



## **Audit Division Report**

### **Audit of 2024 Investigation Timeframe Requirements**

25-002

19 May 2025

The Audit Division conducted this audit—the sixth in a series of annual audits—to measure the Bureau of Internal Affairs' (BIA) compliance with deadlines for conducting log number investigations, as specified in S08-01-02, *Investigation Timelines and Benchmarks*, S08-01-07, *Command Channel Review*, and S08-01-08, *Post-Investigation Log Number Procedures*. This audit also measured whether closed log number investigations underwent a third level of command channel review (CCR), when required, as described in S08-01-07. Finally, this audit measured the extent to which BIA investigated anonymous complaints, in accordance with G08-01-02, *Complaint Initiation and Log Number Investigation Assignment*.

To complete this audit, the Audit Division reviewed 1,407 log number investigations. These log number investigations represent investigations that were closed in calendar year 2024 and: 1) were not administratively closed; 2) were neither classified as “Info/Complaint” cases, nor as “Notification” incidents; 3) were not closed for not having an affidavit; and 4) had a case status of “Closed” or some variation of closed including “Close Hold.” These criteria also captured cases that, while closed in 2024, were initiated prior to 2024 including one case that was initiated in 2007.

As described in the findings below, the timeframe requirements set forth in the directives are not often met and many cases that should have had a third-level CCR did not. The Audit Division did find that BIA is investigating anonymous complaints as required.

While not all of the requirements in the directives are met, the Audit Division recognizes: 1) recommendations from the fourth annual audit were implemented or closed in calendar year 2024 and their impacts may not be reflected in the data used for this current audit; and 2) BIA is still in the process of implementing other recommendations previously made.

## SUMMARY OF RECOMMENDATIONS AND SUGGESTIONS

*Recommendation and Suggestion Prioritization Table*

No.	Recommendation/Suggestion	Priority
1	The S08 suite of policies should be amended to eliminate the conflicting language related to when the 180-day timeframe for arriving at an investigative finding and recommendation begins.	High
2	The Department should ensure that BIA is fully staffed.	High
3	The S08 suite of policies should be amended to eliminate the conflicting language related to when the 90-day timeframe for arriving at an investigative finding and recommendation begins.	High
4	BIA should work with its CMS vendor to confirm CMS auto-generates email notices within 5 days of the expiration of the 90/180-day timeframe, for log numbers in which the complainant provides an email address.	Medium
5	For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document when the first extension was sent to a complainant.	Medium
6	BIA should work with its CMS vendor to confirm CMS auto-generates and emails notices every 60 days after the expiration of the 180-day timeframe, for log numbers in which the complainant provides an email address.	Medium
7	For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document every time a 60-day notice is sent to a complainant.	Medium
8	The Department should establish an ASR publication timeframe requirement that accounts for all legal considerations.	High
9	BIA should establish and document in policy the Final Disciplinary Decision date for all case types.	Medium
10	The Department should update S08-01-07 to allow for extensions of the CCR due date.	Medium
11	BIA should create a control to ensure log numbers that require a third level review receive the third level review.	Medium
12	BIA should amend CPD-44.248 to include a “cultural bias” category.	Low



## 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

Under S08-01-02.II.C, the 180-day investigative timeframe begins at the initiation of the log number investigation. However, S08-01-02.III.H states the timeframe begins upon an investigator being assigned to the investigation and thus, the 180-day timeframe would reset upon the reassignment of a case. Additionally, S08-01-03.III.C.2 states investigators will “make all reasonable efforts to arrive at investigative findings and recommendations within 180 days from the date they are assigned an investigation.” Due to the conflicting nature of this language, the Audit Division measured compliance from both starting points: (1) 180-days from the initiation of the log number (i.e., 180 days from the date the first investigator was assigned); and (2) 180-days from the date the last investigator was assigned (i.e., 180-days from the date the investigator who closed the case was assigned).

Of the 1,407 closed cases the Audit Division reviewed, 834 were closed by BIA investigators.

**180-days from the initiation of the log number (i.e., 180 days from the date the first investigator was assigned).**

Of the 834 cases closed by BIA investigators in calendar year 2024, when starting the 180-day timeframe from the date the first investigator was assigned:

- 294 (35.3%) cases had an investigative finding date within 180 days of the initiation of the investigation;
- 539 (64.6%) cases did not have an investigative finding date within 180 days of the initiation of the investigation; and
- 1 (0.1%) case did not have an investigator assignment date.

**180-days from the date the last investigator was assigned.**

Of the 834 cases closed by BIA investigators in calendar year 2024, when starting the 180-day timeframe from the date the last investigator was assigned:

- 461 (55.3%) cases had an investigative finding date within 180 days of the last investigator being assigned the case;
- 372 (44.6%) cases did not have an investigative finding date within 180 days of the last investigator being assigned the case; and
- 1 (0.1%) case did not have an investigator assignment date.

Although S08-01-02.II.C requires written approval of extension requests by the Chief of BIA or their designee, and while CMS has a feature that can lock an investigator out of a case until an extension request is approved, BIA informed the Audit Division that, currently,



extensions are neither approved nor denied. Rather, if an extension is required, CMS emails a supervisor alerting them that a case is going beyond the allotted timeframe. Individual case timeframes may be scrutinized by a supervisor during a check-in meeting with the assigned investigator.

#### Reasons Current Practices Do Not Meet Standards

BIA is understaffed. Per Department records, as of November 2024 BIA had:

- 4 (80%) assigned/detailed lieutenants of the 5 in the 2024 budget
- 39 (63.9%) assigned/detailed sergeants of the 61 in the 2024 budget
- 5 (16.1%) assigned/detailed investigators of the 31 in the 2024 budget

While BIA had 39 (150%) assigned/detailed police officers, 13 above the number allocated in the 2024 budget, this number does not sufficiently close the staffing gap.

BIA currently is not enforcing the requirement under S08-01-02.II.C, 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*. However, BIA is collaborating with its CMS vendor to develop a solution to enable this enforcement.

#### Implications

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

#### Recommendation 1

The S08 suite of policies should be amended to eliminate the conflicting language related to when the 180-day timeframe for arriving at an investigative finding and recommendation begins.

#### Recommendation 2

The Department should ensure that BIA is fully staffed.

#### Auditee Response

See Appendix I

### 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

Similar to Finding 1, S08-01-02.II.D and S08-01-03.III.D.2 have conflicting language for when the accountability sergeants' 90-day timeframe begins. For this reason, like Finding 1, the Audit Division measured compliance from both starting points: (1) 90-days from the initiation of the log number investigation (i.e., 90 days from the date the first accountability sergeant was assigned); and (2) 90-days from the date the last accountability sergeant was assigned (i.e., 90-days from the date the accountability sergeant who closed the case was assigned).

Of the 1,407 closed log number investigations the Audit Division reviewed, 573 were closed by accountability sergeants.

### **90-days from the initiation of the log number (i.e., 90 days from the date the first accountability sergeant was assigned).**

Of the 573 cases closed by accountability sergeants in 2024, when starting the 90-day time frame from the date the first accountability sergeant was assigned:

- 18 (3.1%) cases had an investigative finding date within 90 days of the initiation of the investigation;
- 555 (96.9%) cases did not have an investigative finding date within 90 days of the initiation of the investigation.

### **90-days from the date the last accountability sergeant was assigned.**

Of the 573 cases closed by accountability sergeants in calendar year 2024, when starting the 90-day time frame from the date the last accountability sergeant was assigned:

- 46 (8.0%) cases had an investigative finding date within 90 days of the last accountability sergeant being assigned the case; and
- 527 (92.0%) cases did not have an investigative finding date within 90 days of the last accountability sergeant being assigned to the case.

As noted in Finding 1, extension requests are neither approved nor denied though S08-01-02.II.D requires written approval. Rather, CMS sends alerts to supervisors for cases extending beyond the allotted timeframe.

### Reasons Current Practices Do Not Meet Standards

According to BIA, one reason accountability sergeants may not be meeting their timeframe requirements is that they are responsible for duties beyond conducting investigations. Furthermore, bottlenecks exist when accountability sergeants send their cases to a BIA sergeant or lieutenant for review.<sup>1</sup>

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<sup>1</sup> The Audit Division is not issuing a recommendation related to accountability sergeant responsibilities because the Division has not independently and thoroughly assessed accountability sergeants' workload.

BIA is not enforcing the requirement under S08-01-02.II.D, that *any request for an extension of time after the 90 days must be approved in writing by the respective BIA supervising lieutenant*. However, BIA is collaborating with its CMS vendor to develop a solution to enable this enforcement.

#### Implications

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

#### Recommendation 3

The S08 suite of policies should be amended to eliminate the conflicting language related to when the 90-day timeframe for arriving at an investigative finding and recommendation begins.

#### Auditee Response

See Appendix I

### 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 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 written notice will be updated every 90 days until the administrative investigation is completed.

#### Current Practices

Per BIA, for cases that extend beyond their allotted timeframes, CMS auto-generates and auto-sends emails to complainants at the completion of the timeframe and every 60 days thereafter, if the complainant provided their email address at some point during the investigation (see Finding 4 for information these 60-day notifications). If there is no email address, a letter is created and should be sent to the complainant by the investigator or accountability sergeant. Such letters should be documented in CMS.



To perform this analysis, the Audit Division reviewed emailed notices that CMS generated and sent for log numbers that were opened in 2023 and 2024.<sup>2</sup> The Audit Division also reviewed log numbers that did not receive a notice through CMS for proof that a first notice was delivered to a complainant.

### **Analysis of log numbers with reporting party email addresses**

CMS emailed 570 first extension notices associated with log numbers that were initiated in 2023 and 2024.

Because of the conflicting language regarding when the 90/180-day timeframe begins in the S08 suite of directives, the Audit Division measured whether first extension notices were sent within 5 days from both: (1) 90/180-days from the initiation of the log number (i.e., 90/180 days from the date the first accountability sergeant/investigator was assigned); and (2) 90/180-days from the date the last accountability sergeant/investigator was assigned (i.e., 90/180-days from the date the accountability sergeant/investigator who closed the case was assigned).

### **90/180 days from the initiation of the Log Number investigation**

Of the 570 first extension notices in CMS:

- 1 (0.2%) was sent within 5 days of the expiration of the 90/180-day timeframe.
- 569 (99.8%) were not sent within 5 days of the expiration of the 90/180-day timeframe.

Among the 569 notifications that were not sent within 5 days of the expiration of the timeframe, first notices were sent between 533 days before the expiration of the timeframe and 456 days after.

### **90/180 days from the date the last accountability sergeant/investigator was assigned**

Of the 570 first extension notices the Audit Division found in CMS:

- 1 (0.2%) was sent within 5 days of the expiration of the 90/180-day timeframe.<sup>3</sup>
- 569 (99.8%) were not sent within 5 days of the expiration of the 90/180-day timeframe.

Among the 569 notifications that were not sent within 5 days of the expiration of the timeframe, first notices were sent between 717 days before the expiration of the timeframe and 333 days after.

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<sup>2</sup> CMS started sending email notices to complainants in 2022.

<sup>3</sup> The 1 case that had its notification sent within 5-days of the expiration of the time frame is the same log number noted above. The case was assigned once and was never reassigned. Therefore, the timeframe was the same under both criteria the Audit Division used to evaluate this standard.



**90-day notices for accountability sergeants**

Per BIA, the 60-day notices that are sent under S08-01-02.II.G are used in place of the 90-day notices that are required to be sent under S08-01-02.II.E and S08-01-02.II.F. Per S08-01-02.II.G., 60-day notices are not sent unless an accountability sergeant/investigator does not arrive to a finding within 180 days of the initiation of a log number investigation.

Because of this, accountability sergeants are required to send an additional notice between the first extension notice (sent 5 days before the expiration of the timeframe under S08-01-02.II.F), and the start of the 60-day notices (which are only sent if an investigation exceeds the 180-day mark) in order to meet the standard of “the written notice will be updated every 90 days until the administrative investigation is completed.”

The Audit Division reviewed cases closed by accountability sergeants to determine whether CMS sent a second notice to complainants within 90-days of the first extension notice. Of the 199 second notices the Audit Division identified, 30 (15.1%) were sent within 90 days while 169 (84.9%) were sent between 91 days and 181 days after.

**Sample of cases without a reporting party email address**

Of the 1,407 log numbers the Audit Division reviewed, 438 did not receive any emailed extension notices. The Audit Division took a random sample of 10 log numbers from those 438 to determine if there was any evidence in CMS that an extension notice was sent through other means.<sup>4</sup> Of those 10 cases, there was no evidence in CMS suggesting a first extension notice was sent to the reporting party.

**Reasons Current Practices Do Not Meet Standards**

Currently, CMS begins the 90/180-day timeframe when a case is opened, not when a log number investigation is initiated or assigned as required under the directives. Additionally, CMS is set to send first extension notices 30-days before the expiration of either timeframe, not within 5 days of the expiration of either timeframe, as required under the directives. Thus, complainants who provided email addresses appear to be receiving notices, but not within the timeframes required under S08-01-02.

BIA investigators and accountability sergeants are not sending (or not documenting) extension notices to individuals who do not provide an email address.

**Implications**

Complainants are unaware of investigation statuses which can affect the understanding of Department practices by the public and Department members.

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<sup>4</sup> Unlike its analysis for notices that were emailed through CMS, the Audit Division's sample included 8 log numbers that were opened prior to 2023 because the Department is still required to send extension notifications under S08-01-02, regardless of when the case was opened and whether a complainant provided an email address.





#### Recommendation 4

BIA should work with its CMS vendor to confirm CMS auto-generates email notices within 5 days of the expiration of the 90/180-day timeframe, for log numbers in which the complainant provides an email address.

#### Recommendation 5

For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document when the first extension was sent to a complainant.

#### Auditee Response

See Appendix I

### FINDING 4

#### Standards

S08-01-02.II.G: When the BIA investigator or accountability sergeant does not arrive at an investigative finding and recommendation within **180 days** of the initiation of the Log Number investigation, the investigator will attempt to contact the complainant or the complainant's representative at least once every **60 days** to provide status updates until the investigative findings and recommendations are issued. Such contact will be documented in the administrative investigative file.

#### Current Practices

The Audit Division reviewed emailed notices that CMS generated and sent for log numbers that were opened in 2023 and 2024.<sup>5</sup> The Audit Division also reviewed log numbers that did not receive an emailed notice through CMS for proof that 60-day notices were delivered to a complainant.

#### **Analysis of log numbers with reporting party email addresses**

Similar to Finding 3, per BIA, CMS auto-generates extension notifications and emails the notifications to complainants every 60 days if the complainant provided an email address. Unlike the standards in Finding 3, these 60-day notices are only sent after 180 days of the initiation of the Log Number investigation, regardless of whether the investigation is conducted by an investigator or accountability sergeant.

Because of the conflicting language regarding when the 180-day timeframe begins in the S08 suite of directives, the Audit Division measured whether notices that were subsequent to a first extension notice were sent every 60 days starting from: (1) The expiration of the 180-day timeframe that began on the date at the initiation of the log number investigation (i.e., 180 days from the date the first accountability sergeant/investigator was assigned); and (2) the expiration of the 180-day timeframe that began on the date the last

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<sup>5</sup> CMS started sending email notices to complainants in 2022.



accountability sergeant/investigator was assigned (i.e., 180-days from the date the accountability sergeant/investigator who closed the case was assigned).

### **180 days from the initiation of the Log Number investigation**

CMS emailed 1,472 60-day notices to complainants. Of these:

- 274 (18.6%) were sent 0-58 days from either the 180-day mark or a previously sent extension notice;
- 11 (0.7%) were sent 59 days from either the 180-day mark or a previously sent extension notice;
- 328 (22.3%) were sent 60 days from either the 180-day mark or a previously sent extension notice;
- 803 (54.6%) were sent 61 days from either the 180-day mark or a previously sent extension notice;
- 28 (1.9%) were sent 62 days from either the 180-day mark or a previously sent extension notice; and
- 28 (1.9%) were sent between 91 days and 456 days from either the 180-day mark or a previously sent extension notice.

### **180 days from the date the last accountability sergeant/investigator was assigned**

CMS emailed 1,209 60-day notices to complainants. Of these:

- 252 (20.8%) were sent 0-58 days from either the 180-day mark or a previously sent extension notice;
- 9 (0.7%) were sent 59 days from either the 180-day mark or a previously sent extension notice;
- 254 (21.0%) were sent 60 days from either the 180-day mark or a previously sent extension notice;
- 647 (53.5%) were sent 61 days from either the 180-day mark or a previously sent extension notice;
- 24 (2.0%) were sent 62 days from either the 180-day mark or a previously sent extension notice; and
- 23 (1.9%) were sent between 92 days and 259 days from either the 180-day mark or a previously sent extension notice.

### **Sample of cases without a reporting party email address**

In addition to reviewing CMS data, the Audit Division reviewed the same 10 log numbers it reviewed under Finding 3 to determine if those 10 log numbers received subsequent extension notices. Of those 10 cases, there was no evidence in CMS suggesting any subsequent extension notice was sent to the reporting party.

### **Reasons Current Practices Do Not Meet Standards**

Currently, CMS begins the 180-day timeframe when a case is opened, not when a log number investigation is initiated or assigned as required under the directives. Additionally, CMS is set to send extension notices 30-days before the expiration of any timeframe. Thus,

complainants who provided email addresses appear to be getting notices, but not always within the timeframes required under S08-01-02.

BIA investigators and accountability sergeants are not sending (or not documenting) extension notices to individuals who do not provide an email address.

#### Implications

Complainants are unaware of investigation statuses which can affect the understanding of Department practices by the public and Department members

#### Recommendation 6

BIA should work with its CMS vendor to confirm CMS auto-generates and emails notices every 60 days after the expiration of the 180-day timeframe, for log numbers in which the complainant provides an email address

#### Recommendation 7

For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document every time a 60-day notice is sent to a complainant.

#### Auditee Response

See Appendix I

### FINDING 5

#### Standards

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

<https://home.chicagopolice.org/administrative-summary-report-index/>

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

CMS captures both when an Administrative Summary Report (ASR) is published and, if an email is available, when a reporting party subject receives an ASR through email. CMS also captures the Chief of BIA's review date. Under S08-01-07.IV.D.2, the Chief of BIA, or his or her designee, provides the final disciplinary decision for log number investigations conducted by accountability sergeants and BIA investigators. Because of this, the timeframe for publishing and sending ASRs to reporting party subjects expires 60 days after the Chief's review takes place.

#### **ASR Publishing Dates**

Of the 1,407 log numbers the Audit Division reviewed:

- 155 (11.0%) had an ASR published within 60 days of the final disciplinary decision;

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- 125 (8.9%) had an ASR published but not within 60 days of the final disciplinary decision;<sup>6</sup>
- 1,073 (76.3%) did not have a Chief review date and did not have a penalty resulting in separation thus preventing the Audit Division from determining if those ASRs were published in accordance with this standard;
- 28 (2.0%) did not have a Chief review date but had a penalty resulting in separation and therefore, per BIA, do not require a Chief review date;
- 26 (1.8%) did not have an ASR publishing date. Of those 26, 25 were log numbers that were opened between 2007 and 2019 while 1 was opened in 2024.<sup>7</sup>

#### **Analysis of log numbers with reporting party subject email addresses**

Of the 1,407 log numbers the Audit Division reviewed, 155 of them had notes in CMS indicating a reporting party subject was emailed an ASR. Of those 155:

- 100 (64.5%) received an ASR within 60 days of the final disciplinary decision; and
- 55 (35.5%) did not receive an ASR within 60 days of the final disciplinary decision.

CMS data indicates 706 additional log numbers received an emailed ASR; however, because there was no Chief review date, the Audit Division was unable to determine if those ASRs were sent within the 60-day timeframe.

#### **Sample of cases without a reporting party subject email address**

In addition to reviewing CMS data, the Audit Division took a random sample of 10 log numbers from the 546 log numbers that did not receive an emailed ASR to determine whether those reporting party subjects received an ASR through a different method. Of the 10 cases reviewed:

- 3 case files contained clear evidence that an ASR was sent to a reporting party subject via certified mail; however, only one case demonstrated an ASR was sent within the 60-day time frame. ASR's were sent 47 days, 178 days and 378 days after the last chief review date.
- 5 cases were Department-initiated complaints in which BIA attempted to send an ASR via CMS, pro-forma; 3 within the appropriate timeframe and 2 beyond. Copies of ASR's were logged in CMS 20 days, 49 days, 57 days, 61 days and 63 days after the last chief review date.
- 2 case files did not contain evidence that the Department attempted to send an ASR. While both of these cases were opened prior to the requirement that ASRs be sent to a reporting party subject, both cases were closed in calendar year 2024.

<sup>6</sup> This number includes 3 log numbers that had an ASR publish date before the most recent Chief review date.

<sup>7</sup> Per BIA, cases that were opened prior to 1 Feb 2019 do not require an ASR, even if such cases are closed in 2024.



### Reasons Current Practices Do Not Meet Standards

According to BIA, the mandated timeframe for publishing and sending ASRs to reporting party subjects conflicts with legal concerns surrounding the publication of case information prior to the conclusion of the grievance process.

What constitutes the final disciplinary decision date remains unclear. For some cases, this date corresponds to the date the BIA Chief reviews and approves the case. However, many investigations do not require the Chief's review.

BIA has determined that cases that were opened prior to 2019 do not require an ASR—even if they were closed in 2024.<sup>8</sup>

### Implications

The Department is currently unable to fully assess its ability to comply with S08-01-08. Informing complainants about the outcome of investigations is paramount in improving Department members and the public's trust of the Department. The Department is currently unable to determine if ASRs are published and delivered consistently to reporting party subjects.

### Recommendation 8

The Department should establish an ASR publication timeframe requirement that accounts for all legal considerations.

### Recommendation 9

BIA should establish and document in policy the Final Disciplinary Decision date for all case types.

### Auditee Response

See Appendix I

## 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.

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.

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<sup>8</sup> While the Audit Division was unable to identify a standard to justify BIA's determination, the Division notes that pre-2019 cases represent a small percentage of all cases closed in 2024 (25 cases 1.8%). As such, the Audit Division is not issuing a recommendation related to this point.



### Current Practices

Under S08-01-07, CCR must be completed within 30 days, or within 45 days if a third level of review is required. Of the 1,407 log numbers in its population, the Audit Division reviewed the timing<sup>9</sup> of 1,993 members' individual CCRs who went through either: (1) a first and second level review; or (2) a first, second, and third level review.<sup>10</sup> Among those 1,993:

- 1,700 (85.3%) had their CCRs fully completed within 30 to 45-day timeframe as required;
- 293 (14.7%) did not have their CCRs fully completed within the 30 to 45-day timeframe as required.

Among the 293 that did not meet the 30 to 45-day timeframe:

- 275 (93.9%) had first level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days;
- 7 (2.4%) had second level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days;
- 2 (0.7%) had third level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days;
- 8 (2.7%) had first and second level reviews that exceeded 15 days or more; and
- 1 (0.3%) had a first and third level review that exceeded 15 days or more.

There were 284 first level reviews that exceeded 15 days. Among those 284:

- 43 (15.1%) were completed within 16 days;
- 32 (11.3%) were completed within 17 days; and
- 209 (73.6%) were completed after 17 days.

There were 15 second level reviews that exceeded 15 days. Among those 15:

- 2 (13.3%) were completed within 16 days; and
- 13 (86.7%) were completed after 17 days.

There were 3 third level reviews that exceeded 15 days. All 3 reviews were completed after 17 days.

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<sup>9</sup> For this analysis, the Audit Division measured how many days elapsed between either: (1) the Investigative Findings Date and the first-level review date to measure how long first level reviews took; (2) the first-level review date and the second-level review date to measure how long second level reviews took; or (3) the second level review date and the third level review date to measure how long third level reviews took.

<sup>10</sup> There were 315 members within its population of 1,407 log numbers whose CCR timeframes the Audit Division did not evaluate because they were missing either a first-level review date, a second-level review date or both.



### Reasons Current Practices Do Not Meet Standards

BIA can extend the CCR due date in certain circumstances (e.g., when a reviewer is on furlough, for operational considerations, etc.). However, these extensions are not accounted for under existing policy.

### 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.

### Recommendation 10

The Department should update S08-01-07 to allow for extensions of the CCR due date.

### Auditee Response

See Appendix I

## FINDING 7

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### Standards

Standard 1: S08-01-07.III.C: Completed *Log Number* investigations meeting the below criteria will be subject to a third level of Command Channel Review that will be conducted by the First Deputy Superintendent:

1. a penalty recommendation of a suspension of sixteen days or more;
2. sustained allegation(s) where the accused member is alleged to have committed a crime, including domestic battery;
3. sustained allegation(s) where a complaint has *been* or could be made to the Equal Employment Opportunity Officer (including allegations of cultural bias, sexual harassment, or other violations prohibited by prevailing employment laws); or
4. an exempt member is the accused.

### Current Practices

The Audit Division assessed whether members involved in cases closed in 2024 received a third level of CCR if a third level was required. In addition to a recommended penalty of 16 or more days requiring a third level review, certain ranks, and certain categories of allegations also require a third level. BIA generally categorizes allegations in CMS based on Form CPD-44.248, *Incident Category Table*.

Using the criteria set by S08-01-07, CPD-44.248, and data from CMS, the Audit Division identified 23 members whose circumstances required a third level review.<sup>11</sup> Among those 23 members:

- 15 (65.2%) received a third level of review; and

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<sup>11</sup> As part of this analysis, the Audit Division removed cases that received CCR bypass or mediation.

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- 8 (34.8%) did not receive a third level of review.<sup>12</sup>

Among the 8 that did not receive the third level review:

- 1 required a third level because the recommended penalty was 16+ days;
- 3 required a third level because the accused were exempt, sworn members;<sup>13</sup>
- 2 required a third level because they had sustained EEO investigations;
- 1 required a third level review because the recommended penalty was 16+ days, had a sustained EEO investigation, and the accused was an exempt member; and
- 1 required a third level review because the recommended penalty was 16+ days and had a sustained criminal investigation.

While the standards require a third level review for sustained allegations of cultural bias, CPD-44.248 does not include a "cultural bias" category. In the absence of this categorization, BIA has no means of flagging any sustained allegations related to cultural bias and forwarding it to third level review.

#### Reasons Current Practices Do Not Meet Standards

CCR is not always being completed when required. BIA indicated log numbers only receive a third level review if BIA personnel manually enter such review is required. Such personnel may not be entering it when it is required.

#### Implications

Per S08-01-07 II.A, CCR helps ensure recommended levels of discipline are consistently applied in a fair and thorough fashion based on the nature of the misconduct. Thus, in the absence of consistent CCR use, the Department risks issuing discipline that is not consistently applied in a fair and thorough fashion.

#### Recommendation 11

BIA should create a control to ensure log numbers that require a third level review receive the third level review.

#### Recommendation 12

BIA should amend CPD-44.248 to include a "cultural bias" category.

#### Auditee Response

See Appendix I

<sup>12</sup> Among the 8 that did not have a third level review, 6 did not have any level of CCR completed.

<sup>13</sup> While accused civilian members within the Department are subject to CCR, the Audit Division was unable to ascertain which ranks qualify as "exempt." For that reason, this part of the analysis only reviewed whether sworn, exempt members underwent a third level review.



## FINDING 8

Standards

G08-01-02.IV.C.1: BIA or its designees investigate **all** complaints against Department members not conducted by COPA or the Office of the Inspector General upon the receipt of a Log Number investigation.

Current Practices

To test this standard, the Audit Division reviewed a random sample of 94 cases that were closed in 2024 in which the complainant was unknown or anonymous. To measure whether those 94 cases were investigated under this standard, the Audit Division reviewed closing reports to ensure: (1) the closing report addressed the complaint; and (2) the investigation was closed due to reasons other than the mere fact the complaint was anonymous.

Of the 94 cases reviewed:

- 90 (95.7%) closing reports suggest the complaint was sufficiently investigated despite the complainant being anonymous or unknown;
- 1 (1.1%) case file included investigation materials, but the narrative of the relevant closing report suggested additional investigatory steps could have been taken;
- 1 (1.1%) case was administratively closed at intake and, while a closing report template appears in CMS, there is no evidence of a completed closing report; and
- 2 (2.1%) cases were not complaints, but intended as service requests. In one case BIA referred to the applicable district, the other BIA referred the complainant to 3-1-1 services.

Based on these practices, the Audit Division concludes that BIA, or its designees, investigate all complaints it receives—including anonymous complaints.

Reasons Current Practices Do Not Meet Standards

N/A

Implications

N/A

Recommendation

N/A

Auditee Response

N/A

SCOPE & METHODOLOGY

BIA's CMS vendor provided the Audit Division with the CMS data required for this audit. This data included all log number investigations that were closed between January 1, 2024, and December 31, 2024. Throughout this audit, Audit Division personnel met with the vendor

and BIA virtually and had several in-person meetings with BIA. All data analyzed in this audit relate to investigations conducted and closed by BIA.

The Audit Division only reviewed data provided by the vendor and data found within CMS itself. It did not review non-CMS data, nor did it review documentation in BIA's possession (e.g., paper files).

The Audit Division conducted this analysis between January 2025 and May 2025.

#### THE AUDIT DIVISION

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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](mailto:audit@chicagopolice.org) with any questions about this product.



## APPENDIX I: BIA RESPONSE

**Office of the Superintendent  
Bureau of Internal Affairs**

**19 May 2025**

**TO:** Matthew Spears  
Assistant Director  
Audit Division

**FROM:** Timothy Moore  
Deputy Director  
Bureau of Internal Affairs

**SUBJECT: BIA Response to Audit of 2024 BIA Investigation Timeframe Requirements**

The undersigned is submitting the BIA response as requested by for the Audit Division's draft Audit of 2024 Investigation Timeframe Requirements.


CPD Audit Recommendation	BIA Response
1: The S08 suite of policies should be amended to eliminate the conflicting language related to when the 180-day timeframe for arriving at an investigative finding and recommendation begins.	BIA acknowledges the conflicting language in S08-01-02 and S08-01-03 regarding the start of the 180-day investigative timeframe. We will form a policy review committee by June 30, 2025, to revise the S08 suite, clarifying that the 180-day timeframe begins at the initiation of the log number investigation. Revised directives will be submitted for Department approval by September 30, 2025, to ensure consistency and compliance.
2: The Department should ensure that BIA is fully staffed.	BIA recognizes the staffing shortages impacting investigation timeliness, with only 60.7% of budgeted sergeants and 19.4% of investigators assigned as of April 2025. We are collaborating with the Department's Human Resources Division to expedite recruitment and detailing processes, targeting 90% staffing fulfillment by December 31, 2025. Additionally, BIA will assess workload distribution to optimize existing personnel until full staffing is achieved.
3: The S08 suite of policies should be amended to eliminate the conflicting language related to when the 90-day timeframe for arriving at an investigative finding and recommendation begins.	Similar to Recommendation 1, BIA will address the conflicting language in S08-01-02 and S08-01-03 concerning the 90-day timeframe for accountability sergeants. The policy review committee, established by June 30, 2025, will clarify that the 90-day timeframe begins at the initiation of the log



	number investigation. Revised policies will be submitted for approval by September 30, 2025, to enhance clarity and compliance.
<b>4:</b> BIA should work with its CMS vendor to confirm CMS auto-generates email notices within 5 days of the expiration of the 90/180-day timeframe, for log numbers in which the complainant provides an email address.	BIA acknowledges that CMS currently sends notices 30 days before the 90/180-day timeframe expiration, not within 5 days as required. We will engage with our CMS vendor by July 15, 2025, to reconfigure the system to auto-generate and send email notices within the mandated 5-day window. This update will be implemented and tested by October 31, 2025, to ensure compliance with S08-01-02.
<b>5:</b> For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document when the first extension was sent to a complainant.	BIA recognizes the lack of documentation for extension notices sent to complainants without email addresses. By August 31, 2025, we will update CMS training protocols to mandate that accountability sergeants and investigators log the date and method of first extension notices in CMS. Compliance will be monitored through monthly CMS audits starting September 2025.
<b>6:</b> BIA should work with its CMS vendor to confirm CMS auto-generates and emails notices every 60 days after the expiration of the 180-day timeframe, for log numbers in which the complainant provides an email address.	BIA will collaborate with the CMS vendor by July 15, 2025, to ensure CMS auto-generates and emails 60-day status notices post-180-day timeframe expiration, as required by S08-01-02. System updates will be completed by October 31, 2025, with automated notices aligned to the directive's timeline. BIA will verify functionality through a pilot test in November 2025.
<b>7:</b> For log numbers in which complainants did not leave an email address, accountability sergeants/investigators should document every time a 60-day notice is sent to a complainant.	To address undocumented 60-day notices for complainants without email addresses, BIA will implement a CMS documentation requirement by August 31, 2025. Investigators and accountability sergeants will be trained to record the date and delivery method of each 60-day notice. Monthly CMS audits, starting September 2025, will ensure adherence to this standard.
<b>8:</b> The Department should establish an ASR publication timeframe requirement that accounts for all legal considerations.	BIA acknowledges the conflict between the 60-day ASR publication requirement and legal constraints related to grievance processes. We will work with the Department's Legal Affairs Division by August 15, 2025, to develop a revised S08-01-08 timeframe that balances



	transparency with legal obligations. A proposed policy amendment will be submitted for approval by November 30, 2025.
<b>9:</b> BIA should establish and document in policy the Final Disciplinary Decision date for all case types.	BIA agrees that the Final Disciplinary Decision date is inconsistently defined across case types. By September 30, 2025, we will revise S08-01-08 to establish clear criteria for the Final Disciplinary Decision date, including cases not requiring Chief review. This policy update will be incorporated into CMS workflows and communicated to staff by November 15, 2025.
<b>10:</b> The Department should update S08-01-07 to allow for extensions of the CCR due date.	BIA supports updating S08-01-07 to formalize CCR due date extensions for operational needs, such as reviewer furloughs. By July 31, 2025, we will propose amendments to S08-01-07, specifying conditions and approval processes for extensions. The revised directive will be submitted for Department approval by October 15, 2025, to improve CCR compliance.
<b>11:</b> BIA should create a control to ensure log numbers that require a third level review, receive the third level review.	BIA acknowledges that 34.8% of cases requiring third-level CCR did not receive it due to manual entry errors. By September 15, 2025, we will implement a CMS control to automatically flag cases meeting S08-01-07.III.C criteria (e.g., 16+ day suspensions, EEO allegations) for third-level review. This feature will be tested and operational by November 30, 2025.
<b>12:</b> BIA should amend CPD-44.248 to include a "cultural bias" category.	BIA agrees that adding a "cultural bias" category to CPD-44.248 will ensure allegations requiring third-level CCR are properly flagged. By August 31, 2025, we will amend CPD-44.248 to include this category and update CMS to reflect the change. Training on the new category will be provided to investigators by October 31, 2025, to enhance compliance with S08-01-07.

  
 Timothy Moore  
 Deputy Director  
 Bureau of Internal Affairs