

Audit Division Report Audit of BIA Timeframes

26-003

28 May 2026

The Audit Division conducted this audit—the seventh in a series of annual audits—to measure the Bureau of Internal Affairs' (BIA) compliance with deadlines for conducting log number investigations set forth in the Department's S08 Suite of directives. 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.

To complete this audit, the Audit Division reviewed 1,415 log number investigations. These represent investigations that were closed in calendar year 2025 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 2025, were initiated prior to 2025, including cases initiated starting in 2017.

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. While the Audit Division found that BIA does not always meet the timeframe requirements as set forth in the Department's orders, the Audit Division recognizes: (1) recommendations made in the fourth, fifth, and sixth annual audits were implemented or closed in calendar year 2025, and the recommendations' impacts would not reflect on all data the Audit Division analyzed for this year's audit; and (2) BIA is in the process of implementing other previously-issued recommendations. This report includes one new recommendation, as shown in the table below.

SUMMARY OF RECOMMENDATIONS

No.	Recommendation	Priority
1	BIA should improve its procedures for identifying cases that require a third level of Command Channel Review.	Medium

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 policy, the 180-day investigative timeframe begins at the initiation of the log number investigation. Through discussion with the Office of Constitutional Policing and Reform (OCPD) leadership, the Audit Division defines this as the CPD assignment date (the date when a case is assigned to CPD by the Civilian Office of Police Accountability (COPA)).

Of the 1,415 closed cases the Audit Division reviewed, 895 were closed by BIA Investigators.

Of the 895 cases closed by BIA investigators in calendar year 2025:

- 328 (36.6%) cases had an investigative finding date within 180 days.¹
- 567 (63.4%) cases did not have an investigative finding date within 180 days (range: 181 to 3,004 days).

BIA implemented CMS changes in 2025 to capture extension requests and the reason for supervisor approvals. Using the CMS extension report, the Audit Division found that 443 (78.1%) of the 567 cases that needed an extension had an extension request date before the 180-day timeframe expired. Another 72 (12.7%) had an extension request, but the request was dated after the 180-deadline. The remaining 52 (9.2%) did not have extension requests. The Audit Division notes that only 2 cases of these 52 were opened in 2025. The remainder were opened in years prior to when BIA updated CMS.

Reasons Current Practices do not Meet Standards

BIA is understaffed, per Department records. As of 23 March 2026, BIA had:

- 37 (60.7%) assigned/detailed sergeants of the 61 in the 2026 budget
- 6 (19.4%) assigned/detailed investigators of the 31 in the 2026 budget

While BIA had 41 assigned/detailed police officers, 29 above the number allocated

¹ One of these log numbers had an investigative finding on the same day as CPD assignment and one had an investigative finding 123 days before CPD assignment. These anomalies appear to be related to one legacy case and one case that COPA originally investigated.

in the 2026 budget, this number does not sufficiently close the staffing gap. As of 23 March 2026, there are still 58 positions that are still waiting to be filled.²

In addition, there is misalignment between S08-01-02 and BIA practices regarding the start of the 180-day period. Per the directive, the 180-day investigative timeframe begins at the initiation of the log number investigation. However, BIA operationalizes the start date as the date an investigator is assigned to a case (and restarts the 180-day period if the case is reassigned).

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

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations please see Appendix III, Recommendation 1 and 2.

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

Under S08-01-02. II. D, the 90-day investigative timeframe begins at the initiation of the log number investigation. Through discussion with OCPR leadership, the Audit Division defines this as the CPD assignment date (the date when a case is assigned to CPD by COPA).

Of the 1,415 closed cases the Audit Division reviewed, 520 were closed by accountability sergeants.

Of the 520 cases closed by accountability sergeants in calendar year 2025:

- 42 (8.1%) cases had an investigative finding date within 90 days .
- 478 (91.9%) cases did not have an investigative finding date within 90 days (range: 94 to 1,882).

² 1 commander, 1 lieutenant, 24 sergeants, 3 POs assigned as detectives, 1 police agent, 1 supervising investigator, 25 investigators, 1 principal operations analyst, and 1 senior performance analyst. The Audit Division also notes there are 29 more police officers assigned or detailed to BIA than positions budgeted per the 2026 budget and 1 additional police technician than budgeted.

BIA implemented CMS changes in 2025 to capture extension requests and the reason for supervisor approvals. Using the CMS extension report, the Audit Division found that 341 (71.3%) of the 478 that needed an extension had an extension request date before the 90-day timeframe expired. The remaining 137 (28.7%) had an extension request, but the request was dated after the 90-day timeframe. The Audit Division notes that only 2 cases of these 137 were opened in 2025. The remainder were opened in years prior to when BIA updated CMS.

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.³

In addition, there is misalignment between S08-01-02 and BIA practices regarding the start of the 90-day period. Per the directive, the 90-day investigative timeframe begins at the initiation of the log number investigation. However, BIA operationalizes the start date as the date an accountability sergeant is assigned to a case (and restarts the 90-day timeframe if the case is reassigned).

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

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations, please see Appendix III, Recommendation 3.

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.

³ These concerns were echoed in Matrix Consulting Group's *Report on the Workforce Allocation Study*, dated 27 March 2026.

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 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, for cases that extend beyond their allotted timeframes, CMS auto-generates and auto-sends emails to complainants and the accused (or their representatives) at the completion of the timeframe and every 60 days thereafter, if an email address was provided at some point during the investigation (see Finding 4 for information these 60-day notifications). This process became operational in CMS in 2022. If BIA does not have an 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 assess the accuracy of the notices being sent by CMS, the Audit Division reviewed log numbers that were opened in 2023, 2024, and 2025. The Audit Division also reviewed log numbers that did not receive a notice by email in CMS for proof that a first notice was delivered to a complainant.⁴

Analysis of log numbers with extension notice email

There were 661 log numbers initiated in 2023, 2024, or 2025 that did not meet the 90/180-day deadline. Of these:

- 401 (60.7%) had all first notices sent within 5 days of the expiration of the 90/180-day timeframe.
- 213 (32.2%) did not have all notices sent within 5 days of the expiration of the 90/180-day timeframe.
- 47 (7.1%) had no notices emailed.

90-day notices for accountability sergeants

Per BIA, the 60-day notices that are required to be sent after a case has reached 180 days (see 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 F. Therefore, accountability sergeants are required to send an additional notice between the first extension notice and when the case reaches 180 days. There were 294 log numbers initiated in 2023, 2024, or 2025 that were assigned to accountability sergeants and did not have an investigative finding date before 180 days from the CPD Assignment date. Of these:

- 34 (11.6%) had all second notices emailed within 90 days of the first notice.
- 245 (83.3%) did not have all second notices emailed within 90 days of the first notice.

⁴ The Audit Division did not assess whether the accused member's district or unit commander received notifications due to data limitations and time constraints.

- 1 (0.3%) had no additional notices but had a first notice sent 22 days after the investigative finding date.
- 11 (3.7%) had no additional notices emailed after the first notice.⁵
- 3 (1.0%) did not have any notice emailed.

Sample of cases without an extension notice email

In addition to reviewing CMS data, the Audit Division sampled 10 log numbers to determine if reporting parties who did not provide email addresses received a first notice within 5 days of the timeframe. Of these 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

Involved parties with 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 and accused members may be unaware of investigation statuses, which can affect the understanding of Department practices by the public and Department members.

Recommendation

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations please see Appendix II, Recommendation 1 and Appendix III Recommendation 4.

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, 2024, and 2025. The Audit Division also reviewed log numbers that did not receive an emailed notice through CMS for proof that 60-day notices were delivered.

Analysis of log numbers with email addresses

⁵ This ranged from 103 days to 165 days.

Per BIA, CMS auto-generates extension notifications and emails the notifications to complainants every 60 days if the complainant provided an email address. These 60-day notices are sent after 180 days of the CPD assignment date, regardless of whether the investigation is conducted by an investigator or accountability sergeant.

There were 624 log numbers initiated in 2023, 2024, or 2025 that did not have an investigative finding date until more than 180 days after the CPD assignment date. Of these:

- 34 (5.4%) had all notices sent within 60 days from the 180-day timeframe and each subsequent notice.
- 67 (10.7%) had no additional notices emailed after 180 days from the CPD assignment date; however, the investigative finding date occurred 60 days or less from 180 days from the CPD assignment date, and therefore a notice would not have been necessary.
- 8 (1.3%) had all notices sent 61 days from the 180-day timeframe and each subsequent notice.
- 2 (0.3%) had all notices sent 62 days from the 180-day timeframe and each subsequent notice.
- 136 (21.8%) had at least one notice sent 63 days or more from the 180-day timeframe and each subsequent notice.
- 377 (60.4%) had no additional notices emailed after 180 days from the CPD assignment date and had an investigative finding date more than 60 days after 180 days from the CPD assignment date. However, the Audit Division notes that this issue relates substantially to older cases—233 were initiated in 2023, 133 were initiated in 2024, and 11 were initiated in 2025.

Sample of cases without an extension notice email

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

Involved parties with 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. The Audit Division notes that cases initiated in 2025 had a significantly lower number of instances where no additional email was sent. BIA has worked to implement multiple recommendations and changes to both the CMS system and training, which may have addressed a reason why cases were not receiving any emails previously. The Audit Division will continue to assess this in future audits to validate if the controls have addressed these gaps.

Implications

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

Recommendation

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations, please see Appendix II, Recommendation 1 and Appendix III Recommendation 5.

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.

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/>

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. Therefore, 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 1,415 log numbers the Audit Division reviewed:

- 201 (14.2%) had an ASR published decision within 60 days⁶
- 166 (11.7%) had an ASR published but not within 60 days of the final disciplinary decision.
- 1,020 (72.1%) 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.
- 5 (0.4%) had a penalty resulting in separation. According to BIA these cases did not require a chief review date, thus preventing the Audit Division from determining if those ASRs were published in accordance with this standard.
- 23 (1.6%) did not have an ASR publishing date. Of those 23, 22 were log numbers that were opened between 2017 and 2019 while one was opened in 2022.⁷

Analysis of log numbers with reporting party subject email addresses

⁶ One of these had an ASR publish date before the Chief Review Date.

⁷ Per BIA, cases that were opened prior to 1 February 2019 do not require an ASR, even if such cases are closed in 2025. There are two 2019 cases that did not have an ASR publishing date, one was opened before 1 February 2019 and one was opened on 2 February 2019.

Of the 1,415 log numbers the Audit Division reviewed, 211 of them had notes in CMS indicating a reporting party subject was emailed an ASR. Of those 211:

- 134 (63.5%) received an ASR within 60 days of the final disciplinary decision.
- 77 (36.5%) did not receive an ASR within 60 days of the final disciplinary decision.

CMS data indicates 695 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 ASR email

The Audit Division took a separate random sample of 10 log numbers from the 645 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:

- 1 case file contained clear evidence that the ASR was printed and mailed to the reporting party through USPS; however, the ASR was sent 111 days after the chief review date.
- 6 cases files related to Department-initiated complaints and contained evidence indicating that BIA sent an ASR via CMS, pro-forma; 4 were within the appropriate timeframe and 2 were beyond the timeframe.
- 3 case files did not contain evidence that the Department attempted to send an ASR. 2 of these cases were opened prior to the requirement that ASRs be sent to the reporting party subject and one was opened after the ASR requirement.

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. 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 2025.⁸

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.

⁸ 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 2025 (20 cases 1.4%). As such, the Audit Division is not issuing a recommendation related to this point.

Recommendation

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations please see Appendix III, Recommendations 8 and 9.

FINDING 6

Standards

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 2025 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*.

The Audit Division identified 62 members whose circumstances required a third level of CCR.⁹ Among those 62 members:

- 31 (50.0%) received a third level of review.
- 31 (50.0%) did not receive a third level of review.¹⁰

Among the 31 that did not receive the third level review:

- 12 (38.7%) required a third level because the recommended penalty was 16+ days.
- 11 (35.5%) required a third level because the accused were exempt members.
- 8 (25.8%) required a third level because they had sustained EEO investigations.

Reasons Current Practices do not Meet Standards

⁹ As part of this analysis, the Audit Division removed cases that received CCR bypass or mediation.

¹⁰ Among the 31 that did not have a third level review, 16 did not have any level of CCR completed.

BIA's procedures for identifying cases requiring a third level of review are not properly identifying all cases.

Implications

In the absence of consistent CCR use, the Department risks issuing discipline that is not consistently applied in a fair and thorough fashion.

Recommendation 1

BIA should improve its procedures for identifying cases that require a third level of Command Channel Review.

Additionally, see Appendix III Recommendation 10.

Auditee Response

See Appendix IV.

FINDING 7

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.

Current Practices

Of the 1,415 log numbers in its population, there were 2,394 accused members. Of these 2,394 members, 2,079 went through either: (1) a first and second level review; or (2) a first, second, and a third level review. Among those 2,079:

- 1,775 (85.4%) had their CCRs fully completed within 30 to 45-day timeframe as required,
- 304 (14.6%) did not have their CCRs fully completed within the 30 to 45-day timeframe as required.

Among the 304 that did not meet the 30-to-45-day timeframe:

- 271 (89.1%) had first level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days.
- 12 (3.9%) had second level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days.

- 7 (2.3%) had third level reviews that exceeded 15 days, but the other relevant reviews were completed within 15 days.
- 7 (2.3%) had first and second level reviews that exceeded 15 days or more.
- 5 (1.6%) had a first and third level review that exceeded 15 days or more.
- 1 (0.3%) had a second and third level of review that exceeded 15 days or more.
- 1 (0.3%) had a second level review completed prior to the first level review.

There were 283 first level reviews that exceeded 15 days. Among those 283:

- 33 (11.7%) were completed within 16 days.
- 23 (8.1%) were completed within 17 days.
- 227 (80.2% %) were completed after 17 days.

There were 20 second level reviews that exceeded 15 days. Among those 20:

- 2 (10.0%) were completed within 16 days.
- 3 (15.0%) was completed within 17 days.
- 15 (75.0%) were completed over 17 days.

There were 13 third level reviews that exceeded 15 days. All 13 reviews were completed after 17 days.

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. In addition, BIA indicated that cases opened prior to the CMS system may have a CCR delay because the original assigned supervisor to complete the review may no longer be in that position.

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

The Audit Division is not issuing a new recommendation for this finding. For updates on the status of previous recommendations, please see Appendix I, Recommendations 6 and Appendix III Recommendation 11.

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 1 January 2025, and

31 December 2025. All data analyzed in this audit relate to investigations conducted and closed by BIA investigators and accountability sergeants.

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 2026 and April 2026.

THE AUDIT DIVISION

The mission of the Audit Division is to conduct quality, independent, and objective assessments that inform improvements throughout the Chicago Police Department.

The Audit Division recognizes the standards and guidance contained in the Institute of Internal Auditor's *Global Internal Audit Standards*. 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.

APPENDIX I: IMPLEMENTATION STATUS OF PREVIOUSLY ISSUED RECOMMENDATIONS - AUDIT OF 2022 INVESTIGATION TIMEFRAME REQUIREMENTS (23-003)

This appendix summarizes the implementation status of the 8 recommendations the Audit Division issued in its *Audit of 2022 Investigation Timeframe Requirements*, as finalized on 28 November 2023.

Of the 8 recommendations:

- 1 (12.5%) is In-Progress - Planning;
- 1 (12.5%) has been Closed - Not Implemented, which denotes that the Department declined to take action on the recommendation;
- 1 (12.5%) has been Closed, which denotes that the Audit Division determined that an issued recommendation is no longer applicable or otherwise warranted;
- 2 (25.0%) have been Closed - Partially Implemented, which denotes that the Department implemented part of a recommendation and is no longer working toward implementing the remaining elements; and
- 3 (37.5%) have been Implemented.

IN-PROGRESS – PLANNING

The recommendation summarized in this section is in the planning stage of implementation.

Recommendation 6

Medium
<p>Recommendation: BIA should identify the shortcoming in the automated CCR process and make the necessary corrections.</p>
<p>Overview of progress to date: Follow-up audits continue to reveal cases that do not meet the 15 and 30-day requirements for completing CCR. BIA notified the Audit Division that CMS automatically updates the system or case overnight. However, CCR cases that reach the 15-day threshold do not update immediately. Instead, the system automatically updates the next night, causing some cases to appear over the 15-day limit.</p> <p>Additionally, the CMS was updated to immediately assign Command staff involved in CCRs, preventing delays in the CCR process.</p> <p>BIA is ongoing in collaboration with its CMS vendor to assess the feasibility of real-time CCR case updates. If the concern persists, Audit can evaluate during its review whether Column’s updates sufficiently address the recommendation. Should the issue recur, Audit will revisit with Column. The Audit Division will review the effectiveness of past solutions related to the CCR process in the upcoming 553 audit.</p>
<p>Roadblocks: Time-related delays impact advancement. Progress has taken additional time as efforts have focused on ensuring the system functions properly to support accurate data and</p>

clear reporting. These items are close to resolution, with the vendor updating the CMS to automate key activities and BIA implementing a corrected CCR automated process.
Responsible Units: Bureau of Internal Affairs (BIA)

CLOSED - NOT IMPLEMENTED

This section lists a recommendation that the Department declined to implement.

No.	Priority	Rec Text	Rationale
Rec. 4A	High	The Department should revise Special Order S08-01-03, "Communication Procedures and Timelines" and/or S08-01-08, "Post Investigation Log Number Procedures" Section IV. to require the upload of USPS tracking status reports to CMS for ASRs delivered by mail.	BIA informed the Audit Division that sending communications such as ASRs and extension notifications via priority or certified mail is cost-prohibitive.

CLOSED

This section lists a closed recommendation that the Audit Division has determined is no longer applicable or warranted.

No.	Priority	Rec Text	Rationale
Rec. 5	High	For cases that do not require review by the Chief of BIA or their designee, the Department should work with the IMT to identify a date to be used in lieu of final disciplinary decision date as the start of the 60-day ASR publication/delivery window (e.g. investigative findings date, case closed date, etc.).	BIA informed the Audit Division that they will simply comply with the 60-day ASR publication/delivery window.

CLOSED - PARTIALLY IMPLEMENTED

This section is reserved for recommendations that the Department has implemented in part and is no longer working toward implementing the remaining elements.

No.	Priority	Rec Text	Rationale
Rec. 1A	High	The Department should undertake a systematic analysis to assess the investigative process, beginning to	The Audit Division received a copy of a BIA needs assessment, along with additional documentation listing

		end, to identify and resolve inefficiencies that delay completion of investigations. This analysis (or another concurrent analysis) should assess BIA staffing to ensure the Bureau is sufficiently staffed to meet Consent Decree deadlines.	staffing shortfalls among BIA Investigators and accountability sergeants. BIA leadership holds that staffing shortages, more so than process inefficiencies, are the main issue. As such, BIA does not plan to conduct additional analyses of the investigative process.
Rec. 2A	High	The Department should undertake a systematic analysis to assess the investigative process, beginning to end, to identify and resolve inefficiencies that delay completion of investigations. This analysis (or another concurrent analysis) should assess accountability sergeant staffing to ensure that district-level investigations have sufficient staff to meet Consent Decree deadlines.	The Audit Division received a copy of a BIA needs assessment, along with additional documentation listing staffing shortfalls among BIA Investigators and accountability sergeants. BIA leadership holds that staffing shortages, more so than process inefficiencies, are the main issue. As such, BIA does not plan to conduct additional analyses of the investigative process.

IMPLEMENTED

This section lists the recommendations the Department has implemented.

No.	Priority	Rec Text
Rec. 1B	High	The Department should require approval of requests for extensions by the Chief of BIA or their designee as stipulated by Consent Decree paragraph 471 and modify relevant directives as needed. Alternatively, the Department should confirm with the IMT that BIA's current approach fulfills requirements of paragraph 471.
Rec. 2B	High	The Department should require approval of requests for extensions by each district's respective District Commander as required by Consent Decree paragraph 472. Alternatively, the Department should confirm with the IMT that the current approach fulfills the requirements of paragraph 472.
Rec. 4B	High	The Department should weigh the advantages and disadvantages of requesting the IMT's agreement to revise the Consent Decree and relevant directives to require delivery and publication of ASRs within 60 days of the date cases are officially closed, after completion of the grievance process, if applicable.

APPENDIX II: IMPLEMENTATION STATUS OF PREVIOUSLY ISSUED RECOMMENDATIONS - AUDIT OF 2023 INVESTIGATION TIMEFRAME REQUIREMENTS (24-007)

This appendix summarizes the implementation status of the 2 recommendations the Audit Division issued in its *Audit of 2023 Investigation Timeframe Requirements (24-007)*, as finalized on 18 December 2024.

Of the 2 recommendations:

- 1 (50.0%) is In-Progress - Planning; and
- 1 (50.0%) has been Closed - Partially Implemented, which denotes that the Department implemented part of a recommendation and is no longer working toward implementing the remaining elements.

IN-PROGRESS - PLANNING

The recommendation summarized in this section is in the planning stages of implementation.

Recommendation 1

Low
<p>Recommendation: BIA, working with its CMS vendor, should identify and address the reason some extension notifications were not generated automatically in CMS.</p>
<p>Overview of progress to date: BIA indicated that the CMS solution is active and functioning; however, key components are still being verified by the vendor. While multiple controls have been implemented, confirmation is still pending on whether extension approvals automatically generate notifications to reporting parties. As such, completion has not yet been fully validated, and the Audit Division will continue to monitor progress and assess functionality upon confirmation.</p> <p>BIA reported progress and system updates:</p> <ul style="list-style-type: none"> • CMS controls implemented to address prior notification failures • Case lock applied 30 days prior to deadlines until extensions are processed • Required fields established (e.g., complainant email, extension reasons) • Notifications dependent on completion of required fields • Ongoing training to reinforce compliance <p>Validation in progress:</p> <ul style="list-style-type: none"> • Whether extension approvals automatically trigger notifications • System functionality and consistency through Audit validation
<p>Roadblocks: Time-related delays impact advancement. Progress has required additional time to ensure the technology is functioning properly to support accurate data and clear reporting. While BIA is nearing completion, the process is still under review to confirm that all components are operating as intended.</p>

Responsible Units: Bureau of Internal Affairs (BIA)

CLOSED - PARTIALLY IMPLEMENTED

The Department has implemented the recommendation below in part and is no longer working toward implementing the remaining elements.

No.	Priority	Rec Text	Rationale
Rec 2	High	BIA should develop a process for documenting the dates on which extension notifications are sent by mail to reporting parties.	BIA opted not to develop a new process; however, the Bureau formalized the existing process (i.e., that investigators and accountability sergeants document the date extension notifications are delivered) by including it in training.

APPENDIX III: IMPLEMENTATION STATUS OF PREVIOUSLY ISSUED RECOMMENDATIONS - AUDIT OF 2024 INVESTIGATION TIMEFRAME REQUIREMENTS (25-002)

This appendix summarizes the implementation status of the 12 recommendations the Audit Division issued in its *Audit of 2024 Investigation Timeframe Requirements (25-002)*, as finalized on 19 May 2025.

Of the 12 recommendations:

- 7 (58.3%) are In Progress - Planning;
- 2 (16.7%) is In-Progress - Execution; which denotes that the Department has taken implementation steps beyond planning and that work is ongoing; and
- 3 (25.0%) have been Implemented.

IN-PROGRESS - PLANNING

The recommendations summarized in this section are in the planning stages of implementation.

Recommendation 1

High
<p>Recommendation: 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.</p>
<p>Overview of progress to date: BIA and the Research & Development Division (R&D) have begun reviewing and updating relevant directives associated with Rec. 1 and Rec. 3, including revisions to language for clarity and consistency related to investigative timelines. Updated drafts of directives S08-01-02 and S08-01-03 were previously shared with highlighted changes for review. Discussions have included how updates will be finalized and documented through formal approval communication. A broader review of the BIA policy suite is in progress, with coordination between BIA and R&D to ensure consistency across directives, as updates are completed collectively as part of the full suite. Given the scope and interconnected nature of the policy review process, progress is expected to take additional time. As of the most recent update, the Audit Division has not received finalized revised policies, and the overall timeline for completion remains to be clarified. Audit will continue to monitor progress and follow up as policy updates are developed and communicated.</p>
<p>Roadblocks: Progress has taken additional time due to the scope and interdependency of the full policy suite review, which requires coordination across multiple directives and formal review processes. While updates are underway, finalized revisions have not yet been provided, and the overall timeline remains to be clarified. Continued follow-up is needed to obtain updates and confirm progression toward completion.</p>
<p>Responsible Units: BIA, R&D</p>

Recommendation 2

This report consists of materials prepared or compiled with respect to an internal audit and is exempt from production under the Freedom of Information Act, 5 ILCS 140/7(1)(m).

High
<p>Recommendation: The Department should ensure that BIA is fully staffed.</p>
<p>Overview of progress to date: BIA provided updates on staffing efforts, including onboarding investigator supervisors and ongoing hiring for civilian investigator positions. BIA is working to fill approximately 25 civilian investigator positions to support this effort, BIA plans to repost positions and continue recruitment to meet staffing targets. While progress has been made, staffing levels remain below target, and hiring timelines continue to depend on the pace of the City’s hiring process. The Audit Division will continue to monitor staffing levels through monthly reporting and ongoing meeting check-ins.</p>
<p>Roadblocks: Progress has taken additional time due to the pace of the City’s hiring process, including steps such as candidate selection, approvals, and onboarding. Staffing efforts have also been affected by candidate availability. As a result, some vacancies remain, and full staffing levels are still in progress.</p>
<p>Responsible Units: BIA</p>

Recommendation 3

High
<p>Recommendation: 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.</p>
<p>Overview of progress to date: BIA and the Research & Development Division (R&D) have begun reviewing and updating relevant directives associated with Rec. 1 and Rec. 3, including revisions to language for clarity and consistency related to investigative timelines. Updated drafts of directives S08-01-02 and S08-01-03 were previously shared with highlighted changes for review. Discussions have included how updates will be finalized and documented through formal approval communication. A broader review of the BIA policy suite is in progress, with coordination between BIA and R&D to ensure consistency across directives, as updates are completed collectively as part of the full suite. Given the scope and interconnected nature of the policy review process, progress is expected to take additional time. As of the most recent update, the Audit Division has not received finalized revised policies, and the overall timeline for completion remains to be clarified. Audit will continue to monitor progress and follow up as policy updates are developed and communicated.</p>
<p>Roadblocks: Progress has taken additional time due to the scope and interdependency of the full policy suite review, which requires coordination across multiple directives and formal review processes. While updates are underway, finalized revisions have not yet been provided, and the overall timeline remains to be clarified. Continued follow-up is needed to obtain updates and confirm progression toward completion.</p>
<p>Responsible Units: BIA, R&D</p>

Recommendation 8

High
<p>Recommendation: The Department should establish an ASR publication timeframe requirement that accounts for all legal considerations.</p>

Overview of progress to date: BIA met with the Department’s General Counsel to discuss legal requirements and CMS requirements. BIA plans to address this issue by updating policy to reflect their compliance with legal and labor relations guidance.
Roadblocks: Progress has taken additional time due to the scope and interdependency of the full policy suite review, which requires coordination across multiple directives and formal review processes. While updates are underway, finalized revisions have not yet been provided, and the overall timeline remains to be clarified. Continued follow-up is needed to obtain updates and confirm progression toward completion
Responsible Units: BIA

Recommendation 9

Medium
Recommendation: BIA should establish and document in policy the Final Disciplinary Decision date for all case types.
Overview of progress to date: BIA met with the Department’s General Counsel to discuss legal requirements and CMS requirements. BIA plans to address this issue by updating policy to reflect their compliance with legal and labor relations guidance.
Roadblocks: Progress has taken additional time due to the scope and interdependency of the full policy suite review, which requires coordination across multiple directives and formal review processes. While updates are underway, finalized revisions have not yet been provided, and the overall timeline remains to be clarified. Continued follow-up is needed to obtain updates and confirm progression toward completion
Responsible Units: BIA

Recommendation 10

Medium
Recommendation: The Department should update S08-01-07 to allow for extensions of the CCR due date.
Overview of progress to date: BIA met with the Department’s General Counsel to discuss legal requirements and CMS requirements. BIA plans to address this issue by updating policy to reflect their compliance with legal and labor relations guidance.
Roadblocks: Progress has taken additional time due to the scope and interdependency of the full policy suite review, which requires coordination across multiple directives and formal review processes. While updates are underway, finalized revisions have not yet been provided, and the overall timeline remains to be clarified. Continued follow-up is needed to obtain updates and confirm progression toward completion
Responsible Units: BIA

Recommendation 11

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

Overview of progress to date: While the Audit Division previously considered this recommendation to be in the “In-Progress – Execution” phase through discussions with leadership in BIA that indicated an update had been made in CMS. This audit’s assessment of third level reviews found that only 50% received the proper third level review and therefore this recommendation has been moved back to the planning phase to allow for additional discussion on root causes for the non-compliance.
Roadblocks: N/A
Responsible Units: BIA

IN-PROGRESS - EXECUTION

The recommendation summarized in this section is in the execution stage of implementation, signifying that all (or most) planning has been completed and tangible changes are being made. Work on this recommendation is ongoing.

Recommendation 4

Medium
Recommendation: 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.
Overview of progress to date: Leadership in BIA indicated this update has been made and is fully functional in CMS. Once the Audit Division confirms this update is operational, this recommendation will be considered implemented.
Roadblocks: N/A
Responsible Units: BIA

Recommendation 6

Medium
Recommendation: 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.
Overview of progress to date: Leadership in BIA indicated this update has been made and is fully functional in CMS. Once the Audit Division confirms this update is operational, this recommendation will be considered implemented.
Roadblocks: N/A
Responsible Units: BIA

IMPLEMENTED

This section lists recommendations that the Department has implemented.

This report consists of materials prepared or compiled with respect to an internal audit and is exempt from production under the Freedom of Information Act, 5 ILCS 140/7(1)(m).

No.	Priority	Rec Text
Rec. 5	Medium	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.
Rec. 7	Medium	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.
Rec. 12	Low	BIA should amend CPD-44.248 to include a “cultural bias” category.

APPENDIX IV: BIA RESPONSE TO RECOMMENDATION 1

BUREAU OF INTERNAL AFFAIRS

28 MAY 2026

TO: Matthew Spears, Ph.D.
Assistant Director
Audit Division

FROM: Timothy Moore
Chief
Bureau of Internal Affairs

SUBJECT: DRAFT - AUDIT OF BIA TIMEFRAMES

REF: AUDIT DIVISION REPORT 26-003

In response to Audit Division Draft Report 26-003 (dated 13 May 2026), please refer to the response below submitted on behalf of the Bureau of Internal Affairs.

Finding 6 - Recommendation 1 (p. 11)

BIA should improve its procedures for identifying cases that require a third level of Command Channel Review.

Auditee Response

The Bureau of Internal Affairs (BIA) does not dispute the importance of the Command Channel Review (CCR) process, which is used to ensure that discipline is applied consistently, fairly, and thoroughly.

While the Audit Division determined that 31 members did not receive a third-level review during the CCR process for Log Number investigations closed in 2025, BIA would like to note that, in October 2025, the Case Management System (CMS) functionality described below was completed.

CCR Third-Level Review Enforcement

If the Penalty has a suspension greater than 15 Days, enforce the BIA Advocate Section to provide a Third-Level Review.

Given that this enforcement was created in October 2025 and the Log Number investigations reviewed for this audit were closed during 2025, it is possible that the CCR Third-Level Review enforcement had not yet taken effect for the investigations examined.


Timothy Moore
Chief
Bureau of Internal Affairs

TLM/cc
Attachment

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