

Audit Division Report Audit of 2023 Investigation Timeframe Requirements

24-007

18 December 2024

The Audit Division conducted this audit—the fifth in a series of annual audits—to measure the Bureau of Internal Affairs' (BIA) ability to comply with deadlines for conducting complaint log investigations, as specified in the Department policies S08-01-02, "Investigation Timelines and Benchmarks", S08-01-07, "Command Channel Review," and S08-01-08, "Post-Investigation Log Number procedures".

While the Audit Division found that BIA does not always meet the timeframe requirements as set forth in Department orders, the Audit Division notes that BIA is still in the process of implementing many of the recommendations issued in last year's annual report.¹

SUMMARY AND PROPOSED PRIORITIZATION OF RECOMMENDATIONS & SUGGESTIONS

Recommendation and Suggestion Prioritization Table

No.	Recommendation	Priority
1	BIA, working with its CMS vendor, should identify and address the reason some extension notifications were not generated automatically in CMS.	Low
2	BIA should develop a process for documenting the dates on which extension notifications are sent by mail to reporting parties.	High

¹ Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023.

FINDING 1

Standards

S08-01-02 II.C.: BIA investigators will arrive at an investigative finding and recommendation within **180** days of the initiation of the Log Number investigation. Any request for an extension of time after the **180** days must be approved in writing by the Chief of BIA or their designee.

Current Practices

BIA arriving at investigative findings within 180 days of initiating the investigation

According to CMS data, of the 917 cases BIA closed in 2023²:

- 391 (42.6%) cases arrived at investigative finding within 180 days of the initiation of the investigation
- 512 (55.8%) cases arrived at investigative findings after 180 days of the initiation of the investigation.
- 14 (1.5%) cases with investigative finding dates that occurred before the initiation of the investigation.³

Approval of extension requests

Although S08-01-02 requires written approval of extension requests by the Chief of BIA or their designee, BIA informed the Audit Division during the previous year's audit that extensions are neither approved nor denied. Rather, extensions are only reviewed to determine the reason for an extension and allow investigators' supervisors the opportunity to review and provide feedback to investigators and to determine if cases are progressing in a timely manner. BIA implemented a process that delivers automated email alerts to the Chief of BIA when extensions are requested.

Reasons Current Practices do not Meet Standards

As noted in the 2023 audit of investigative timeframes, BIA reported that staffing-related matters such as shortages and furloughs were obstacles to completing investigations within timelines specified by S08-01-02.

² Year over year comparisons are not included in this year's report given 1) differences in timeframes evaluated; the current year's audit considers the entirety of 2023 while the previous year's audit was condensed to the period 01 July 2022 through 31 December 2022 to provide BIA with enough time to fully operationalize enhancements to CMS designed to enhance the investigative process, and 2) differences in standards referenced for the audit. Prior years' audits considered only consent decree paragraphs while this year's audit considered Department directives that largely mirror consent decree paragraphs previously used as audit standards. The different standards resulted in the use of a different methodology for calculating the time elapsed between the initiation of an investigation and an investigator reaching investigative findings. Previous reports considered the assignment of the case to CPD as the initiation date, whereas this year's report considers the date an investigator was assigned to the case. If multiple investigators were assigned, the Audit Division utilized the most recent investigator assignment date.

³ The Audit Division was informed by the Department's CMS vendor that only one investigative findings date is stored in CMS although investigators may be assigned after the investigative findings date annotated in CMS.

For cases where investigative finding dates occurred prior to the initiation of the investigation, multiple investigators were assigned to revisit the cases (e.g. when members contest the disciplinary decision, command staff requires investigators to conduct further research, etc.).

Additionally, as noted above, BIA does not require approval of extension requests by any party. However, in response to last year's recommendation to either a) adhere to consent decree paragraph 471 by requiring approval of extensions requests or b) confirm with the IMT that BIA's current approach fulfills requirements of paragraph 471, BIA stated their intent to develop an email message in CMS that notifies the Chief of BIA or their designee of an extension request, If the Chief of BIA (or designee) does not approve the request, he/she will contact the BIA investigator's supervisor to determine the next steps. According to BIA, this process will allow the investigator to continue to access the case and avoid unnecessary delays in the process. The Audit Division notes that this procedure does not conform with the directive that "Any request for an extension of time after the 180 days must be approved in writing by the Chief of BIA or their designee."

Implications

Results of the Audit Division's analysis indicate the Department is not in compliance with S08-01-02. Completing investigations of misconduct thoroughly and expeditiously aids the Department in fostering a culture of accountability and transparency among the public and members of the Department.

Recommendation

The recommendations from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remain open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: BIA intends to discuss Special Order S08-01-02 both internally and with the IMT in an effort to ensure that we can achieve compliance. Investigators would not be able to access their cases if extensions were not automatically granted and this would cause unwanted delays in investigations.

FINDING 2

Standards

S08-01-02 II.D.: Accountability sergeants will arrive at an investigative finding and recommendation within **90** days of the initiation of the Log Number investigation. Any request for an extension of time after the **90** days must be approved in writing by the respective BIA supervising lieutenant.

Current Practices

Districts arriving at investigative finding within 90 days of initiating the investigation

Of the 539 cases assigned to Districts that were closed in 2023⁴:

- 65 (12.1%) of the cases arrived at the investigative finding within 90 days or less of the initiation of the investigation.
- 473 (87.8%) cases arrived at the investigative finding in excess of 90 days of the initiation of the investigation.
- 1 (0.1%) case with an investigative finding date that occurred before the initiation of the investigation.⁵

Approval of extension requests

Although S08-01-02 requires written approval of extension requests by the respective BIA supervising lieutenant, BIA informed the Audit Division during the previous year's audit that extensions are neither approved nor denied. Rather, extensions are only reviewed to determine the reason for an extension and allow investigators' supervisors the opportunity to review and provide feedback to investigators and to determine if cases are progressing in a timely manner. BIA implemented a process that delivers automated email alerts to the Accountability Sergeant's District Commander of an extension request.

Reasons Current Practices do not Meet Standards

As reported in 2023 audit, BIA reported that staffing-related matters such as shortages and furloughs were obstacles to completing investigations within timelines specified by S08-01-02.

For cases where investigative finding dates occurred prior to the initiation of the investigation, multiple investigators were assigned to revisit the cases (e.g. when members contest the disciplinary decision, command staff requires investigators to conduct further research, etc.).

Additionally, as noted above, BIA does not require approval of extension requests by any party. However, in response to last year's recommendation to either a) adhere to consent decree

⁴ Year over year comparisons are not included in this year's report given 1) differences in timeframes evaluated; the current year's audit considers the entirety of 2023 while the previous year's audit was condensed to the period 01 July 2022 through 31 December 2022 to provide BIA with enough time to fully operationalize enhancements to CMS designed to enhance the investigative process, and 2) differences in standards referenced for the audit. Prior years' audits considered only consent decree paragraphs while this year's audit considered Department directives that largely mirror consent decree paragraphs previously used as audit standards. The different standards resulted in the use of a different methodology for calculating the time elapsed between the initiation of an investigation and an investigator reaching investigative findings. Previous reports considered the assignment of the case to CPD as the initiation date, whereas this year's report considers the date an investigator was assigned to the case. If multiple investigators were assigned, the Audit Division utilized the most recent investigator assignment date.

⁵ The Audit Division was informed by the Department's CMS vendor that only one investigative findings date is stored in CMS although investigators may be assigned after the investigative findings date annotated in CMS.

paragraph 471 by requiring approval of extensions requests or b) confirm with the IMT that BIA's current approach fulfills requirements of paragraph 471, BIA stated their intent to develop an email message in CMS that notifies the Accountability Sergeant's District Commander of an extension request. If the District Commander does not approve the request, he/she will contact the BIA investigator's supervisor to determine the next steps. According to BIA, this process will allow the investigator to continue to access the case and avoid unnecessary delays in the process. The Audit Division notes that this procedure does not conform with the directive that "Any request for an extension of time after the 90 days must be approved in writing by the respective BIA supervising lieutenant."

Implications

Results of the Audit Division's analysis indicate the Department is not in compliance with S08-01-02. Completing investigations of misconduct thoroughly and expeditiously aids the Department in fostering a culture of accountability and transparency among the public and members of the Department.

Recommendation

The recommendations from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remain open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: BIA intends to discuss Special Order S08-01-02 both internally and with the IMT in an effort to ensure that we can achieve compliance. Investigators would not be able to access their cases if extensions were not automatically granted and this would cause unwanted delays in investigations.

FINDING 3

Standards

S08-01-02 II.E.: When a BIA investigator does not arrive at an investigative finding and recommendation within **180** days of the initiation of the Log Number investigation, the BIA investigator will provide a written notice of the reason(s) for the inability to complete the investigation within the timeframe provided. This written notice will be provided within **5** days of the **180**-day deadline to the complainant (or complainant's representative), the accused CPD member(s) or counsel (unless such notification would compromise the integrity of the investigation), and the accused member's district or unit commander. The written notice will be updated every **90** days until the administrative investigation is completed.

S08-01-02 II.F.: When an accountability sergeant does not arrive at an investigative finding and recommendation within **90** days of the initiation of the Log Number investigation, the accountability sergeant will provide a written notice of the reason(s) for the inability to complete the investigation within the timeframe. The written notice will be provided within **5** days of the **90** day deadline to the complainant (or complainant's representative), the accused CPD member(s) or counsel (unless such notification would compromise the integrity of the investigation), and the

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accused member's district or unit commander. The written notice will be updated every **90** days until the administrative investigation is completed.

Current Practices

According to BIA, notifications regarding the extension of investigations are automatically delivered from CMS to complainants or their representatives by e-mail, if the complainant or designee provided this information. If complainants provide mailing addresses, extension notifications are delivered by mail.

BIA: Compliance with deadlines for delivery of extension notifications

Of 512 cases where BIA fell short of meeting the 180-day deadline for reaching investigative findings, the Audit Division's analysis identified 397 reporting party subjects eligible to receive extension notifications. Email addresses were documented in CMS for 188 reporting party subjects.

Of the 188 reporting party subjects eligible to receive extension notifications with email addresses on file, CMS data indicates that 173 (92.02%) reporting party subjects received extension notifications via email.⁶

In regards to the 209 reporting party subjects without a documented email address, the Audit Division is unable to validate delivery of extension notifications delivered by mail because certified mail receipts and/or tracking numbers are not consistently uploaded to CMS when correspondence is delivered by mail.

District: Compliance with deadlines for delivery of extension notifications

Of 473 cases where Districts fell short of meeting the 90-day deadline for reaching investigative findings, CMS data shows that 435 reporting party subjects were eligible to receive extension notifications. Email addresses were documented in CMS for 153 reporting party subjects. Of the 153 reporting party subjects eligible to receive extension notifications with email addresses on record, CMS data indicates that 151 (98.7%) reporting party subjects received extension notifications via email.

In regards to the 282 reporting party subjects without a documented email address, the Audit Division is unable to validate delivery of extension notifications delivered by mail because certified mail receipts and/or tracking numbers are not consistently uploaded to CMS when correspondence is delivered by mail.

Reasons Current Practices do not Meet Standards

The Audit Division is unable to determine why some extensions notifications generated via email are not sent to complainants as email notifications are generated automatically in CMS.

⁶ 8 of the 15 cases where extension notifications were not delivered were opened between 2005 and 2019 but were included in the file of cases closed in 2023. 1=One case, opened in 2021, lists one of the reporting party subjects eligible for receipt of an extension notification as the investigator for the case.

BIA informed the Audit Division that delivering certified mail receipts for notifications that require delivery by mail is cost-prohibitive and inefficient given the unit's current staffing shortages.

Implications

The Department is currently unable to demonstrate its compliance with S08-01-02 II.E.& F. Continually informing complainants of the status of investigations is paramount in improving the public's trust of the Department. However, the Department is currently unable to determine if notifications concerning the extension of investigations are delivered consistently to complainants.

Recommendation 1

BIA, working with its CMS vendor, should identify and address the reason some extension notifications were not generated automatically in CMS.

Recommendation 2

BIA should develop a process for documenting the dates on which extension notifications are sent by mail to reporting parties.

Auditee Response

Response from BIA: BIA understands the importance of notifying the reporting party in the case of extensions to investigations. BIA will work with the vendor to ensure that the date the notification was sent to the reporting party is properly and consistently documented.

FINDING 4

Standards

S08-01-08 II.D.: Within sixty days of the final disciplinary decision, the completed ASRs will be published on the Department's public website.

Current Practices

Administrative Summary Reports (ASR) are used to report the final finding of an investigation and if applicable, disciplinary action taken.

G08-01-01 - COMPLAINT AND DISCIPLINARY DEFINITIONS Section II.Y. define the Final Disciplinary Decision as the "final decision of the Superintendent or his or her designee regarding whether to issue or recommend discipline after review and consideration of the investigative findings and recommendations, including after any additional investigation conducted as a result of such review." G08-01-01 - COMPLAINT AND DISCIPLINARY DEFINITIONS Section II.Y.2. goes on to note that "For BIA investigations, the Chief of BIA (or his or her designee) has been designated by the Superintendent to provide the final disciplinary decision."

Of the 1456 closed cases, 1276 (87.6%) had ASR publish dates in 2023. Of these:

- 266 (18.3%) had a Final Disciplinary Decision Date and an ASR Publish Date. Of these,

- 88 (33.1%) had an ASR Publish Date within 60 days after the Final Disciplinary Date.
 - 10 of the 88 cases had ASR's published prior to 2023⁷
- 178 (66.9%) had an ASR Publish Date in excess of 60 days after the Final Disciplinary Date.
 - 15 of the 178 cases had ASR's published prior to 2023⁸
- 1010 (69.4%) had "NULL" values for a Final Disciplinary Decision Date but had an ASR Publish Date.

Of the 1456 closed cases, 180 (12.4%) did not have an ASR publish date in 2023:

- 176 (97.8%) had "Null" values for a Final Disciplinary Decision Date and ASR Publish Date
- 4 (2.2%) had "NULL" values for ASR Publish Date but had a Disciplinary Decision Date

Reasons Current Practices do not Meet Standards

As reported in last year's audit, BIA explained that ASRs are published after suspensions are served to ensure there are no changes in penalties prior to disseminating ASRs outside of the Department. Members may also file grievances to contest the Department's disciplinary decision, which ultimately extends the time required to fully close investigations. The Audit Division notes that there are no stipulations in the Consent Decree or relevant directives that allow extensions for the delivery of ASRs.

The Audit Division was informed of circumstances that explain the existence of null values in the final disciplinary decision date although an ASR publish date is populated. For example, this could occur with cases that would not require the BIA Chief or their designee to provide a final disciplinary decision (e.g., cases where allegations are not sustained).⁹ Additionally, members may resign before the final disciplinary decision is reached and, consequently, the Final Disciplinary Decision Date would remain null.

Implications

The Department has fallen short of meeting compliance with S08-01-08 II.D. The timely publishing of outcomes of investigations publicly promotes transparency and helps foster the public's trust in the Department's ability to conduct fair and timely investigations. Failing to promptly share the outcome of investigations publicly may adversely affect the public perception of the Department.

⁷ The Audit Division was informed by BIA leadership during the previous year's audit that cases where ASR publish dates appear prior to the case closed dates are likely cases that were reopened after an ASR was issued

⁸ The Audit Division was informed by BIA leadership during the previous year's audit that cases where ASR publish dates appear prior to the case closed dates are likely cases that were reopened after an ASR was issued

⁹ S08-01-07 "Command Channel Review" Section VI.A.2a., "When the CCR process has been completed for all accused members in an Accountability Sergeant or BIA Investigator investigation, the assistant advocate will forward all accused members with sustained allegation to the Chief of BIA for final disciplinary decision.

Section VI.A.3. "For members who have no sustained allegations, when CCR is complete, the assistant advocate will place the Log Number investigation into CLOSED/FINAL status for reference and retention in the accused members' file under the applicable bargaining agreements, court orders, and state law."

Recommendation

The recommendation from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remains open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: BIA has internally reviewed the parameters of publication of ASRs and now does publish them within 60 days of the final disciplinary decision. BIA is also working with Column (vendor) to implement an updated notification field status indicating that an ASR has reached the final disciplinary decision and is ready to publish.

FINDING 5

Standards

S08-01-08 IV.A BIA will provide the reporting party/subject a copy of the ASR within sixty days of the final disciplinary decision.

Current Practices

The Audit Division was informed that ASRs are delivered to complainants via e-mail if the complainant shared an e-mail address. Otherwise, ASRs are delivered by mail to the address provided by the complainant, unless the complainant opted to withhold this information or requested full anonymity.

CMS data shows that 110 email addresses were provided for cases where a final disciplinary decision date was populated.¹⁰ Of these, 58 (53.6%) received ASRs via email.

Documentation used to track correspondence delivered by mail is not uploaded to CMS consistently. Consequently, the Audit Division was unable to determine the total number of ASRs delivered to each complainant or their designee and validate whether complainants were provided with ASRs within 60 days of the final disciplinary decision.

Reasons Current Practices do not Meet Standards

BIA does not consistently upload proof of ASR delivery.

Inability to assess compliance for ASRs delivered by mail

The Audit Division was informed by BIA that certified mail is not used to deliver ASRs but the reports are delivered by mail via USPS.¹¹ Documentation that would serve as proof of delivery, such as certified mail receipts and/or USPS parcel tracking status reports were inconsistently

¹⁰ Some cases may designate multiple reporting parties/subjects; therefore, multiple email addresses may be captured per case.

¹¹ The ASR Review team is responsible for reviewing, redacting and delivering ASRs. The ASR Review team currently consists of 1 person who is also responsible for developing CMS refresher training content and executing CMS training. However, the Department has recently hired a second reviewer who must complete training before starting the position.

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uploaded to CMS. However, BIA retains the envelopes used to mail ASRs that were undeliverable and returned to the Department in addition to hard copies of the ASRs included in returned envelopes. This documentation is retained to serve as proof that the Department attempted to deliver ASRs. Considering the lack of documentation that would serve as proof of the Department's attempts at mailing ASRs, the Audit Division was unable to determine the extent to which the Department complies with S08-01-08 IV.A.

Delayed delivery of ASRs

Upon inquiring about the reason for delays in delivering ASRs via e-mail, the Audit Division was informed during the course of last year's audit that ASRs are redacted and delivered to complainants after cases are closed *and* suspensions are served (if applicable).

The Audit Division was also informed that accused members opting to file grievances to contest the Department's disciplinary decision may also contribute to delays in publishing ASRs. Filing grievances requires an additional review of the investigation, which ultimately extends the duration of the case and potentially delays ASR publication.¹²

Implications

The Department is currently unable to assess its ability to comply with S08-01-02 IV.A. Informing complainants about the outcome of investigations is paramount in improving Department members and the public's trust of the Department. However, the Department is currently unable to determine if ASRs are delivered consistently to complainants.

Recommendation

The recommendations from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remain open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: ASRs that are sent by USPS and returned to BIA as undeliverable are documented as such in the NOTES section of CMS.

FINDING 6

Standards

S08-01-07 III.B.3.: Each level of Command Channel Review will be conducted within fifteen calendar days. Any two-level Command Channel Review process will be concluded within thirty days.

¹² S08-01-08 Post-Investigation Log Number Procedures Section IV.B. "BIA will notify the reporting party/subject in writing if an accused member elects to file a labor grievance relating to any discipline imposed due to a sustained log number investigation within ten days of receiving notice of the grievance."

Current Practices

1090 (74.9%) of the 1456 cases closed in 2023 where BIA investigators and Accountability Sergeants completed investigative findings went through the Command Channel Review (CCR) process.¹³ Of these 1090 cases, 18 met the criteria used to identify the most serious administrative investigations, as specified in S08-01-07 III.C and were excluded from the analysis for Finding 6 (they are discussed separately in Finding 7). The remaining 1077 cases were subject to one or two levels of CCR.

Of the 1077 CCR cases that went through first level review:

- 891 (82.7%) cases went through first level within 15 days or less.
- 186 (17.3%) cases went through first level in excess of 15 days.

Of the 1070 CCR cases that went through second level review¹⁴:

- 1057 (98.8%) went through second level CCR within 15 days.
- 13 (1.2%) went through second level CCR in excess of 15 days.

Of the 1070 cases went through first and second level of Command Channel Review:

- 977 (91.3%) of the cases went through the first and second level of command channel review within 30 days or less.
- 93 (8.7%) of the cases went through the first and second level of command channel review in excess of 30 days.

Reasons Current Practices do not Meet Standards

While the overwhelming majority of cases completed CCR within the deadlines specified in S08-01-07.III.B.1-2, the Audit Division's analysis continues to show, year over year, that a subset of the population fell short of meeting the abovementioned deadlines despite the automation of the CCR process that automatically moves cases from each level of review after the 15-day deadline. The above results indicate the automated process is not fully functioning.

Implications

Completing investigations of misconduct thoroughly and expeditiously aids the Department in fostering a culture of accountability and transparency among the public and members of the Department. However, the Department has experienced difficulty meeting timeframe requirements for completing CCR and, consequently, has fallen short of meeting compliance with requirements specified in S08-01-07.III.B.1-2.

¹³ Special Order S08-01-07 identifies circumstances under which a CCR bypass is authorized. The Audit Division did not assess whether cases that did not go through CCR were exempt from this process according to exceptions outlined in S08-01-07 III.A.1-5

¹⁴ One case went from Command Channel review level one to BIA Chief level, skipping level two. A second case went from Command Channel Review level one to Superintendent Review, skipping three levels. Five additional cases went through only one level of Command Channel Review. These seven cases were excluded from the totals that went through two levels.

Recommendation

The recommendation from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remains open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: BIA understands the importance of meeting the 15-day deadline for CCR review. The system automatically performs a system/case update overnight. When reaching the 15-day limit, CCR cases do not update in real-time. Once the 15-day mark is hit, the system self-updates the following night- leading to cases to be over the 15-day period. BIA intends to address this with Column and see if a real-time CCR case update is feasible and cost-effective.

FINDING 7

Standards

S08-01-07 III.B.5.: Certain circumstances and more serious allegations, as outlined in *Item III-C* of this directive, will require a third level of Command Channel Review conducted by the First Deputy Superintendent. Any three-level Command Channel Review process will be concluded within forty-five days.

Current Practices

Of the 18 cases BIA closed in 2023 that underwent a third level of CCR:

- 14 (77.8%) cases went the 3 levels of CCR within 45 days or less.
- 4 (22.2%) cases went through 3 levels of CCR in excess of 45 days.¹⁵

Reasons Current Practices do not Meet Standards

1 of the 4 cases was initiated 9 years prior to being closed in 2023, another case was initiated 5 years prior to being closed in 2023. Information in CMS shows that findings were revisited on numerous occasions for both of these cases prior to closure.

For each of the cases, there were no notes captured within the Command Channel Review section of CMS explaining the cause of the delay.

The Audit Division recognizes that cases requiring three levels of Command Channel Review may require additional time for command staff to evaluate.

Implications

Completing investigations of misconduct thoroughly and expeditiously aids the Department in fostering a culture of accountability and transparency among the public and members of the Department.

¹⁵ These 4 completed CCR in 47, 56, 104, and 168 days.

Recommendation

The recommendation from the Audit of 2022 Investigation Timeframe Requirements (23-003), finalized 28 November 2023, pertaining to this finding remains open. The Audit Division will report on the implementation status of existing recommendations in its semi-annual recommendation status report in 2025.

Auditee Response

Response from BIA: The Case Management System (CMS) was implemented in February of 2019. The two mentioned cases were completed in the CLEAR system, not in CMS. CMSS has migrated all legacy data into its system for permanent record retention.

SCOPE & METHODOLOGY

BIA's CMS vendor provided the Audit Division with the data required for this audit, which included closed case log numbers for the period from 01 January 2023 to 31 December 2023. The Audit Division met virtually and via phone with BIA officials and vendor representatives several times throughout the project to gain a better understanding of the data and BIA processes. Audit Division personnel conducted all data analyses presented in this report. The data analyzed in this audit relate only to BIA—not COPA—investigations.

The Audit Division relied on the CMS vendor to provide complete data. The Audit Division did not review any non-CMS data and/or documentation in BIA's possession (e.g., paper files) as part of this audit. Other data sources/documentation could demonstrate BIA compliance with the standards addressed in this report.

The Audit Division conducted this analysis between September 2024 and November 2024.

THE AUDIT DIVISION

The mission of the Audit Division is to provide quality, independent, and objective assessments of the operations, processes, and internal controls in support of the Chicago Police Department. All audits, reviews, and advisements are intended to provide objective information to inform decision-making and to help improve the internal transparency and accountability of the Department's operations.

The Audit Division recognizes the standards and guidance contained in the Institute of Internal Auditor's *International Standards of the Professional Practice of Internal Auditing*. The Audit Division strives to comply with these standards in order to maintain the highest caliber of professionalism in conducting its audits and reviews.

Please contact audit@chicagopolice.org with any questions about this product.