

**COMMISSION FOR FLORIDA LAW  
ENFORCEMENT ACCREDITATION, INC.**



**THE FLORIDA INSPECTORS GENERAL  
STANDARDS MANUAL  
EDITION 1.0.09**

## PREFACE

The Standards Manual is the principal publication of the Commission for Florida Law Enforcement Accreditation, Inc. Inspectors General Accreditation Program. The first edition was published in February 2009 and is the current version of the Florida Standards Manual.

This manual and other accreditation publications are available from:

Commission for Florida Law Enforcement Accreditation, Inc.  
P.O. Box 1489  
Tallahassee, Florida 32302  
(800) 558-0218  
[www.flaccreditation.org](http://www.flaccreditation.org)

## LIMITATION OF LIABILITY

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## **ACKNOWLEDGMENTS**

In an effort to keep up with current law enforcement trends, criminal justice issues, and Florida Statutes, the Standards Review and Interpretation Committee (SRIC) and the Commission have been accepting and reviewing input from Inspectors General practitioners for improving the Florida Standards Manual. The first edition is the final result of various committee and subcommittee meetings, executive workshops, and numerous individual hours dedicated to addressing all suggestions and concerns.

The work of the SRIC is ongoing and many dedicated professionals contributed to this edition. The Commission for Florida Law Enforcement Accreditation, Inc. thanks the past and present members of the SRIC for ensuring the standards continue to meet the needs of the Florida Inspectors General community.

### **MISSION STATEMENT**

The Commission for Florida Law Enforcement Accreditation establishes standards, oversees an accreditation program, and awards accreditation to compliant Florida law enforcement agencies. The Commission strives to improve the ability of law enforcement agencies to deliver professional public safety services.

### **VISION STATEMENT**

All Florida law enforcement agencies are state accredited.

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## APPLYING TO THE COMMISSION

Agencies wishing to participate in the accreditation process must complete the application form and survey, found on our website at [www.flaccreditation.org](http://www.flaccreditation.org), and submit them to the Commission for approval. Commission staff will send the agency the accreditation agreement for execution and an invoice for the accreditation fees. Accreditation fees are based on the number of authorized full-time investigators.

Accreditation / Reaccreditation	
<u>NUMBER</u>	<u>FEE</u>
1 - 3	\$ 900.00
4 - 8	\$ 1,500.00
9+	\$ 3,000.00

The applicant agency is responsible for assessment costs for assessors to include: overnight accommodations; per diem (applicant agency's rates, at a minimum); and mileage at the applicant agency's rate, if the assessor uses his personal vehicle.

## PROGRAM DEVELOPMENT

In 1993, Florida Statute 943.125 encouraged the Florida Sheriffs Association (FSA) and the Florida Police Chiefs Association (FPCA) to create an independent voluntary state law enforcement agency accreditation program.

Representatives from FSA and FPCA developed this program, modeled after the national accreditation program, which required compliance with more than 250 professional standards designed specifically for Florida law enforcement agencies. These standards were practical, easily understood, and achievable even for the smallest law enforcement agency. The program was designed with consideration for the following goals:

- to establish and maintain standards that represent current professional law enforcement practices;
- to increase effectiveness and efficiency in the delivery of law enforcement services;
- to establish standards that address and reduce liability for the agency and its members;
- to establish standards that make an agency and its personnel accountable to the constituency they serve; and
- to implement a Florida accreditation program that establishes standards which do not conflict with national standards.

A feasibility study and status report was delivered to the Speaker of the House of Representatives in November 1993. A joint FSA/FPCA Charter Review Committee was then formed, headed by Sheriff Neil J. Perry of St. Johns County. This committee developed the charter for the Commission for Florida Law Enforcement Accreditation, Inc. (CFA) and established the overall framework for its operation.

In contrast to the internal auditing function within agency Inspectors General Offices, no statutorily required standards existed for conducting **investigations** within offices of Inspectors General. However, the inspectors general community in Florida worked to codify a set of nationally recognized standards, entitled *Principles and Standards for Offices of Inspector General*, published by the Association of Inspectors General. Inspectors General in Florida were instrumental in the development of these standards. These standards outlined appropriate organizational characteristics of Inspectors General Offices and appropriate practices for different activities of Inspectors General Offices, including investigations. Although these standards presented guiding principles, they tended to be very general in nature, were not specific to the Florida Inspectors General community, were voluntary in nature, and did not provide for a quality assessment process for periodic review of operational and investigatory procedures.

In February 2007, Chief Inspector General Melinda Miguel of the Office of the Florida Chief Inspector General (CIG) addressed the Commission at the executive workshop regarding a number of Inspectors General's desire to have the Commission develop an accreditation program for the Inspectors General investigative function. The Commission determined staff should form a committee with the CIG and others to develop a feasibility report on developing another accreditation program to be administered by the Florida Accreditation Office staff. In October 2007, the Commission approved the development of the Inspectors General Accreditation Program.

The Florida Inspectors General Standards Manual was developed and approved by the Commission in February 2009.

## THE COMMISSION

The Commission for Florida Law Enforcement Accreditation, Inc. was established by charter December 13, 1994 and incorporated on February 9, 1995. It is an independent, tax-exempt, not-for-profit corporation designated as the accrediting body for Florida law enforcement accreditation. The Commission's purpose is to establish a program for accreditation that can be achieved by all Florida law enforcement agencies. The Commission is comprised of thirteen volunteer members:

- four sheriffs appointed by the Florida Sheriffs Association;
- four police chiefs appointed by the Florida Police Chiefs Association;
- an executive from the State Law Enforcement Chiefs Association;
- a mayor, city commissioner, or city manager appointed by the Florida League of Cities;
- a county commissioner appointed by the Florida Association of Counties;
- an appellate or circuit court judge appointed by the Florida Supreme Court; and
- and Inspector General appointed by the Florida Chief Inspector General.

The Commission, in cooperation with the Florida Department of Law Enforcement, appoints an executive director, who manages its staff and the accreditation program. The executive director and staff have the authority to carry out all policies, procedures, and activities of the Commission. This staff supports agencies working toward accreditation or reaccreditation, oversees the assessment process, coordinates Commission review, and handles the Commission's business matters.

## **PROGRAM OVERVIEW**

Agencies begin the accreditation process with an application. Once the application is completed and submitted to the Commission for review to determine eligibility, an agreement and invoice are sent to the applicant agency. The formal accreditation process begins when the agency executes this agreement, which specifies the obligations of the agency and the Commission. The agency has twenty-four months to complete the self-assessment phase from the date the executive director signs the accreditation agreement.

## **AGENCY SELF-ASSESSMENT**

During the self-assessment phase, the agency will review its policies, procedures, plans, training, and activities to be sure they comply with applicable standards. The agency may have to establish policies and develop procedures where none exist, or revise existing policies and procedures. Identifying what must be done to achieve and document compliance requires considerable effort and teamwork from all areas of the agency.

### **Accreditation Manager Selection/Responsibilities**

The selection of an accreditation manager is critical to the agency's success in achieving accreditation. It is highly recommended this person be assigned full-time to accreditation duties and for the duration of self-assessment. The accreditation manager is the person designated to direct and control the accreditation process. The manager will coordinate the efforts of components within the agency. Responsibilities will also include serving as liaison between the agency and Commission staff.

The person selected should have a thorough knowledge of the agency's rules, regulations, and policies and should be able to work well with all levels of supervision within the agency. Accreditation Manager abilities and skills should include:

- ✓ train and motivate others;
- ✓ ability to administer, plan, and organize a project;
- ✓ writing and editing skills; and
- ✓ initiative.

The accreditation manager is responsible for collecting the necessary documentation and preparing accreditation files. The Commission has computer software available, which is designed to aid the accreditation manager in tracking and controlling the process. This web-based software has been developed specifically to help the accreditation manager maintain records of assignments, notations, due dates, progress summary reports, and other information essential to the accreditation process. Use of Commission approved software is required for all agencies.

## **Accreditation Training and Networking**

The Commission offers accreditation manager and assessor training throughout the year. This training prepares students for managing the accreditation process and is highly recommended for all newly assigned personnel. Contact the Commission office for additional information about registration.

Training is also available through the Florida Police Accreditation Coalition, Inc. (FLA-PAC), which provides networking opportunities and access to experienced accreditation managers. Agencies are encouraged to join FLA-PAC and can obtain membership information from any FLA-PAC member, or visit their website at [www.fla-pac.org](http://www.fla-pac.org).

## **Compliance with Standards**

Proving compliance with the required number of applicable standards is the agency's responsibility. The agency must develop and compile proofs of compliance necessary for assessors to determine compliance. Agencies are urged to focus on documenting compliance by supplying written directives and other written documents. Interviews and observations may supplement written documentation and in some instances may serve as primary proofs of compliance. The agency must comply with all the applicable mandatory standards.

## **File Organization**

The agency must establish a separate electronic file for each standard regardless of the agency's compliance level.

Primary proofs state the agency performs the function described in the standard. Primary proofs may include agency general orders, special orders, standard operating procedures, policy manuals, ordinances, plans, rules, training directives, state laws, court orders, and memoranda that are binding on agency members. The entire directive(s), unless voluminous, should be uploaded to the software.

Secondary proofs show by example the agency actually does the activity stated in the primary proof. Secondary proofs may include memoranda, newspaper articles, instructional material, photographs, and completed logs, rosters, evaluations, reports, and forms.

The software will enable agency staff and assessors to quickly link a given proof with the appropriate section of the standards. It also has many search and sort features to assist the Accreditation Manager in updating proofs.

Commission assessors will ask questions of agency personnel and others who should have knowledge about the implementation of a standard or who are affected by a particular standard. An agency must indicate in the software whether compliance may or must be verified by interviews. When creating this type of proof, an agency must identify

the person or persons to be interviewed, including name, rank, position or job title, and how the person can be contacted. To facilitate the assessment, an agency may wish to create a master list of key persons the assessors might interview.

## ASSESSMENT

When an agency completes the self-assessment phase and is ready for a review it becomes a “candidate” agency.

### Preparation

When the agency believes it is ready for an assessment, it is highly recommended the accreditation manager arrange for a mock assessment. This is a trial run for the agency to discover any shortcomings and make adjustments or corrections prior to the formal assessment. It is most beneficial to the agency if the mock assessment follows the same format as the formal assessment.

Selection of the mock assessment team is critical to the agency’s preparedness for its formal assessment. A mock process includes a complete review of every standard and a facility assessment for standard compliance. The agency’s accreditation manager is responsible for arranging all aspects of the mock assessment.

The accreditation manager must notify Commission staff to arrange an acceptable date and length of time for the formal assessment. The program manager will select prospective assessors and provide the names to the accreditation manager. The agency will review the names of assessment team members and notify Commission staff of any conflicts immediately. If staff determines a conflict exists, a replacement assessor will be found. The agency will be required to submit the following electronically to Commission staff prior to the formal assessment:

- self-assessment status report (compliance tally);
- annual report, if available;
- written directive explaining the agency’s written directive system;
  - maps with directions to the main facility and instructions on where to park;
- hotel accommodation information.

Normally, an assessment will require one day to complete. Special circumstances within the agency may affect the length of an assessment.

The program managers will select a team of assessors with the level of experience and expertise required to fairly assess the agency. The number of assessors assigned to each assessment varies according to agency need. Generally, two assessors are required for an assessment, field offices may require additional assessors.

An agency pursuing accreditation must issue a press release announcing its candidacy for accreditation at least 30 days prior to the assessment. The announcement must invite public comment and include the Commission's physical and email addresses. A sample press release is provided to the agency.

The candidate agency will coordinate travel arrangements with assigned assessors and send confirmation to the Commission staff. The candidate agency is responsible for meals, lodging, and mileage (if applicable) for all assessors at the candidate agency's rate. The candidate agency is responsible for reimbursement of travel mileage, if assessors use their personal vehicles. Reimbursement to the assessors will be provided in accordance with the candidate agency's policies. The candidate agency will reserve single occupancy rooms for each assessor and pay lodging costs directly, when possible. The accreditation manager will notify the assessors of all travel arrangements prior to the assessment.

## Activities

The sequence of activities occurring during an assessment should be well planned and anticipated by all participants. Major emphasis is given to the review of written documentation, personnel interviews, facility observations, and completion of assessment paperwork.

Assessments will follow this general format:

- an initial interview with the CEO;
- an agency orientation;
- review of applicable standards;
- personnel interviews; and
- exit interview.

## Initial Interviews

Initial interviews will serve as an introduction between the assessors, CEO and agency staff. During this interview, the team leader will explain the Commission's philosophy, describe assessors' backgrounds, and define procedures for conducting the assessment. An entry interview is highly recommended and should be held upon agreement of the team leader and the candidate agency.

## Agency Orientation

An agency orientation is conducted to familiarize the team with the agency's facilities and personnel. Assessors will meet key people at the agency and return during the assessment for interviews.

## Standards Review

Assessors will review every standard for the required number of applicable standards to establish conclusively the agency's compliance level. Agencies are urged to focus on documenting compliance by supplying written directives and other documents. Proving compliance is the agency's responsibility. The Commission will be the final authority on standards applicability.

While the Commission presumes agencies operate in accordance with their written directives, assessors must verify this is accurate. Therefore, assessors will interview agency personnel to ensure they are informed about their written directives. They will also observe the operations of the agency to verify compliance and will examine other provided materials that demonstrate compliance with written directives.

Where confidential or highly sensitive information may be involved, the Commission may accept blank forms or redacted material as sufficient proof of compliance. An agency's written directive proof of compliance is strengthened when other supporting documentation is provided.

The agency will be provided an opportunity to resolve problems discovered during the assessment, if practical and time permits. Additional paperwork may need to be submitted to the satisfaction of the team during the assessment or even after the assessment, but prior to Commission review. In extreme cases, a follow-up assessment may be authorized. The Commission will make any decisions regarding follow-up assessments at appropriate hearings.

#### **Exit Interview**

At the conclusion of the assessment, the assessment team will conduct an exit interview with the CEO and any agency staff the CEO wishes to include. The team will relay their observations resulting from the assessment and notify the CEO of their intent to recommend or not recommend the candidate agency for accreditation or reaccreditation at the next general meeting.

#### **Final Report**

The assessors write a report of their findings and submit it to Commission staff for processing. The report contains an overview of the agency; a synopsis of the team's activities; a discussion of the agency's compliance and non-compliance with standards; a summary of corrective action; any work remaining to achieve full compliance; public information activities; and a recommendation to the Commission.

## **COMMISSION REVIEW**

The Commission schedules three meetings annually to conduct business and review agencies for accreditation and reaccreditation. Commission staff will process the assessors' final report and forward it to the Commission for review. At least one representative from the candidate agency must be present for the review. Agencies are reviewed in a panel committee format. One commissioner is assigned the responsibility to lead the review of that agency. During the committee review, any commissioner may ask questions or solicit comments from the CEO, team leader, or accreditation manager regarding the team's findings or agency operations. At the full Commission meeting, the

Chair of the panel review committee will present the results to the Commission, and make a motion to the Commission regarding the agency's accredited status. Seven affirmative votes are required to grant the agency accredited status. If the agency is granted accredited status, the Commission will present a certificate to the CEO.

## **REACCREDITATION**

Initial accreditation is valid for three years and annual reports are due each accreditation anniversary date. The accreditation manager should continue to evaluate the agency's progress toward meeting accreditation standards by monitoring changes to the written directive system and how they affect agency compliance. The original accreditation files in the software should be maintained for historical purposes for three years and a new file will be created for the agency's reaccreditation assessment. The accreditation manager must maintain current additional proofs and required reports in the new accreditation files.

Proofs for standards must show compliance from assessment to assessment.

Once the agency decides to commit to reaccreditation, the steps outlined in this process should be repeated. The assessment date for reaccreditation is governed by the date of the agency's initial accreditation. The reaccreditation assessment must be scheduled during the final year of the agency's current accreditation term. This will cause the Commission review to occur on or about the agency's anniversary date.

# THE STANDARDS

## Scope

The Commission expects accredited agencies to maintain compliance and live by the letter and spirit of the standards. The Commission presumes agencies operate in compliance with their written directives. The agency must consider its mission, its legally mandated responsibilities, and the demands of its service community when determining which standards are applicable and how to comply with applicable standards. The standards provide a description of what must be accomplished by the applicant agency. The agency has wide latitude in determining how to achieve compliance.

## Composition

Each chapter begins with an Introduction, which provides important guidance to an agency regarding the subject area, its applicability, or related standards.

Each standard is composed of the standard statement and at least one compliance key. The standard statement is a declarative sentence that places a clear-cut requirement, or multiple requirements on the agency. Many statements require the development and implementation of written directives that articulate the agency's policies, procedures, rules, and regulations. Other standards require an activity, a report, an inspection, equipment, or other action. The standard statement is binding on the agency.

Compliance keys are the means by which the agency demonstrates compliance with standards. They are included to help the accreditation manager and others involved in the process to understand the type and sufficiency of proofs necessary to demonstrate compliance.

## Applicability

Standards may or may not be applicable depending upon the agency's statutory role, mission, or the functions performed by the agency. Applicant agencies must review all standards to identify those not applicable by function. For example, if an agency does not have sworn members, then the standards related to sworn members becomes not applicable (N/A). However, simply because an agency may not perform the function, a standard may still apply. Standards are considered applicable if the function is an integral element for improving the delivery of investigative services or professional management of an agency. A number of standards begin with an "if" statement indicating a conditional requirement. If the condition pertains to a function not applicable to the agency, the standard becomes N/A.

Assessors will verify which functions are not applicable during the assessment. The Commission reserves the right to require compliance with any standard.

All standards in the IG Standards Manual are mandatory and address legal matters; essential practices of the Inspectors General; or conditions that reduce high liability exposure. These standards are denoted by the letter “M” placed immediately following the standard number. Every agency is required to meet all of these standards except those not applicable to the agency’s responsibilities.

If an agency is prevented from complying with an applicable mandatory standard due to circumstances beyond its control, e.g., labor contracts, court decrees, it may ask the Commission to “waive” the obligation to comply. The agency must make the request in writing during the self-assessment phase using the “Waiver Request Form” available from CFA Staff. The Executive Director may grant a conditional approval, if appropriate. Then, during the agency’s assessment, assessors will verify the circumstances prohibiting compliance and document their findings in the final report to the Commission. The Commission will either grant a formal waiver or rescind its tentative waiver at the next general meeting. Obtaining a waiver can be a lengthy process, so as soon as the Accreditation Manager discovers a problem with a standard, he should call the assigned Program Manager to discuss it.

Phrases and terms appearing in italics in the standards manual, or are underlined (linked) in the software, denote glossary terms.

### **New or Amended Standards**

Unless otherwise directed by the Commission, new or amended standards are effective upon publication. Agencies seeking initial accreditation, reaccreditation, or having already achieved accreditation or reaccreditation must demonstrate compliance with new or amended standards at their first assessments following the publication dates of those standards. However, if those assessments occur within one year after publication of new or amended standards, agencies may delay compliance for up to one year after the enactment dates of those standards.

The standards and the accreditation process are constantly under review and evaluation. Each agency self-assessment and assessment by Commission assessors brings the potential for change. This in no way suggests changes occur frivolously. Instead, healthy growth and adjustment to new and innovative improvements to investigative processes are welcomed and provisions for their inclusion in the state accreditation program are available.

Issues concerning the standards or process may surface from several sources, e.g., agency personnel, assessors, staff, Commissioners, or the general public. The Standards Revision Form, available on the CFA website ([www.flaccreditation.org](http://www.flaccreditation.org)), which is used to raise standard related issues, is sent to staff with a description of the issue and the suggestion for revision. If feasible, staff will resolve the issue or schedule the matter for action at the next Commission meeting. Copies are also available from Commission staff.

For Standards requiring an interview, assessors should go straight to the source for verification, and interview appropriate personnel in their assigned work area. Interviews are meant to enhance file review and should be accomplished after reviewing the file.

If a written directive pertaining to a certain event or activity requires documentation, the documentation should be included in the file.

For standards requiring a written directive, documents required by agency policy will be included in the file.

Definitions:

3YD – refers to one example for each year, unless otherwise specified

Sampling – three examples

Sampling 3YD – one example for each year, with an additional two examples from the three-year reaccreditation cycle

Periodic – conducted or occurring at least every three years

For written reports required by standard or agency policy, use the following guidelines:

Report period	What you put in the file
Annual	one per year
Semiannual	one per year
Quarterly	two per year, consecutive, different quarters each year
Monthly	two per year, consecutive, different months each year
Weekly	two per year, consecutive, different weeks each year

For initial accreditation, proofs for existing policies should demonstrate compliance for the twelve month period prior to the assessment. Proofs for policies issued during the self-assessment phase should demonstrate compliance from the date of the policy.

For reaccreditation, proofs should reflect three years of compliance, or from assessment to assessment.

Sampling refers to what the accreditation manager puts in the file, random sampling refers to the assessor going to look for samples in addition to those in the files.

Abbreviations used in the Review Method:

- IInterview
- OObserve
- OObserve Random Sampling

If the review method column is blank, compliance can be verified through file review.

## **CHAPTER 1**

### **ORGANIZATION AND GOVERNING PRINCIPLES**

This chapter addresses the purpose, authority and responsibility for establishing an investigative function within the Office of Inspector General.

### Authority

Standard		Review methods	Assessor Guidelines
1.01M A directive states the purpose, authority, and responsibility of the Office of Inspector General investigations function.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	

### Mission Statement

Standard		Review methods	Assessor Guidelines
1.02M The Office of Inspector General investigations function has a written mission statement that is posted or distributed to all investigative staff members.		O	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Mission statement	1	1	
Documented proof of distribution or observation of posted statement.	1	3YD	

### Inspectors General Code of Ethics

Standard		Review methods	Assessor Guidelines
1.03M A directive requires all investigative staff members annually receive a copy of and abide by a code of ethics.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Code of Ethics.	1	1	
Proof of receipt.	1	3YD	

Change Notice 1.0.07  
06/27/2013

### Organizational Chart

Standard		Review methods	Assessor Guidelines
1.04M The Office of Inspector General distributes or posts an organizational chart showing components/functions, and demonstrates the Inspector General reports directly to the agency head. The chart is updated as changes occur.		O	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Current organizational chart(s).	1	3YD	
Proof of distribution or posting.	1	3YD	

### Independence From Impairments

Standard		Review methods	Assessor Guidelines
1.05M A directive requires each investigative staff member to complete an annual attestation of independence from impairments, to include, at a minimum:		I	
A. Personal;			
B. Organizational;			
C. External; and			
D. Reporting requirements if impairment occurs.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Attestations(s).	1	3YD	The annual attestation is required separate from any individual statements that may be used for each investigation.

### Confidentiality

Standard		Review methods	Assessor Guidelines
1.06M A directive establishes procedures for the release of information to the public in accordance with Florida Statutes.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	Refer to Florida Statute Chapter 119.

Change notice 1.0.04 10/14/2010

Notification to Officials

Standard		Review methods	Assessor Guidelines
1.07M A directive establishes protocols for notification to appropriate officials concerning significant investigative issues.		I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	

CFA Annual Report

Standard		Review methods	Assessor Guidelines
1.08M The Office of Inspector General investigations function submits an annual report to the Commission to report compliance efforts with accreditation standards by January 31 of each year.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Annual reports.	N/A	3YD	An annual report is required to be filed for each calendar year, January 1 – December 31. The report shall be filed electronically.

Change Notice 1.0.08 02.06.2014

Written Directive System

Standard		Review methods	Assessor Guidelines
1.09M The Office of Inspector General Investigations function has a written directive system which includes:			
A. A description of the format for each type of directive;			
B. <i>Procedures</i> for numbering, indexing or searching, and revising directives, as appropriate;			Applies to formal directives, but may not be necessary for informal communications, such as memoranda or interoffice emails.
C. A system for keeping the directives current;			
D. Statements of policy;			
E. <i>Procedures</i> for carrying out activities;			
F. <i>Procedures</i> for staff review and/or approval of proposed policies, <i>procedures</i> , and <i>rules and regulations</i> prior to their promulgation; and			Assessors should review additional examples.
G. Identification of individuals or <i>positions</i> within the Office of Inspector General investigations function having authority to issue written directives.			
H. <i>Procedures</i> for dissemination to affected members.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Receipt by affected members of new and revised policies, procedures, rules and regulations, and any other directives when specified by the agency.	1 each	1 each 3YD	
Observation of disseminated written directive manuals or electronic access system.			
Examples of written directives used.	1 each type	1 each type	
Proof of review and/or approval process in Bullet F.	1 each type	1 each type	

ADA Coordinator

Standard		Review methods	Assessor Guidelines
<b>1.10M</b>	The agency has a designated ADA coordinator in accordance with 28 C.F.R. 35.107.	I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
28 C.F.R. 35.107	1	1	
Documentation designating the ADA Coordinator.	1	1	The ADA Coordinator may be within the jurisdiction of the agency.

New standard

Change notice 1.0.03 07/01/2010

New Standard			Assessor Guidelines
<b>1.11M</b> A <i>written directive</i> describes <i>policy</i> regarding campaigning, lobbying, and political practices. This <i>policy</i> conforms to governmental statutes and regulations and is distributed to all investigative staff members.			
Proof(s) of Compliance	Qty Initial	Qty Reaccred	Accreditation Manager Notes
<i>Written directive</i> addressing elements of the standard	1	1	F.S. 104.31, 112.313

New Standard

Change Notice 1.0.08 02.06.2014

Change Notice 1.0.09 10.08.2014

## **CHAPTER 2**

### **PERSONNEL PRACTICES**

This chapter addresses personnel practices and staff qualifications applicable to the Office of Inspector General that are in compliance with established laws, rules, policies and procedures.

### Investigator Qualifications

Standard		Review methods	Assessor Guidelines
2.01M A written directive requires investigators assigned to conduct investigations to have, at a minimum:			
A.A baccalaureate degree from an accredited college or university; or			
B.Relevant employment experience as determined by the agency.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Diploma and/or official transcript, if applicable.	Sampling	Sampling	For reaccreditation, show proof for new members only.
Application or resume.	Sampling	Sampling	For reaccreditation, show proof for new members only.
Employment verification documentation.	Sampling	Sampling	For reaccreditation, show proof for new members only.

### Investigative Teams

Standard		Review methods	Assessor Guidelines
2.02M A directive states the Inspector General or designee is responsible for ensuring that investigative teams possess the necessary skills to conduct the investigation. The directive addresses, at a minimum:		I	
A. Familiarity with the programs and policies of the agency being investigated, as required;			
B. Prior investigative experience in the subject area;			
C. Training in the subject matter;			
D. Educational background in subject area;			
E. Preliminary research of program area; or			
F. Specialized skills.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	

Position Description

Standard		Review methods	Assessor Guidelines
2.03M The Office of Inspector General maintains a position description for each <i>investigative staff member</i> in the investigation section. Each <i>investigative staff member</i> will acknowledge receipt of their position description.			Acknowledgement may be in written or electronic form.
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Acknowledge of receipt of position descriptions.	Sampling	Sampling	

New standard

Change notice 1.0.06 02/21/2013

Performance Evaluation

Standard		Review methods	Assessor Guidelines
2.04MA directive requires a documented annual performance evaluation of each <i>investigative staff member</i> who reports directly or indirectly to the Inspector General, to include at a minimum:			
A. Performance evaluation based only on the performance during the rating period;			
B. Evaluation criteria specific to the position(s) occupied by the employee during the rating period;			
C. <i>Investigative Staff members</i> are rated by their immediate supervisors;			
D. The immediate supervisor and the <i>investigative staff member</i> review, discuss and acknowledge the evaluation; and			
E. The Inspector General will review all <i>investigative staff members'</i> performance evaluations.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Completed performance evaluations.	Sampling	3YD	For reaccreditation, show one evaluation for a different staff member for each year for a total of three proofs.

Change notice 1.0.06 02/21/2013

## **CHAPTER 3**

### **TRAINING**

This chapter addresses the training and continuing education requirements for investigative staff members.

### New Investigator Training

Standard		Review methods	Assessor Guidelines
3.01MA directive requires that within six months of being hired into an investigative position, the individual receive the following training, at a minimum:		I	
A. Office of Chief Inspector General;			FS 14.32
B. Agency Inspectors General Act;			FS 20.055
C. Public Records Law;			FS Chapter 119
D. Code of Ethics for Public Officers and Employees;			FS Chapter 112, Part III
E. Law Enforcement and Correctional Officers' Rights;			FS Chapter 112, Part VI
F. Florida Whistle-blower's Act;			FS 112.3187 – 112.31895
G. Principles and Standards for the Office of Inspector General;			
H. Agency specific statutes, rules, regulations, and directives;			
I. Minimal standards of conduct for state employees; and			DMS Rule 60L-36.005
J. Florida accreditation standards and process.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Documentation verifying member training.	Sampling	Sampling	A checklist may be used for training documentation.
Lesson plan, if used.	1	1	

### New Investigative Support Staff Orientation

Standard		Review methods	Assessor Guidelines
3.02MA directive requires that within six months of being hired into an investigative support staff position, the individual receive orientation in the following areas, at a minimum:			
A. Office of the Chief Inspector General;			FS 14.32
B. Agency Inspectors General Act;			FS 20.055
C. Public Records Law;			FS Chapter 119
D. Code of Ethics for Public Officers and Employees;			FS Chapter 112, Part III
E. Law Enforcement and Correctional Officers' Rights;			FS Chapter 112, Part VI
F. Florida Whistle-blower's Act;			FS 112.3187-112.31895
G. Principles and Standards for the Office of Inspector General;			
H. Agency specific statutes, rules, regulations, and directives;			
I. Minimal standards of conduct for state employees; and			DMS Rule 60L-36.005
J. Florida accreditation standards and process.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Documentation verifying member training.	Sampling	Sampling	A checklist may be used for orientation documentation.

### Continuing Education

Standard		Review methods	Assessor Guidelines
3.03M  A directive requires investigators, the Director of Investigations, and the Inspector General receive a minimum of 40 hours of documented continuing education every two years, with at least 12 of the 40 hours in subjects directly related to their primary responsibility.		I	Interview training records custodian.
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Training documentation.	Random sampling	Random sampling	

Standard		Review methods	Assessor Guidelines
<b>3.04M</b>	A directive requires that members authorized to carry weapons receive <i>in-service training</i> which includes:	I	View lesson plans for each training topic identified in the standard (not necessary to be in the file); verify full agency compliance (including upper-command staff). Remember to verify training for civilian members carrying weapons, e.g., batons, OC spray, etc.
A.	Annual demonstration of proficiency with firearms authorized to carry;	I, OR	
B.	Annual use of force training;	I, OR	Requirements for use of force training topics are contained in CJSTC Rule 11B-27.00212.
C.	Annual Dart-Firing Stun Gun training in accordance with Florida Statute;		
D.	<i>Biennial</i> less-lethal weapon training (for weapons other than the Dart-Firing Stun Gun); and	I, OR	
E.	Applicable legal updates.	I, OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Proof of training for each element of the standard.	Sampling	3YD	
Florida Statute 943.1717.	1	1	

New standard

Change notice 1.0.01 07/01/09  
Change notice 1.0.04 10/14/2010

Standard		Review methods	Assessor Guidelines
<b>3.05 M</b>	All sworn members will receive periodic first aid refresher training, as defined by the agency.	I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Proof of training.	1	Sampling	

Change Notice 1.0.08 02.06.2014

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## **CHAPTER 4**

### **INVESTIGATION PROCESS**

This chapter addresses the procedures for reviewing and processing complaints, conducting investigations, and preparing and disseminating reports. This chapter also addresses the responsibility of the Office of Inspector General to exercise due professional care throughout the investigative process.

### Complaint Intake, Assessment, and Assignment

Standard		Review methods	Assessor Guidelines
4.01MA directive establishes protocols for reviewing and tracking all complaints, to include:			
A. Receipt and documentation;			
B. Categorization;			
C. Disposition;			Disposition refers to assignment to investigative staff, referral to management or other appropriate official, or to file.
D. Written notification of disposition to complainant; and			
E. Required timeframe from receipt to disposition, with documented supervisory approval for exceptions.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Complaint tracking documentation.	Sampling	3YD	
Disposition documentation.	Sampling	3YD	
Complainant notification documentation.	Sampling	3YD	

### Elements of Investigations

Standard		Review methods	Assessor Guidelines
4.02MA directive requires each investigation include the following elements, at a minimum:			
A. Written case plan;			
B. Evidentiary support for findings;			
C. Interviews;			
D. Documented investigative activity;			
E. Written report;			
F. Bill of Rights/union contracts, when applicable; and			
G. Timeframe from assignment to case closure, with documented supervisory approval for extensions.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	

### Case Planning

Standard		Review methods	Assessor Guidelines
4.03M A directive requires investigators complete a written case plan that includes the following, at a minimum:		I	
A. Elements of the complaint and the potential violation;			
B. Case plan updates, as necessary;			
C. Documented supervisory review and approval prior to implementation of the plan; and		OR	
D. Documented supervisory review and approval of significant plan updates, as defined by the agency.		OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Completed case plan.	1	1	
Documentation of supervisory review and approval of plans.	1	1	
Documentation of supervisory review and approval of updates.	1	1	

### Evidence Review

Standard		Review methods	Assessor Guidelines
4.04M A directive requires the Inspector General, or the Director of Investigations, document their review of cases to ensure evidence:		OR	
A. Is relevant;			
B. Has logical, sensible relationships to the allegation;			
C. Is consistent with the facts; and			
D. Is sufficient to support conclusions.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Review documentation.	1	1	

## Interviews

Standard		Review methods	Assessor Guidelines
4.05M A directive establishes requirements for conducting interviews that includes, at a minimum:		I	
A. The complainant is interviewed, with exceptions documented;			
B. Witnesses are interviewed, with exceptions documented;			
C. The subject of the investigation is interviewed regarding all allegations prior to case completion, with exceptions documented;			
D. Interviews are taken under oath, with exceptions documented;		I	
E. Interviews are audio recorded or documented, with exceptions documented; and		I	
F. Documented supervisory review.		OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Case file documentation demonstrating elements of the standard.	1 each bullet	1 each bullet	
			Change notice 1.0.04 10/14/2010

## Documenting Receipt of Supporting Materials

Standard		Review methods	Assessor Guidelines
4.06M A directive establishes a requirement for documenting the receipt of case supporting materials.		OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Documentation of receipt.	1	1	Receipt may be documented electronically or on the case file itself.

Change notice 1.0.01 07/01/09

### Report Preparation

Standard			Review methods	Assessor Guidelines
4.07M A directive establishes requirements for preparing reports that include, at a minimum:				
A. A format for reports, with the following major sections at a minimum: predicate, allegations, findings, and recommendations when applicable;				
B. Proved or disproved allegations are based on developed facts related to governing directives;				
C. An attestation that the investigation was conducted in compliance with the Quality Standards for Investigations found within the Principles and Standards for Offices of Inspector General; and				
D. Documented supervisory review.			OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		
Principles and Standards for Offices of Inspector General.	1	1		
Documentation of supervisory review.	1	1		

### Bill of Rights and Union Contracts

Standard			Review methods	Assessor Guidelines
4.08M A directive requires investigative staff members to comply with constitutional, statutory and employee union/bargaining unit requirements when conducting investigations.				
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		

### Legal Consultation

Standard		Review methods	Assessor Guidelines
4.09M A directive establishes procedures for the Office of Inspector General to obtain a review of cases for legal sufficiency when necessary.		I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	

### Security of Records

Standard		Review methods	Assessor Guidelines
4.10M The Office of Inspector General investigations function establishes measures to ensure the privacy and security of investigation records.		OF,OS	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Observation of records area and related security.			

### Chain of custody

Standard		Review methods	Assessor Guidelines
<b>4.11M</b>	A directive specifies procedures for recording the chain of custody of evidence to include, at a minimum:	O	Assessor will conduct random sampling of evidence submission documentation.
A.	Date, time, and method of transfer;	OR	
B.	Receiving person's name and responsibility; and	OR	
C.	Reason for the transfer;	OR	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Completed evidence recording document.	Sampling	3YD	

New standard

Change notice 1.0.01 07/01/09

Security of evidence

Standard		Review methods	Assessor Guidelines
<b>4.12M</b>	All evidence and <i>case supporting materials</i> are kept in designated secure area(s).	OS	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Observation of secured areas.			

New standard

Change notice 1.0.01 07/01/09  
Change notice 1.0.02 10/28/2009

Evidence control

Standard		Review methods	Assessor Guidelines
<b>4.13 M</b>	If the agency has evidence, a directive designates the position accountable for all evidence within their control, and addresses the following, at a minimum:		
A.	An annual audit of evidence is conducted by a member not routinely or directly connected with control of evidence;	I	Audit: The examination of records and activities to ensure compliance with established controls, policies, and operational procedures.
B.	An unannounced annual inspection of evidence storage areas is conducted as directed by the agency's IG; and	I	This inspection does not necessarily include the inventory of evidence, which is addressed in bullet C.
C.	An annual inventory of evidence is conducted by the responsible person and a designee of the IG; and		Inventory: The act or process of cataloging through a full or partial accounting, as defined by the agency, of the quantity of goods or materials on hand.
D.	Follow-up investigative procedures for lost, missing, or stolen property or evidence.		
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Documentation of inventories, inspections, and audits.	1 each	3YD	
Documentation of follow-up investigations.	1	3YD	

New standard

Change notice 1.0.02 10/28/2009  
Change notice 1.0.09 10/08/2014

## **CHAPTER 5**

### **WHISTLE-BLOWER'S ACT**

This chapter addresses the requirements for meeting the provisions of the Whistle-blower's Act. The Office of Inspector General has a primary role in coordinating the activities of the Act and investigating allegations made by employees of state agencies and independent contractors of state agencies who report certain violations of law.

Whistle-blower's Act

Standard		Review methods	Assessor Guidelines
5.01M A directive establishes requirements for ensuring compliance with the Florida Whistle-blower's Act, to include:			
A. A documented review of each complaint for whistle-blower determination;			
B. Confidentiality;		I	
C. Statutory timeframes, with exceptions justified and documented;			
D. Notification to the Florida Department of Law Enforcement, when applicable;			
E. Provisions for whistle-blowers to respond to the final report; and			
F. Procedures for dissemination of the final report to mandated recipients.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	Refer to FS 112-3187 – 112.31895
Whistle-blower determination documentation.	Sampling	3YD	
Proof of notification.	Sampling	3YD	
Notice of opportunity to respond.	Sampling	3YD	
Documentation of dissemination.	Sampling	3YD	

Change notice 1.0.04 10/14/2010

## CHAPTER 6

### NOTIFICATION PROCESS

The standards outlined in this chapter address the procedures for Offices of Inspector General to notify *entities contracting with the state* and *individuals substantially affected* as defined in Section 20.055, Florida Statutes, of their opportunity to respond to findings. In addition, the chapter also addresses the procedures for Offices of Inspector General to notify the agency head and the Office of the Chief Inspector General when complaints are received from *entities contracting with the state* and *individuals substantially affected* as defined in Section 20.055, Florida Statutes. (Change notice 1.0.01 07/01/09)

Contractor Investigation Notification

Standard		Review methods	Assessor Guidelines
6.01M A directive requires <i>entities contracting with the state</i> that are the subject of an investigation are provided the following:			
A. Investigative findings;			
B. Notification in writing that they may submit a written response within timeframes specified by statute, ordinance, or rule after receipt of the findings; and			
C. Notification that their responses, and the Inspector General's rebuttal to the response, if any, will be included in the final investigative report.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Proof of notifications.	1 each bullet	1 each bullet 3YD	

Contractor Employee Investigation Notification

Standard			Review methods	Assessor Guidelines
6.02M A directive requires that information is provided to <i>individuals substantially affected</i> by the findings, conclusions or recommendations of an Inspector General investigation, but not currently afforded an existing right to an independent review process. Information includes:				
A. Investigative findings;				
B. Notification in writing that they may submit a written response within timeframes specified by statute, ordinance, or rule after receipt of the findings; and				
C. Notification that their responses, and the Inspector General's rebuttal to the response, if any, will be included in the final investigative report.				
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		
Proof of notifications.	1 each bullet	1 each bullet 3YD		

IG Complaint Notifications

Standard			Review methods	Assessor Guidelines
6.03M A directive requires the Inspector General to provide the agency head with copies of complaints or allegations of misconduct related to the Office of Inspector General or its employees. For agencies under the Governor's jurisdiction, the Inspector General will also provide copies to the Chief Inspector General.				
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		
Documentation showing dissemination.	Sampling	Sampling 3YD		

## **CHAPTER 7**

### **CASE MANAGEMENT**

This chapter outlines the elements necessary for data tracking, file organization and records retention regarding investigative cases.

Case Tracking System

Standard		Review methods	Assessor Guidelines
7.01M A directive establishes a tracking system for the Office of Inspector General investigation function to include the following, at a minimum:		○	
A. Type of case;			
B. Assigned investigator;			
C. Date assigned;			
D. Summary or listing of allegations; and			
E. Current status.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Observation of system.			

Case File Organization

Standard		Review methods	Assessor Guidelines
7.02M Investigative case files will include the following documentation, at a minimum:		OR	
A. Intake form;			
B. Initial complaint;			
C. Initial case plan;			
D. Florida Whistle-blower analysis, if applicable;			
E. Interviews;			
F. Evidence and supporting documentation;			Supporting documentation includes electronic records.
G. Referral documentation			
H. Final report of investigation with exhibits/and attachments; and			
I. Management's response to Inspector General's recommendations.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Observation of completed investigative case files.	Random sampling	Random sampling	

Change notice 1.0.04 10/14/2010

Record Retention

Standard		Review methods	Assessor Guidelines
7.03M A directive establishes procedures for the storage, receipt, and archival of case file materials.		I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	Refer to Florida Records Retention Schedule GS1-SL and GS2.
Destruction documentation.	1	3YD	
Observation of storage and archival systems.			

Change notice 1.0.04 10/14/2010

## **CHAPTER 8**

### **FINAL REPORTING PROCESSES**

This chapter addresses investigative conclusions, distribution of final reports, post investigative activities and notification of criminal allegations to appropriate law enforcement agencies.

Conclusions of Fact

Standard			Review methods	Assessor Guidelines
8.01M A directive describes the various conclusions of fact used by the Office of Inspector General investigations function.				
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		
Documentation demonstrating the various conclusions of facts	1 each type	1 each type		

Final Report Distribution

Standard			Review methods	Assessor Guidelines
8.02M A directive establishes procedures for distributing final Office of Inspector General investigative reports.			I	
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		

Post Investigative Responses

Standard			Review methods	Assessor Guidelines
8.03M A directive establishes guidelines for addressing post investigative responses to reports, to include at a minimum:				
A. A documented review of issues raised; and				
B. Response documentation, if appropriate.				
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes	
Written directive addressing elements of the standard.	1	1		
Review documentation.	Sampling	3YD		
Response documentation.	Sampling	3YD		

Law Enforcement Notification

Standard		Review methods	Assessor Guidelines
8.04M A directive requires documented timely notification to appropriate law enforcement officials when there are reasonable grounds to believe a criminal violation has occurred.			
Compliance keys	Qty initial	Qty reaccred	Accreditation Manager Notes
Written directive addressing elements of the standard.	1	1	
Documentation of notification.	Sampling	3YD	

## GLOSSARY

<b>ACCREDITATION</b>	Granting of credentials symbolizing approval from a professional organization upon practitioners or specific institutions. Complying with specific accepted standards established for an investigative function of an Office of Inspector General.
<b>AGENCY</b>	As used in this standards' manual, agency refers to the investigative function of an Office of Inspector General.
<b>AGENCY HEAD</b>	The Governor, a Cabinet officer, a secretary, an executive director, commissioner, chair or board of directors and duly elected local official (i.e. Board of County Commissioners, City Mayor, Clerk of the Circuit Court & Comptroller, etc.)
<b>ANNUAL</b>	An event occurring once every 12 months.
<b>APPLICANT AGENCY</b>	An agency that has applied to the Commission for state accredited status.
<b>AUDIT</b>	The examination of records and activities to ensure compliance with established controls, policies, laws and regulations and operational procedures, and to recommend any indicated improvements and changes.
<b>BIENNIAL</b>	An event that occurs every two years.
<b>CANDIDATE AGENCY</b>	An agency that has completed a successful onsite assessment and is being reviewed by the Commission for accreditation or reaccreditation status.
<b>CASE SUPPORTING MATERIALS</b>	Materials gathered to support conclusions and recommendations. Case supporting materials may include, but are not limited to, sworn statements, witness statements, timesheets, travel vouchers, and other documentation gathered during the administrative investigation.
<b>CEO</b>	The agency's Inspector General.
<b>CFA</b>	The Commission for Florida Law Enforcement Accreditation, Inc.
<b>CIVILIAN MEMBER</b>	A full or part-time person who is not certified and does not possess arrest powers.
<b>CJSTC</b>	The Criminal Justice Standards and Training Commission.
<b>COMPLAINT</b>	An allegation of misconduct, violation of law or agency directives against any member of the agency or for which the OIG has jurisdiction. This does not include a complainant's misunderstanding or disagreement with the application of law or agency policy or procedures.

<b>COMPLIANCE KEYS</b>	Documentation or other methods used to demonstrate compliance with a standard.
<b>COMPONENT</b>	A subdivision of the agency, such as a division, bureau, section, unit, or position that is established to provide a specific function.
<b>CONCLUSIONS OF FACT</b>	Final determination about allegations based on investigative activities. Classifications of investigative findings may include exonerated, sustained, not sustained, unfounded, and policy failure.
<b>CONDITIONAL STANDARDS</b>	Standards beginning with "If" refer to conditions that may render the standard Not Applicable.
<b>CRITERIA</b>	A standard, rule, or test on which a judgment or decision can be based.
<b>DIRECTIVE</b>	A written document used to guide the actions of members and establish agency policies and practices. Examples of written directives include, but are not limited to, policy statements, standard operating procedures, general orders, memoranda, union contracts, laws, written orders, and instructional material., or to agency file.
<b>ENTITIES CONTRACTING WITH THE STATE</b>	For-profit and not-for-profit organizations or businesses having a legal existence, such as corporations or partnerships, as opposed to natural persons, which have entered into a relationship with a state agency as defined in paragraph (a) to provide for consideration of certain goods or services to the state agency or on behalf of the state agency.
<b>FUNCTION</b>	A general term for the required or expected activity of a person or an organizational component.
<b>GUIDELINES</b>	Statements or other indications of policy or procedure to determine a course of action.
<b>INDIVIDUALS SUBSTANTIALLY AFFECTED</b>	Natural persons who have established a real and sufficiently immediate injury in fact due to the findings, conclusions, or recommendations of a final report of a state agency inspector general, who are the subject of the audit or investigation, and who do not have or are not currently afforded an existing right to an independent review process. See Florida Statute 20.055 for exemptions.
<b>IN-SERVICE TRAINING</b>	Training received by agency members to enhance knowledge, skills, or abilities. This includes formal retraining, specialized, promotional, or advanced training. In-service training may also include less formal types of instruction.
<b>INSPECTION</b>	The act or process of examining or looking at carefully.
<b>INSPECTOR GENERAL</b>	The head of an Office of Inspector General.

<b>INVENTORY</b>	The act or process of cataloging through a full accounting of the quantity of goods or materials on hand, unless a standard specifically allows for a partial accounting.
<b>LESSON PLAN</b>	A detailed format an instructor uses to conduct a course. A lesson plan may include: goals, specific subject matter, performance objectives, references, resources, and method of evaluating or testing students.
<b>MANDATORY STANDARDS</b>	Every agency is required to meet all of these standards except those not applicable, or for which a waiver has been granted.
<b>MEMBER</b>	A generic term utilized in this manual to describe all agency personnel, including volunteers, part-time personnel, and interns.
<b>MEMORANDUM</b>	An informal, written document that may or may not convey an order; it is generally used to clarify, inform, or inquire. Memoranda may be used for proofs of compliance.
<b>NOT APPLICABLE (N/A) STANDARDS</b>	Standards that address areas of responsibility or investigative practices for which the agency is not performing due to contracts, jurisdiction, or mutual aid agreements. The agency must prove non-applicability. See <i>Conditional Standards</i> definition for additional information on non-applicability.
<b>PERIODIC</b>	Conducted or occurring at least every three years.
<b>PLAN</b>	A detailed scheme, program, or method worked out beforehand for the accomplishment of an objective, proposed or tentative project, or goal. A plan may be a systematic arrangement of details, an outline, drawing, or diagram.
<b>POLICY STATEMENT</b>	A broad statement of agency principles that provides a framework or philosophical basis for agency procedures.
<b>POSITION</b>	The duties and responsibilities assigned to one employee. A position may have functional responsibility for a single task or multiple tasks.
<b>POSITION DESCRIPTION</b>	An official written statement setting forth the duties and responsibilities of a job, and the skills, knowledge, and abilities necessary to perform it.
<b>PROCEDURE</b>	A manner of proceeding, a way of performing or affecting something, an act composed of steps, a course of action, and a set of established forms or methods for conducting the affairs of the agency.
<b>PROCESS</b>	A series of actions, changes, or functions bringing about a result.
<b>RULES AND REGULATIONS</b>	Specific guidelines describing allowed and prohibited behavior, actions, or conduct.
<b>SEMI-ANNUAL</b>	Occurring or issued twice a year.
<b>STANDARD OPERATING</b>	

**PROCEDURE**

A written directive which specifies how agency activities are carried out.

**SWORN MEMBER**

A member, as defined by statute, who is certified by CJSTC, possesses full law enforcement and arrest powers, and is employed either full or part-time by a law enforcement agency. This member may or may not be compensated.

**WITNESS**

A person having information or evidence relevant to a complaint, administrative review, investigation, or crime.

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