality, lack of commitment, self-selection to leave, or a member asks to be put on leave.

Specific to ¶404(a), the IMT confirmed the Director of the PCD, a licensed mental health professional, continues to oversee the Peer Support program.

Per ¶404(d), members are required to meet annually to identify and share experiences in ways to enhance the program. During the site visit in the eighth reporting period site visit, several members referenced an “all teams” meetings, which is a face-to-face meeting. They felt the feedback during the meetings was positive. They also referenced the benefit of having refresher training.

Per ¶404(e), the City and the CPD submitted Directive E06-01 and SOP 19-01 and received from Preliminary compliance during the fourth reporting period.

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Undoubtedly, the PCD and CPD are providing services that are beneficial in some ways to the CPD membership and their families. However, there has been no data submitted to reflect the PCD’s delivery of many of its services. The complexity of ¶404 requires multiple facets of wellness to be addressed and multiple paragraph subsections with which to demonstrate compliance to reach additional levels of compliance. Therefore, the City and the CPD maintained Preliminary compliance, but have yet to reach Secondary compliance in the eighth reporting period.

## Paragraph 404 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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: Under Assessment
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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (SECOND REPORTING PERIOD)
<b>Secondary:</b>	<b><i>In Compliance</i></b> (THIRD REPORTING PERIOD)
<b>Full:</b>	<b><i>Not in Compliance</i></b>

The City and the CPD maintained Preliminary and Secondary compliance with ¶406 during the eighth reporting period.

To assess Preliminary compliance with ¶406, we reviewed the CPD’s relevant policies, and to assess Secondary compliance with ¶406, we reviewed the CPD’s training development, implementation, and evaluation.

To evaluate Full compliance with ¶406, we sought to determine whether the CPD had sufficiently implemented its policy and training resulting in the Chaplains Unit operating in a manner consistent with those materials. Additionally, we looked for evidence that the CPD implemented mechanisms to regularly assess whether the Chaplains Unit is operating in accordance with Standard Operating Procedure (SOP) 20-01 and whether adjustments should be made to the Chaplains Unit or to SOP 20-01.

### *Progress before the Eighth Reporting Period*

In prior reporting periods, the City and the CPD achieved Preliminary and Secondary compliance with ¶406 by revising and finalizing SOP 20-01 and submitting and revising the Chaplains Unit SOP training materials, along with documentation demonstrating the chaplains' review of the training materials.

During the fifth reporting period, we reviewed a revised version of SOP 20-01 and issued a no objection letter. However, in our no objection letter issued for the policy, we reiterated that the CPD should strongly consider changing the "pastoral care" language with more inclusive terminology as the represented religions do not all typically use "pastoral" in their respective terminology. Moreover, the CPD should consider including a provision for confidentiality if a chaplain's religious ordination does not provide for a confidentiality privilege.

We also learned that the Chaplain's Unit was organizing a couples' retreat. During the sixth reporting period, the IMT met with the chaplains during a virtual site visit. The chaplains expressed that the couples' retreat was a success based on some limited evaluation data that was not shared with the IMT. A total of 10 couples attended the retreat, and all who registered attended.

During the seventh reporting period, the chaplains shared that four are currently located at the CPD training academy and another chaplain meets near the academy at a remote site. They all indicated that they spend a tremendous amount of time in their vehicles traversing Chicago but indicated that they appreciated the confidential nature of their role in meeting at their remote offices to avoid gossip or stigmatization of those seeking counseling. Because of the ability to be mobile, they visit hospitals, coffee, shops, parks, districts, stations. Their emphasis is on meeting people where they are, which benefits their effort to demonstrate confidentiality and trust.

The workload assessment remains a challenge as, by the end of the seventh reporting period, the IMT still have not receive a definitive indication of caseload the chaplains currently manage.

### *Progress in the Eighth Reporting Period*

The CPD made limited progress toward Full compliance during the eighth reporting period. The chaplains indicated that their caseloads vary in size and include a range of client personnel—from recruits to senior personnel within the CPD. However, like many other Professional Counseling Division (PCD) services, the data for the Chaplains Unit has not been presented to the IMT. While there seems to be significant chaplaincy contact with CPD membership on multiple levels, these contacts

are manually submitted on paper forms (like several of the PCD units) to the administrator who compiles a report to be shared with the Director of Wellness the following week.

Programmatically, the chaplains hosted another couples' retreat again in 2023. They are also working with partner organizations such as *Quilts for Cops*, which makes quilts for officers who are injured in the line of duty, and *Survivors of Suicide*, which holds both online and in person sessions.

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The City, the CPD, and the PCD have failed to share data reflecting the work of the Chaplains Unit. Therefore, the City and the CPD maintained Secondary compliance, but have yet to reach Full compliance with this paragraph. The IMT continues to look forward to data submissions in the near future.

### Paragraph 406 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶407 during the eighth reporting period.

To evaluate Preliminary compliance with ¶407, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we reviewed the CPD’s training development, implementation, and evaluation. We also considered available data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In the fourth reporting period, the City and the CPD achieved Preliminary compliance with ¶407 after finalizing the *Traumatic Incident Stress Management Program* (TISMP) directive (E06-03). The CPD also submitted clinicians’ training materials for the TISMP in the fourth reporting period. Further, the *2022 Annual Supervisor In-Service* training, included an instructional note to disseminate E06-03, among other resources, during the training.

During the sixth reporting period, the City and CPD submitted a *Traumatic Incident Stress Management Program* eLearning. The curriculum was clear, concise, and relevant with the specific policies noted along with information regarding counseling resources and ways to contact the Professional Counseling Division (PCD) for

services. The IMT also reviewed the *CIT In-Service* training curriculum during the sixth reporting period. The sixth module of the training covers officer wellness with specific information regarding the TISMP.

During the seventh reporting period, the CPD conducted an audit of the TISMP to assess the CPD's compliance with requirements outlined in ¶407 and ¶408. The audit covered the period from March 1, 2021, through December 31, 2021. The Audit Division determined that they were unable to identify the total number of CPD officers who should have been required to participate in the TISMP and noted that the CPD lacks a mechanism that systematically identifies officers involved in traumatic accidents. The Audit Division further noted that many types of potential traumatizing incidents members experience may not be captured in the existing forms and data. This TISMP audit reflects the critical nature of gaps, proper versus improper referrals, and the need for collective data that is required to identify where the greatest needs exist and what optimal remedies are available for those members who have experienced traumatic incidents. Given the gravity of trauma and the necessity for an effective and efficient program, the IMT recommended an expedited effort to address properly capturing the necessary codes and data.

#### *Progress in the Eighth Reporting Period*

In the eighth reporting period, the PCD informed the IMT that they believe they have reduced the amount of time it takes to be seen by a clinician upon being referred to the TISMP program. However, the PCD has not produced any data to support its belief. The TISMP audit recommended data-based indicators to assess the timeliness of response to ensure that individuals are not missed in the referral process. The IMT has not seen information that identifies any remedies that have been put in place to support follow through with mandatory referrals, efficiency of timeliness of counsel sessions, or aggregate data of those who have started and completed the TISMP program.

Finally, we note that the TISMP audit found that some personnel who met mandatory criteria for referral were never referred to the TISMP. In other instances, some personnel never reported to the counseling sessions even when they were referred to the TISMP program. The IMT has received no evidence that any supporting remedies are in place to show that these issues no longer exist.

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The City and the CPD maintained Preliminary compliance with ¶407. We look forward to progress on these important issues in the next reporting period.



## Paragraph 407 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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: 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶408 during the eighth reporting period.

To evaluate Preliminary compliance with ¶408, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, sought to review the CPD’s training development, implementation, and evaluation, as well as data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶408 by establishing language in *Traumatic Incident Stress Management Program (TISMP) Directive E06-03* that Professional Counseling Division (PCD) personnel follow up with members released from the TISMP within six months to offer additional support services. Although the TISMP directive had been finalized and the public comment period occurred during the fourth period, the IMT was not provided any records—for several reporting periods—that have addressed the sixth month follow-up that is required by ¶408.

As with ¶407, the CPD did not reach Secondary compliance during the fourth, fifth, sixth, or seventh reporting periods because the CPD did not provide the IMT with evidence that the TISMP clinicians’ training materials were finalized and delivered. The CPD submitted records in the seventh reporting period demonstrating that at least 95% of CPD members had completed the TISMP eLearning.

During the seventh reporting period, the IMT learned that the six-month follow-up required by ¶408 was not occurring. Instead, follow-up was inconsistent and intermittent at best. The Audit Division’s TISMP Audit (Finding 2) was unable to assess the CPD’s compliance with the ¶408 because the CPD does not have a mechanism for systematically verifying the follow-up calls between the PCD and

the referral members occur within six months. The audit recommended that the PCD ensure that it is recording the date follow-ups factually occur in its application and that the CPD should clarify in its directives the starting point for the six-month follow up.

*Progress in the Eighth Reporting Period*

The CPD made limited progress toward compliance with ¶408 in the eighth reporting period. During interviews with clinicians, they shared they have no structured mechanism in place for an automatic timer or notification prompting them to reach out to the employee as a follow up. Simply noted, the remedy for these issues appear to fall into an IT-related discussion, which with the proper programming, could afford the CLEAR system to prompt the last counselor who made an entry to follow up six months from the date of the last entry.

The IMT is concerned with the volume of traumatic events that the members have experienced in the last several reporting periods, where little to no movement has been made to rectify the potential for human omission/error.

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Thus, the City and the CPD maintained Preliminary compliance, but have yet to reach additional levels of compliance with ¶408. We are concerned about the lack of progress toward compliance with this paragraph’s requirements and urge the CPD to implement a valid system as soon as possible.

**Paragraph 408 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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: 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	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance (FIRST REPORTING PERIOD)</i></b>
<b>Secondary:</b>	<b><i>Not in Compliance</i></b>
<b>Full:</b>	<b><i>Not Yet Assessed</i></b>

The City and the CPD maintained Preliminary compliance but did not achieve Secondary compliance with ¶409 during the eighth reporting period.

To evaluate Preliminary compliance with ¶409, we reviewed the CPD's relevant policies, and to assess Secondary compliance, we reviewed the CPD's corresponding training development, implementation, and evaluation. We also sought to review records that are sufficient to show that the CPD has qualified personnel fulfilling the responsibilities delineated by ¶409.

#### *Progress before the Eighth Reporting Period*

In the first reporting period, the City and the CPD achieved Preliminary compliance with ¶409 by implementing a mandatory, Commission on Accreditation for Law Enforcement Agencies (CALEA) qualified program for officers who have experienced an officer-involved firearm discharge. The CPD maintained Preliminary compliance with ¶409 in the following reporting periods by finalizing the *Traumatic Incident Stress Management Program (TISMP) Directive E06-03*. We note that the Professional Counseling Division (PCD) oversees the TISMP as noted in policy, training, various strategies, and the relative paragraphs of the Consent Decree.

The IMT reviewed training materials for clinicians for the TISMP in February 2021, but the training had yet to be finalized and provided. During the seventh reporting period, the CPD submitted records demonstrating that at least 95% of CPD members had completed the TISMP eLearning. The CPD also produced an internal audit of the TISMP. As discussed in ¶¶407-08, we urge the CPD to address the audit's findings.

*Progress in the Eighth Reporting Period*

Despite experiencing several officers involved in firearms discharges during the eighth reporting period, the CPD failed to provide any data regarding the number of personnel who had enrolled in the TISMP. Thus, the IMT is unable to determine if any of the required CPD members attended peer group discussions, or when and if such meetings were held during the eighth reporting period.

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Therefore, the City and the CPD maintained Preliminary compliance, but have yet to reach further levels of compliance. The IMT looks forward to reviewing relevant training records and data in future reporting periods.

**Paragraph 409 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance</i></b> (FOURTH REPORTING PERIOD)
<b>Secondary:</b>	<b><i>Not in Compliance</i></b>
<b>Full:</b>	<b><i>Not Yet Assessed</i></b>

During the eighth reporting period, the City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶410.

To evaluate Preliminary compliance with ¶410, we reviewed the CPD’s relevant policies, and to evaluate Secondary compliance with this paragraph, we reviewed the data sources relevant to compliance with the paragraph. We paid particular attention to the City and the CPD’s acquisition or implementation of a technological solution that allows for reliable data tracking now and in the future.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶410 by finalizing the *Traumatic Incident Stress Management Program* (TISMP) Directive E06-03. This directive clearly defines the types of firearm discharges that mandate TISMP referral. In addition, E06-03 requires the Professional Counseling Division (PCD) to notify the Office of First Deputy Superintendent when a member who was referred to the TISMP due to a firearm discharge is released from the program. The policy also requires officers who have discharged a firearm to respond consistent with another CPD directive, G03-02-03 *Firearm Discharge Incidents Authorized Use and Post-Discharge Administrative Procedures*.

During the fifth, sixth, and seventh reporting periods, the CPD did not provide any of the data sources to support Secondary compliance with ¶410. The IMT explained that, to reach Secondary compliance, the City and the CPD would need to

implement a technology solution that allows for data collection and analysis to track the PCD's and CPD members' compliance effectively and accurately with this directive. Such anonymized data would include: the number of members on administrative duty; the number of members mandated to complete TISMP or any other specific training that may be required; the number of members returning to regular field duty; and the number of members who were not permitted to return or who were extended pending the outcome of an investigation.

Throughout the sixth reporting period, the CPD anticipated implementing the iCarol software. However, the IMT is concerned whether this is a data set that can be captured by the iCarol platform, as the continuity of this training and respective tracking of an employee referred to the TISMP due to the firearm discharge may include a number of other units within the CPD who also address portions of this case-by-case matter. Moreover, the implementation of iCarol stalled.

In the seventh reporting period, the CPD's practices continued to be inconsistent, as noted in the TISMP audit conducted by the CPD's Audit Division, which was unable to identify the full population of officers who should have been required to participate in the mandatory TISMP.

#### *Progress in the Eighth Reporting Period*

As noted in ¶409, during the eighth reporting period, the CPD did not provide any information indicating that the CPD members who were involved in an officer-involved firearms discharge (per the circumstances noted in ¶410) have attended the mandatory TISMP.

The CPD did produce the *Individualized Critical Incident Overview Training* and the *Detectives' TISMP review* during the eighth reporting period. However, these submissions are not sufficient to reach further levels of compliance with ¶410.

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The City and the CPD maintained Preliminary compliance with ¶410 in the eighth reporting period. Without the necessary data demonstrating adherence to requirements of this paragraph, the City and the CPD will not be able to reach further levels of compliance.

The IMT's greater concern regarding ¶410 is that the TISMP audit clearly indicated that the CPD had poorly demonstrated how officers were referred to the TISMP and were returned to field duties. Additionally, the findings of the audit showed that some officers had skipped steps or were not referred when required to the TISMP. Other findings indicated that officers had slipped through the cracks and

did not complete the program. Again, it was unknown who received final authorization from the First Deputy to return to field duties. We urge the CPD to address these deficiencies immediately.

### Paragraph 410 Compliance Progress History

FIRST REPORTING PERIOD SEPTEMBER 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: 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	



## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Recurring Schedule:** Annually  **Met**  **Missed**

**Preliminary:** *In Compliance (SECOND REPORTING PERIOD)*

**Secondary:** *Not in Compliance*

**Full:** *Not Yet Assessed*

The City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶411 during the eighth reporting period.

To assess Preliminary compliance with ¶411, we reviewed the CPD’s relevant policies, and to assess Secondary compliance, we reviewed the CPD’s training development, implementation, and evaluation. We also sought to review records that are sufficient to show that the CPD has qualified personnel fulfilling the responsibilities delineated by ¶411.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶411 by codifying ¶411’s requirements into Directive E06-03. Specifically, E06-03 requires the Audit Division to:

*conduct an annual assessment to determine the extent to which members who experience traumatic incidents are referred to the [TISMP] and the extent to which referred members attend the mandatory debriefing session(s), complete the [TISMP], and receive follow-up communication and support services.*

The CPD did not provide the required annual assessment by the end of the fourth, fifth, sixth, nor seventh reporting periods. In our prior reports, we explained and reiterated that, to reach Secondary compliance, the City and the CPD would need to provide evidence of an annual review, as well as implement a technology solution to allow for reliable and efficient tracking of compliance with ¶411. Beyond Secondary compliance, we would look for evidence of the routinized data collection and related assessments that verifiably support ¶411. We will also expect the CPD to train personnel to appropriately analyze data on program compliance which will then inform the annual review and report.

During the seventh reporting period, the CPD conducted an audit of the TISMP, which covered the period from March 1, 2021, through December 31, 2021. The audit showed inconsistencies in referrals, debriefings, and attendance for counseling sessions. It appeared that some personnel were referred to debriefings when they perhaps should have been referred to a mandatory counseling session. And there were indications that some personnel were not referred when they should have been. This inconsistency leaves a gap in the TISMP process that needs to be addressed.

*Progress in the Eighth Reporting Period*

Like ¶409–10, the City and the CPD did not submit any data relevant to ¶411 to indicate the number of CPD officers who are required to attend the mandatory counseling sessions or have completed the TISMP requirement in the eighth reporting period. The Audit Division’s TISMP audit, produced in the last reporting period, found these data points were lacking as well.

The IMT encourages the City and the CPD to collect the necessary data to comply with this paragraph as the officer-involved incidents are of critical importance due to their traumatic nature. It is imperative for the City and the CPD to maintain the proper records of steps and stages that each officer engaged in as they underwent such a crucial and necessary step to ensure that personnel are made whole and restored beyond the traumatic incident. We urge the CPD to focus attention on these important issues.

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Therefore, the City and the CPD maintained Preliminary compliance but did not reach Secondary compliance with ¶411 in the eighth reporting period.

**Paragraph 411 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019</p> <p>COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020</p> <p>COMPLIANCE PROGRESS: Preliminary</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020</p> <p>COMPLIANCE PROGRESS: Preliminary</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021</p> <p>COMPLIANCE PROGRESS: Preliminary</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021</p> <p>COMPLIANCE PROGRESS: Preliminary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022</p> <p>COMPLIANCE PROGRESS: Preliminary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022</p> <p>COMPLIANCE PROGRESS: Preliminary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023</p> <p>COMPLIANCE PROGRESS: Preliminary</p>	

## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>In Compliance (FIFTH REPORTING PERIOD)</i></b>
<b>Secondary:</b>	<b><i>Not in Compliance</i></b>
<b>Full:</b>	<b><i>Not Yet Assessed</i></b>

The City and the CPD maintained Preliminary compliance but did not achieve Secondary compliance with ¶412 during the eighth reporting period.

To evaluate Preliminary compliance with ¶412, the IMT reviewed the CPD’s relevant policies, and to assess Secondary compliance, we reviewed the CPD’s training development, implementation, and evaluation. We also sought to determine how the CPD is seeking input from mental health professionals in developing and reviewing the training on mental health related topics, what feedback the professionals provide, and how the CPD utilizes such feedback.

#### *Progress before the Eighth Reporting Period*

In the third reporting period, the IMT provided a status update stating the CPD had engaged the expertise of several outside professionals to assist in the development of a variety of programs and materials. In the fourth reporting period, the CPD revised Special Order S11-10 *Department Training*, which includes mental-health experts among the list of outside experts to be called on, and the IMT provided a no-objection notice.

During the fifth reporting period, the IMT observed the delivery of the *2021 In-Service Officer Wellness Training* and observed the financial wellness module, which was taught by representative from an external resource. We note that Appendix G of the *2021 Training Plan* includes a list of external resources and subject-matter experts who have provided input in the development of specific training material and who have delivered instruction of the lesson plan. The CPD also finalized S11-10 during the fifth reporting period, which addresses the requirements of this paragraph. With this, the City and the CPD reached Preliminary compliance.

The CPD submitted the *Employees Assistance Program Recruitment Training* in the sixth reporting period. During the seventh reporting period, the IMT reviewed several training curricula that contained a wellness component: the *Field Training Officers (FTO) Initial Training*; the *Integrating Communication Assessment and Tactics (ICAT) Training*; and the *2023 Active Bystandership for Law Enforcement (ABLE) Wellness Refresher* training, which is a curriculum developed by Georgetown University.

*Progress in the Eighth Reporting Period*

During the eighth reporting period, the IMT reviewed the CPD’s *Officer Wellness and Support Training*, which encompasses several topics including resilience, nutrition, and sleep habits. The curriculum is authored by several instructors with professional backgrounds in fatigue training and research. These tenured faculty from the Sleep and Performance Research Center at Washington State University included a broad range of topics in the study such as liability, predicted performance, mental health, the science of sleep via hygiene, and environment, along with diet, exercise, yoga, and meditation. These relevant topics were developed to include empirical data throughout the course to scientifically support the lesson.

The IMT inquired about the CPD providing the *Officer Wellness and Support Training* to its civilian members. The CPD informed us that they intend to provide the instruction to civilian members in the next reporting period.

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The City and CPD maintained Preliminary compliance during the eighth reporting period. Moving forward, we will look for evidence that at least 95% of all CPD members attended the *Officer Wellness and Support Training*.

**Paragraph 412 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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: Status Update
FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Under Assessment	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	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶413 in the eighth reporting period.

To evaluate Preliminary compliance with ¶413, the IMT reviewed the CPD’s relevant policies, and to assess Secondary compliance, we reviewed the CPD’s training development, implementation, and evaluation. We also sought to determine how the CPD is identifying the means and methods by which input is sought from experts in developing training on use of force where their expertise would enhance the effectiveness of the training, how the CPD is seeking input from experts in developing these trainings, what feedback the experts provide, and how the CPD utilizes such feedback.

#### *Progress before the Eighth Reporting Period*

In the third reporting period, we provided a status update and reviewed documents reflecting the CPD’s engagement of behavioral science experts in developing a variety of trainings. In the fourth and fifth reporting periods, we reviewed drafts of Special Order S11-10, *Department Training*, and the CPD’s *2021 Training Plan*. The City and the CPD reached Preliminary compliance in the fifth reporting period by finalizing S11-10, which addressed the requirements of this paragraph.

During the sixth reporting period, the CPD implemented the *Active Bystandership for Law Enforcement (ABLE)* training, which is a curriculum developed by Georgetown University. The IMT reviewed several training curricula in the seventh reporting period that contained a wellness component: the *Field Training Officers (FTO) Initial Training*; the *Integrating Communication Assessment and Tactics*

*(ICAT) Training; and the 2023 Active Bystandership for Law Enforcement (ABLE) Wellness Refresher training, which is a curriculum developed by Georgetown University. The 2023 ABLE Wellness Refresher is an evidence-based curriculum developed by subject matter experts who employ data, theory, and best practices that are supported by both national and international law enforcement associations and academia. The ICAT Training, developed by the Police Executive Research Forum, provides first-responding police officers with tools, skills, and options for successfully and safely defusing a wide range of critical incidents and applying foundational principles of critical thinking, crisis intervention, communications, and tactics in an integrated approach to training.*

*Progress in the Eighth Reporting Period*

This reporting period, the CPD did not produce any documentation related to efforts with ¶413.

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The City and the CPD maintained Preliminary compliance with ¶413 but have yet to reach further levels of compliance.

**Paragraph 413 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Status Update</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Under Assessment</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary</p>	

## 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.

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with but did not achieve Secondary compliance with ¶414 during the eighth reporting period.

To assess Preliminary compliance, the IMT reviewed the CPD’s relevant policies and training materials that demonstrate the development of programs relevant to compliance with ¶414. To evaluate Secondary compliance, the IMT reviewed the CPD’s training development, implementation, and evaluation, as well as data that is necessary or helpful to identify, verify, and sustain compliance and reform efforts. We also sought to determine whether the *Officer Wellness Training* has been provided to both sworn and non-sworn personnel, as required by this paragraph.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶414 by (1) submitting curricula for the *Officer Wellness Training* and the *Employee Assistance Program (EAP) Pre-Service Promotional Training*; and (2) including verbiage in *Traumatic Incident Stress Management Program (TISMP) Directive E06-01* that satisfies the requirements of ¶414. The CPD also submitted and revised *2021 In-Service Officer Wellness Training* materials, for which the IMT provided a no-objection notice.

During the fifth reporting period, the IMT observed the *In-Service Officer Wellness Training*. However, the CPD did not submit any attendance records or any related data in that reporting period indicating attendance and the percentage of CPD membership that have yet to receive the training. At the close of the fifth reporting period, the CPD submitted the *EAP Recruit Training Course* to be reviewed by the IMT.

During the sixth reporting period, the CPD submitted several training productions for in-service training on the topics of stress management; alcohol and substance

use disorders; and support services to include recruit training as well. The *Employees Assistance Program Recruit Training* was also submitted during the sixth reporting period. However, the records of completion, attendance, pre- and post-testing were not submitted in that reporting period.

The City and the CPD provided data in the seventh reporting period indicating that 95% of the CPD membership had completed the TISMP eLearning course. The CPD also produced the following trainings for all CPD members in the seventh reporting period, which included the topic of wellness as required in ¶414: (1) *FTO Initial Training – Employee Assistance Program (EAP) Hour*; (2) *2023 Active Bystandership for Law Enforcement (ABLE) – A Refresher on Officer Wellness*; (3) *2022 In-Service Crisis Intervention Training (CIT)*, which included a Resource Guide; and (4) *2023 Training Plan*, which included a listing of the curriculum topics, delivery model (roll call/video, eLearning, classroom), and the training audience (pre-service, in-service, recruit). However, those trainings had not yet been completed by the end of the seventh reporting period.

*Progress in the Eighth Reporting Period*

During the eighth reporting period, the City and the CPD submitted the *2023 Officer Wellness and Support Training* curriculum and evidence that over 95% of sworn personnel attended the *CIT In-Service Training*. However, the City and CPD have not produced any training on stress management, alcohol or substance abuse, and wellness for its non-sworn personnel, as required by ¶414.

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The City and the CPD maintained Preliminary compliance with ¶414. The IMT looks forward the CPD including non-sworn personnel in wellness trainings.

**Paragraph 414 Compliance Progress History**

<p>FIRST REPORTING PERIOD SEPTEMBER 1, 2019 – AUGUST 31, 2019 COMPLIANCE PROGRESS: Not Applicable</p>	<p>SECOND REPORTING PERIOD SEPTEMBER 1, 2019 – FEBRUARY 29, 2020 COMPLIANCE PROGRESS: Not Applicable</p>	<p>THIRD REPORTING PERIOD MARCH 1, 2020 – DECEMBER 31, 2020 COMPLIANCE PROGRESS: Status Update</p>
<p>FOURTH REPORTING PERIOD JANUARY 1, 2021 – JUNE 30, 2021 COMPLIANCE PROGRESS: Preliminary</p>	<p>FIFTH REPORTING PERIOD JULY 1, 2021 – DECEMBER 31, 2021 COMPLIANCE PROGRESS: Preliminary</p>	<p>SIXTH REPORTING PERIOD JANUARY 1, 2022 – JUNE 30, 2022 COMPLIANCE PROGRESS: Preliminary</p>
<p>SEVENTH REPORTING PERIOD JULY 1, 2022 – DECEMBER 31, 2022 COMPLIANCE PROGRESS: Preliminary</p>	<p>EIGHTH REPORTING PERIOD JANUARY 1, 2023 – JUNE 30, 2023 COMPLIANCE PROGRESS: Preliminary</p>	



## 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.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

**Recurring Schedule:** Ongoing  **Met**  **Missed**

**Preliminary:** *Not in Compliance*

**Secondary:** *Not Yet Assessed*

**Full:** *Not Yet Assessed*

The City and the CPD have not yet reached Preliminary compliance with ¶415.

To assess Preliminary compliance with ¶415, the IMT sought to review the CPD’s relevant policies and documents directing the completion of periodic audits and solicitation of feedback from the collective bargaining units as required by ¶415.

#### *Progress before the Eighth Reporting Period*

In prior reporting periods, the City and the CPD did not reach Preliminary compliance because they did not provide evidence that a policy has been created to direct the completion of periodic audits as required by ¶415. Additionally, we noted that ¶415 calls for equipment and technology audits to be conducted “periodically” after an initial audit that was to have been completed in 2020. The IMT suggested that when the City and the CPD draft a policy to guide compliance with this paragraph, they should include a timing requirement that guides the frequency of these audits. Once this policy is finalized, we would look for the CPD to meet its own deadlines for completing the department-wide equipment and technology audits.

Despite the lack of a policy, during the fourth reporting period, the City and the CPD submitted an *Equipment and Technology Audit*. While we appreciated the efforts in completing this audit, it did not fully address the requirements of ¶415. Specifically, the audit did not provide a full and clear picture of (1) the equipment and technology in the CPD’s possession; (2) the state of that equipment and technology; or (3) any recommendations for addressing any identified concerns or problems with CPD’s equipment or technology. Moreover, we had not received indication that all collective-bargaining units were consulted in the completion of this audit. The IMT indicated that the City and the CPD would need to submit a

policy that guides compliance with ¶415, and include all requirements set out in ¶415 in the Equipment and Technology Audit.

During the fifth reporting period, the IMT did not receive any materials pertaining to this paragraph. In the sixth and seventh reporting periods, the IMT met with the CPD to discuss the required department-wide audit required by ¶415. The CPD indicated that they had planned to develop a policy for the audit, which would identify: (1) who would conduct the audits in the future; (2) what data would be collected; (3) how the data would be stored; (4) what equipment is broken and outdated; (5) what repairs and when are feasible; and (6) a method for gathering collective bargaining input regarding equipment and technology.

During a meeting in the seventh reporting period, the CPD presented the *Service-Now* data collection platform to demonstrate their in-house inventory program could centralize recordkeeping for technology and equipment. They further indicated that this platform would enable the CPD to better manage their assets have the capability of reporting issues and creating task orders. The feature also included the input portal, financial data input, and an audit feature with other pertinent dashboards pertaining to asset management of technology and equipment.

#### *Progress in the Eighth Reporting Period*

The City and the CPD made limited progress toward compliance with this paragraph in the eighth reporting period. The CPD mentioned its plans for fitness spaces to be improved with new equipment and that old, outdated, and non-functioning equipment will be replaced in partnership with the Chicago Police Memorial Foundation.

The IMT has also been informed that several units of the Professional Counseling Division (PCD) had received new computers and other portable devices. While the replacement process is ongoing, the CPD has not provided any formal timelines of completion or provided a scheduled for replacement of the technology, as notably recommended in the audit.

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The City and the CPD did not achieve Preliminary compliance during the eighth reporting period. To reach Preliminary compliance the CPD must create a policy directing the completion of periodic audits and solicitation of feedback from the collective bargaining units as required by ¶415. The IMT looks forward to the CPD's ongoing replacement efforts and their completion.

## Paragraph 415 Compliance Progress History

FIRST REPORTING PERIOD  
SEPTEMBER 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:  
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

## Officer Wellness and Support: ¶416

**416.** *Within 90 days of the completion of the initial audit, CPD will develop a plan, including a timeline for implementation, to prioritize and address the needs for repair or replacement of equipment and technology as identified through the needs assessment (“Equipment and Technology Audit Response Plan”). CPD will implement the Equipment and Technology Audit Response Plan in accordance with the specified timeline for implementation.*

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**Compliance Progress** (Reporting Period: January 1, 2023, through June 30, 2023)

<b>Deadline:</b>	Moving	<input checked="" type="checkbox"/>	<b>Not Yet Applicable</b>
<b>Preliminary:</b>	<i>Not in Compliance</i>		
<b>Secondary:</b>	<i>Not Yet Assessed</i>		
<b>Full:</b>	<i>Not Yet Assessed</i>		

The City and the CPD have not yet reached Preliminary compliance with ¶416.

To assess Preliminary compliance with ¶416, the IMT sought to review the CPD’s relevant policies and documents directing the development of an *Equipment and Technology Audit Response Plan* as required by ¶416.

*Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD did not reach Preliminary compliance with ¶416. As noted in our assessment of ¶415, the City and the CPD had not completed a sufficient technology and equipment audit. Without an adequate audit, the City and the CPD are unable to reach compliance with ¶416. We noted that, although the City and the CPD completed an audit during the fourth reporting period—one which did not satisfy ¶415—they did not produce any additional documentation to show that the CPD developed an *Equipment and Technology Audit Response Plan* to address the issues identified in the audit.

During the sixth reporting period, the City and the CPD produced another audit, which also did not fully address the requirements of ¶415.

During a virtual meeting in the seventh reporting period, the CPD presented the *ServiceNow* data collection platform to demonstrate their in-house inventory program could centralize recordkeeping for technology and equipment. The IMT recognized the CPD’s effort to build a digital platform that will enable them to better manage their assets, have the capability of reporting issues, and creating task orders.

*Progress in the Eighth Reporting Period*

The City and the CPD did not show progress toward compliance with this paragraph during the eighth reporting period.

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Therefore, the City and the CPD have yet to reach Preliminary compliance. To reach Preliminary compliance, the CPD must develop a policy or plan directing the development of an *Equipment and Technology Audit Response Plan* as required by ¶416. We look forward to reviewing an adequate plan or timeline for implementation in future reporting periods.

**Paragraph 416 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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: Status Update
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	

## Officer Wellness and Support: ¶417

**417.** *As a component of the Equipment and Technology Audit Response Plan, CPD will develop a schedule for future periodic audits. The schedule will specify the time period within which future periodic audits will occur. The time period may vary for different equipment types to account for differences in the expected useful life of different equipment types. CPD will perform the periodic audits in accordance with the schedule.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

<b>Preliminary:</b>	<b><i>Not in Compliance</i></b>
<b>Secondary:</b>	<b><i>Not Yet Assessed</i></b>
<b>Full:</b>	<b><i>Not Yet Assessed</i></b>

The City and the CPD have not yet reached Preliminary compliance with ¶417.

To evaluate Preliminary compliance, the IMT sought to review the CPD’s relevant policies and documents directing the development of a schedule for future periodic audits as a component of the *Equipment and Technology Audit Response Plan* as required by ¶417. Specifically, the policy must specify how and when the audits should be completed to adequately identify the current state of technology in CPD’s possession and provide sufficient details to allow the CPD to quickly determine what technology or equipment is outdated, broken, or otherwise in need of repair.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD did not reach Preliminary compliance with ¶417. As noted in our assessment of ¶415, the City and the CPD had not completed a sufficient technology and equipment audit. Without an adequate audit, the City and the CPD are unable to reach compliance with ¶417. We noted that, although the City and the CPD completed an audit during the fourth reporting period—one which did not satisfy ¶415—they did not produce any additional documentation to show that the CPD developed an *Equipment and Technology Audit Response Plan* to address the issues identified in the audit.

During the sixth reporting period, the City and the CPD produced another audit, which also did not fully address the requirements of ¶415. Also, by the end of the seventh reporting period, there was still no evidence that CPD created a policy that met the requirements of ¶417.

*Progress in the Eighth Reporting Period*

The City and the CPD did not demonstrate progress toward compliance with this paragraph’s requirements in the eighth reporting period.

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Therefore, the City and the CPD have yet to reach Preliminary compliance. To reach Preliminary compliance, the CPD must create a policy or plan directing the development of a schedule for future periodic audits as a component of the *Equipment and Technology Audit Response Plan* as required by ¶417.

**Paragraph 417 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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: Status Update
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	

## Officer Wellness and Support: ¶418

*418. In order to facilitate physical health and mental well-being, CPD will ensure its members have access to exercise equipment at CPD facilities in geographically dispersed areas throughout the City.*

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### Compliance Progress

(Reporting Period: January 1, 2023, through June 30, 2023)

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

The City and the CPD maintained Preliminary compliance with ¶418 in the eighth reporting period.

To evaluate Preliminary compliance with ¶418, we reviewed lists provided by the CPD accounting for the exercise equipment in the CPD's possession and listing the location of the equipment. To assess Secondary compliance, we reviewed various data sources to determine whether the City has conducted a survey to ensure that equipment is dispersed throughout Chicago to meet the demand in each location.

#### *Progress before the Eighth Reporting Period*

In previous reporting periods, the City and the CPD achieved Preliminary compliance with ¶418 by submitting information which accounted for the exercise equipment possessed by the CPD, along with the location of that equipment. However, we noted that some documentation showed serial numbers but not the equipment item or name, which made it difficult to know what type of equipment the serial number is attached to at the various locations for inventory purposes and future replacement purposes. Simply stated, the equipment, though geographically placed throughout the City, has not been properly inventoried to indicate identity, utility, and location.

During the fifth reporting period, the IMT did not receive useful evidence reflective of the survey referenced in the previous reporting period, which is necessary for Secondary compliance.

During the sixth reporting period, the CPD produced the findings of the *Technology and Equipment Audit*, which contained multiple inaccuracies. A revised audit was later resubmitted, which included additional information in efforts to identify the fitness equipment and other items that were not previously labeled. It was much improved from the first audit, but it was still a work in progress as there were still aspects of the audit that did not reveal the status of the equipment.



*Progress in the Eighth Reporting Period*

In the seventh reporting period, the CPD advised that the Police Memorial Foundation was funding the replacement of fitness equipment. Those efforts were underway, but not fully completed, by the end of the eighth reporting period. The CPD indicated they developed a system to record all equipment upon receipt.

Recognizing that the CPD has two additional facilities coming online by the end of the calendar year 2023, the IMT hopes to see that any new fitness equipment or technology for those two facilities will be properly recorded to include their distribution and assignments.

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The City and the CPD maintained Preliminary compliance but did not reach Secondary compliance with ¶418 in the eighth reporting period.

**Paragraph 418 Compliance Progress History**

FIRST REPORTING PERIOD SEPTEMBER 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: 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	