

MARICOPA COUNTY SHERIFF'S OFFICE

Bureau of Internal Oversight

Audits and Inspections Unit



Incident Report Inspection – November 2022

Inspection Report# BI2022-0158

Background:

The Audits and Inspections Unit (AIU) of the Bureau of Internal Oversight (BIO) will conduct inspections of In-custody and Criminal Citation Incident Reports (IR's) on a monthly basis to determine if the IR's are in compliance with Office policy. For November 2022 the Court Monitors selected 40 Incident Reports obtained from all patrol district(s)/division(s).

A random sample of 20 In-custody and 20 Criminal Citation IRs was provided to MCSO by the Monitor Team, totaling 40 for inspection. In addition to the sample of 40 reports, there were 0 immigration investigation IRs, 0 lack of identity investigations IRs, and 0 County Attorney Turndowns where the prosecutor indicated they declined prosecution due to a lack of probable cause.

The purpose of the IR inspection is to determine compliance with Office policies, Federal and State laws and to promote proper supervision. To achieve this, inspectors will review all IR's. The IR's will be uniformly inspected employing a matrix developed by the Bureau of Internal Oversight. The following procedures will be used in the matrix, which includes, but are not limited to, EA-11, CP-2, CP-8, GF-5, GE-3, GJ-35, EB-1:

Matrix Procedures:

- Verify the report was submitted prior to the end of the deputy's shift
- Verify the supervisor reviewed report within policy timelines
- Look for indicia contained in the report and/or forms that the report is not authentic or correct
- Ensure there was a proper investigation of any/all allegations concerning a crime
- Determine if there was a physical arrest/booking
- Determine if there was a citation in lieu of detention/booking (cite and release)
- Verify any applicable charges were submitted in a timely manner, not to exceed the statute of limitations
- Evaluate whether there was reasonable suspicion/probable cause for any noted searches
- Ensure the reason for any search conducted was properly documented
- Determine if the report contained all the required element(s) of the crime for each charge listed
- Ensure the report contains articulation of the legal basis for the action
- Verify the report properly articulates reasonable suspicion/probable cause
- Determine if there was reasonable suspicion/probable cause for any investigative detentions to include traffic stops and field contacts
- Determine if boilerplate and/or conclusory language was used
- Verify the information contained in the report is consistent/accurate throughout
- Look for indicia of bias-based and/or racial profiling
- Determine if the use or non-use of body-worn cameras was documented in the report
- Ensure that any/all property and/or evidence was processed and documented within MCSO policy guidelines
- Ensure all identity theft or lack of identity document reports note supervisor notification
- Ensure all immigration investigation reports document supervisor notification
- Ensure all lack of identification detention/arrest reports documented supervisor notification
 - Determine if the report was memorialized (IMF) by a supervisor in accordance with policy
 - Determine if documentation was discovered for an IMF indicating there was a command-level review of the supervisor's action within 14 days

- Verify suspects were provided with a Miranda Warning when required
- Evaluate whether there are any perceived violations of Constitutional Rights/Civil Liberties
- Evaluate whether there are any other perceived violations of Office Policy
- Determine if there was a need to review or correct Office policy, strategy, tactics, or training
- Each incident report inspected will be counted as one inspection

Criteria:

MCSO Policy EA-11 – Arrest Procedures:

MCSO Policy CP-2 – Code of Conduct:

MCSO Policy CP-8 – Preventing Racial and other Biased-Based Profiling:

MCSO Policy GF-5 - Incident Report Guidelines:

MCSO Policy GE-3 - Property Management and Evidence Control:

MCSO Policy GJ-35 - Body-Worn Cameras:

MCSO Policy EB-1 – Traffic Enforcement, Violator Contacts, and Citation Issuance

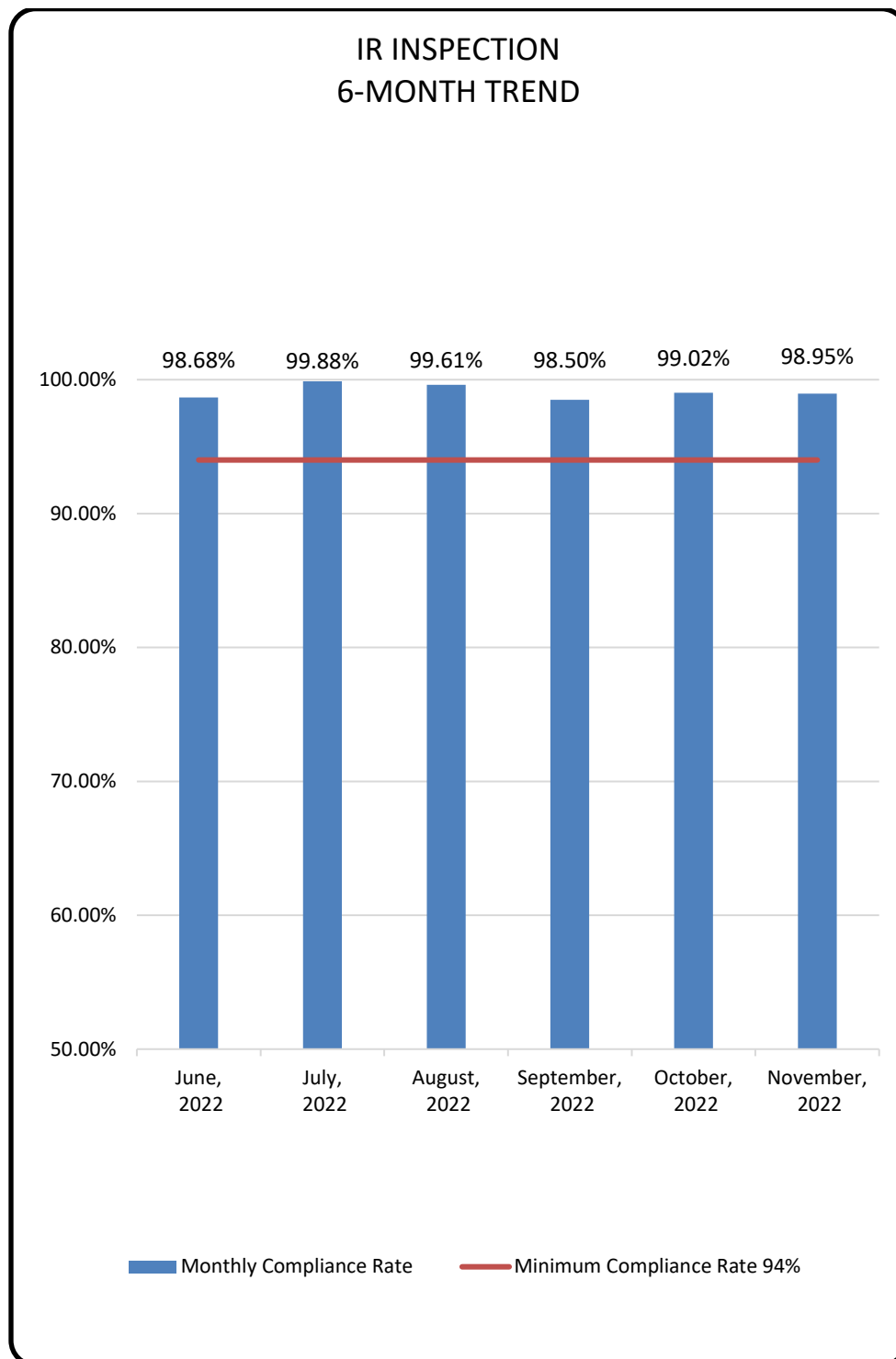
Conditions:

Of the **40** total selected reports that were inspected, the following has been concluded:

- **23** out of the **27** criteria inspected achieved 100% compliance.
- **34** of the **40** reports inspected were in compliance with the inspected criteria.
- **6** of the **40** reports accounted for all of the noted deficiencies.
- **36** of the **39** reports (or 92.31%) were submitted prior to the end of shift.
- **37** of the **39** reports (or 94.87%) were reviewed by a supervisor within policy timelines.
- **39** of the **39** reports (or 100 %) detailed a proper investigation of any/all allegations concerning a crime.
- **39** of the **39** reports (or 100%) contained articulation of reasonable suspicion/probable cause for noted searches.
- **39** of the **39** reports (or 100%) properly documented the reason for a search being conducted.
- **39** of the **39** reports (or 100%) contained all of the elements of the crime for each charge listed.
- **39** of the **39** reports (or 100%) inspected contained the articulation of the legal basis for the action.
- **39** of the **39** reports (or 100%) contained articulation for reasonable suspicion/probable cause. [including Form 4]
- **39** of the **39** reports (or 100%) didn't contain boilerplate and/or conclusory language.
- **39** of the **39** reports (or 100%) contained articulation of reasonable suspicion/probable cause for investigative detentions.
- **39** of the **39** reports (or 100%) contained consistent/accurate information throughout.
- **39** of the **39** reports (or 100%) had any or all property and/or evidence processed and documented within MCSO policy guidelines.
- **38** of the **39** reports (or 97.44%) either did not require an IR memorialization or had one completed by a supervisor.
- **39** of the **39** reports (or 100%) documented that Suspects were provided a Miranda Warning when required.
- **39** of the **39** reports (or 100%) had no other violations of office policy.

The compliance rates of the sample reports utilizing the 27-inspection criterion resulted in an overall average compliance rate of **98.95%** for November of 2022, as illustrated in the graph below.

Overall Compliance Rate for Monthly Incident Report Inspections



The following deficiencies were observed during the inspection period:

District 1 (3 BIO Action Forms):

District/Division	Responsible Supervisor	Date of Event	IR#	Current Supervisor	Current Commander
District 1	Sergeant	Redacted	Redacted	Lieutenant	Captain
Deficiency					
1. Report not reviewed within policy timeframe (72 hours). Policy GF-5.4.A.3 Inspector Notes: <ul style="list-style-type: none"> Report submitted on 11/6 to above listed supervisor in TraCS. Reviewed by above listed supervisor on 11/13. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. Supervisor has one (1) prior BAF in the past 12 months for the same deficiency: <ul style="list-style-type: none"> BAF2022-0125 					

District/Division	Deputy	Date of Event	IR#	Current Supervisor	Current Commander
District 1	Deputy	Redacted	Redacted	Sergeant	Captain
Deficiencies					
1. Report not submitted prior to end of shift. Policy GF-5.4.A.1 2. Citation appears to have been issued for an IAH/OOP violation. Policy EA-8.4.A.1.b 3. No signature on criminal citation Policy EA-11.8.B.2.a 4. Unable to locate supplement for contacting and citing the suspect. Policy GF-5.1.C/F Inspector Notes: <ul style="list-style-type: none"> Report generated on 11/9 at 1500 hours, submitted on 11/10 at 1435 hours. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. 					

District/Division	Deputy	Date of Event	IR#	Current Supervisor	Current Commander
District 1	Deputy	Redacted	Redacted	Sergeant	Captain
Deficiency					
1. Report not submitted prior to end of shift. Policy GF-5.4.A.1					
Inspector Notes:					
<ul style="list-style-type: none"> Report generated on 11/2 at 1614 hours, submitted on 11/4 at 0318 hours. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. 					

District 2 (1 BIO Action Form):

District/Division	Deputy	Date of Event	IR#	Current Supervisor	Current Commander
District 2	Deputy	Redacted	Redacted	Sergeant	Captain
Deficiency					
1. Report not submitted prior to end of shift. Policy GF-5.4.A.1					
Inspector Notes:					
<ul style="list-style-type: none"> Report generated on 11/13 at 0302 hours, submitted on 11/14 at 0103 hours. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. 					

District 4 (1 BIO Action Form):

District/Division	Responsible Supervisor	Date of Event	IR#	Current Supervisor	Current Commander
District 4	Sergeant	Redacted	Redacted	Lieutenant	Captain
Deficiency					
1. Report not reviewed within policy timeframe (72 hours). Policy GF-5.4.A.3					
Inspector Notes:					
<ul style="list-style-type: none"> Report submitted on 11/30 at 1922 hours to above listed supervisor in TraCS. Reviewed by above listed supervisor on 12/4. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. 					

Lake Patrol (2 BIO Action Forms):

District/Division	Responsible Supervisor	Date of Event	IR#	Current Supervisor	Current Commander
Lakes*	Sergeant	Redacted	Redacted	Lieutenant	Captain
Deficiency					
1. Sergeant approved the report with the above noted deficiencies. Policy GF-5.6.C Inspector Notes: <ul style="list-style-type: none"> Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. <p style="text-align: center;">*Above listed supervisor was assigned to D1 at the time of the deficiency*</p>					

District/Division	Deputy	Date of Event	IR#	Current Supervisor	Current Commander
Lakes	Deputy	Redacted	Redacted	Sergeant	Captain
Deficiency					
1. Report not submitted prior to end of shift. Policy GF-5.4.A.1 Inspector Notes: <ul style="list-style-type: none"> Report generated on 11/9 at 0933 hours, submitted on 11/10 at 1404 hours. Inspector did not locate documentation showing this potential deficiency was previously identified and addressed, such as the completion of an Incident Report Memorialization or other applicable intervention. 					

Unless noted above in a deficiency table, there were no prior BIO Action Forms similar in nature during the past twelve (12) months or supervisor notes for the perceived deputy deficiencies.

A total of 7 BIO Action Forms are required from the affected divisions. **The forms shall be completed utilizing Blue Team.** It is permissible to complete one BIO Action Form for a supervisor covering multiple potential deficiencies identified in this inspection.

Date Inspection Started: 12/21/2022
Date Completed: 12/29/2022
Timeframe Inspected: 11/1/2022 - 11/30/2022
Assigned Inspector(s): Sgt. Rob Levy S1881

I have reviewed this inspection report.

Lt. Brian Arthur

1/24/2023

Lt. T. Brian Arthur S1806
Commander – Audits and Inspections Unit
Bureau of Internal Oversight

Date