

OFFICE OF THE CHIEF OF POLICE

ADMINISTRATIVE ORDER NO. 6

March 3, 2025

SUBJECT: **STANDARDS BASED ASSESSMENT, FORM 01.87.00 – REVISED; STANDARDS BASED ASSESSMENT PROJECT COMPLETION CHECKLIST, FORM 01.87.01 – REVISED; AND STANDARDS BASED ASSESSMENT – LIEUTENANT AND BELOW – GUIDELINES FOR COMPLETING THE REPORT, FORM 01.87.02 – REVISED**

BACKGROUND: Since its inception, the Standards Based Assessment (SBA), Form 01.87.00, has served as an equitable measure of employee performance. However, the Department has identified the need to update the SBA to more accurately align with the evolving expectations of the City, the community, and the Department. In keeping with our Core Value of Quality Through Continuous Improvement, the Department has revised Form 01.87.00 to improve the effectiveness of the SBA. These improvements are intended to align employee actions with Department goals and objectives, promote career development and performance feedback, and support employee wellness. The Standards Based Assessment Project Completion Checklist, Form 01.87.01; and the Standards Based Assessment – Lieutenant and Below – Guidelines for Completing the Report, Form 01.87.02; have also been revised to reflect the changes made to the SBA.

PURPOSE: The purpose of this Order is to revise the *Standards Based Assessment*, Form 01.87.00, *Standards Based Assessment Project Completion Checklist*, Form 01.87.01, and *Standards Based Assessment – Lieutenant and Below – Guidelines for Completing the Report*, Form 01.87.02.

PROCEDURE

- I. **STANDARDS BASED ASSESSMENT, FORM 01.87.00 – REVISED.** *Standards Based Assessment*, Form 01.87.00, has been revised. It has been attached for reference.
- II. **STANDARDS BASED ASSESSMENT PROJECT COMPLETION CHECKLIST, FORM 01.87.01 – REVISED.** *Standards Based Assessment Project Completion Checklist*, Form 01.87.01, has been revised. It has been attached for reference.
- III. **STANDARDS BASED ASSESSMENT – LIEUTENANT AND BELOW – GUIDELINES FOR COMPLETING THE REPORT, FORM 01.87.02 – REVISED.** *Standards Based Assessment – Lieutenant and Below – Guidelines for Completing the Report*, Form 01.87.02, has been revised. It has been attached for reference.

FORM AVAILABILITY: The Standards Based Assessment, Form 01.87.00; Standards Based Assessment Project Completion Checklist, Form 01.87.01; and the Standards Based Assessment – Lieutenant and Below – Guidelines for Completing the Report, Form 01.87.02; are attached for immediate use and duplication. In addition, these forms are available in E-Forms on

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the Department's Local Area Network. All other versions of these forms shall be marked "obsolete" and placed in the divisional recycling bin.

AUDIT RESPONSIBILITY: The Commanding Officer, Audit Division, shall review this directive and determine whether an audit or inspection shall be conducted in accordance with Department Manual Section 0/080.30



JIM McDONNELL
Chief of Police

Attachments

DISTRIBUTION "D"

**STANDARDS BASED ASSESSMENT
PROJECT COMPLETION CHECKLIST**

EMPLOYEE NAME: _____ RANK: _____ Serial No.: _____

ANNIVERSARY DATE: _____ PERAI No.: _____

- ☐ Check the employee's Divisional Personnel Package for commendations, citizen commendations, and Notices to Correct Deficiencies (NTCDs), that were completed or received during the SBA period. Check the employee's Divisional Comment Card file for only those Employee Comment Sheets (Form 01.77.00) completed during the SBA period.
- ☐ Review employee's history during the assessment period for the following: Intradepartmental Correspondence (Form 15.02.00) documenting a downgrade, deselection, or command-initiated administrative transfer; and Complaint Adjudication Forms (CAFs) for sustained complaints.
- ☐ Print and review the following TEAMS II RMIS Reports:
- ☐ TEAMS (A00). Use the "Performance Review: Reference for Performance Evaluation" purpose.
 - ☐ Summary of Employee Activity (A02).
 - ☐ Comparison of Employee Average Activity for Selected Organizations (E06).
- ☐ Meet with the employee: _____ Date of Meeting: _____
- Review performance documentation presented by the employee (if applicable).
 - Discuss divisional goals and objectives.
 - Discuss employee's performance during the assessment period, goals for next year, and career goals.
- ☐ Meet with other supervisors who directly supervised the employee during the SBA period.
- ☐ Review the SBA "Guidelines for Completing the Report" (Form 01.87.02).
- ☐ Complete the SBA form and TEAMS II Performance Evaluation Report Action Item.

List the number of items employee received during the SBA period, whether or not they are attached to the SBA:

<input type="text"/> Commendations (Department & Citizen)	<input type="text"/> Comment Cards	<input type="text"/> 15.02.00s, CAFs, Etc.	<input type="text"/> NTCDs
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Date Submitted to
WC/OIC/CO: _____

Project Completed By: _____

Print Name	Serial No.	Signature
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Project Reviewed By: _____

Print Name	Serial No.	Signature
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THIS FORM SHALL REMAIN IN THE DIVISIONAL PROJECT FILE. Do NOT ATTACH TO THE SBA.

DO NOT PLACE IN EMPLOYEE'S DIVISIONAL PERSONNEL FILE

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STANDARDS BASED ASSESSMENT
Lieutenant and Below

GUIDELINES FOR COMPLETING THE REPORT

The following has been developed to assist supervisors when completing a Standards Based Assessment (SBA), Form 01.87.00, for employees in the ranks of lieutenant and below. There are two parts to the SBA form, plus supplemental assessments for supervisors and field training officers. These guidelines provide information on how to prepare to write SBAs and how to complete each section of the form.

Preparing to Write an Assessment

The SBA is designed to be an accurate, unbiased reflection of employee performance based on employee actions and behavior. To accomplish this, supervisors need to observe and document employee performance/behavior when it happens. The proper performance reports for documenting these observations are the:

Employee Comment Sheet, Form 01.77.00;
Commendation Report, Form 01.18.00;
Minor Commendation Report, Form 01.27.00, and;
Notice to Correct Deficiencies (NTCD), Form General 78.

Supervisors should consider writing at least one performance document (Commendation Report or Employee Comment Sheet, as appropriate) per deployment period for each employee in their unit or den. Employee Comment Sheets should reflect observations of performance and/or behavior that exceeds standards or needs improvement. Exceptional performance should be documented on a Commendation Report. Supervisors should complete NTCDs as appropriate.

Employee Comment Sheets addressing substandard performance or behavior should describe the facts of the incident, detail what the standard of performance/behavior is and why the standard matters, and explain how the employee can achieve the standard. An Employee Comment Sheet **shall not** state that future substandard performance will result in further discipline. That type of warning is reserved for NTCDs.

Once a year, supervisors shall meet with each employee in their den/unit, while completing the employee's SBA, to discuss: divisional/Departmental goals and the employee's role in accomplishing them, the employee's career goals and motivating factors, and the employee's performance. Aside from this annual meeting, supervisors are encouraged to meet regularly with their employees. No documentation of these meetings is required; however, supervisors may choose to generate Supervisory Action Items to memorialize these meetings.

Completing the Form

Administrative Section:

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RMIS Action Item No.: Enter the corresponding TEAMS II Risk Management Information System Performance Evaluation Report Action Item number.

Type of Evaluation: Mark the appropriate box for the type of SBA being completed. A Probationary SBA is completed when a Police Officer I finishes Phase III of the probationary period, and during every month of a Lieutenant's probationary period. A Regular SBA is completed once a year for each employee. A Transfer SBA is completed when an employee transfers to a new command. A Special SBA is completed any time an employee's performance or standard of service indicates the need for a revised assessment. For more information of types of SBAs, please see Department Manual section 3/760.20- Standards Based Assessment – Lieutenant and Below, and the Field Training Manual, Part III- Documentation.

Anniversary Date of Current Rank: Enter the date the employee was appointed to their current rank, regardless of paygrade. For example, the anniversary date of a Police Officer II, III, or III+1 is the employee's date of hire. The anniversary date of a Sergeant I or Sergeant II is the employee's date of promotion to sergeant. If an employee has been demoted, the anniversary date reverts to the employee's original date of appointment to the lower rank.

Name, Serial No., Rank, and Period Covered: Self-explanatory.

Assignment: Enter the employee's assigned bureau; Area, or division; and unit, if applicable.

Job Description: Briefly describe the specific duties of the assignment. Examples:

Assignment: Hollywood Area – Patrol	Job Description: The patrol officer conducts preliminary investigations, traffic enforcement, and community policing; and responds to calls for service.
Assignment: Newton Area – Vice Investigator	Job Description: The Vice Investigator conducts investigations into vice-related crimes and quality of life issues.

Part I – Specific Performance:

Part I is divided into eight Specific Performance categories:

A. Skills Required to Perform Current Assignment

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GUIDELINES FOR COMPLETING THE REPORT

- B. Initiative and Productivity
- C. Communication
- D. Personal Interactions
- E. Integrity
- F. Acceptance of Responsibility
- G. Risk Management – General
- H. Community Engagement

Each Specific Performance category is defined and described on the form. Beneath each category description are two assessment level columns: Meets or Exceeds Standards, and Needs Improvement. At the top of each column are assessment level headers, and beneath each header are checkboxes with descriptions of actions and behaviors related to skills, duties, and tasks in the Specific Performance category. These checkboxes and descriptions correspond to the assessment level columns in which they appear.

The supervisor completing the assessment will check the boxes that best describe the employee's performance in each particular category. The supervisor has the discretion to assess the employee's performance/skills in each category, and determine the Overall Rating (see Part II- Overall Rating, below) for the employee. However, the employee's commanding officer has the final say in the assessment and Overall Rating.

Documentation (e.g., Commendation Reports, Employee Comment Sheets, citizen letters, etc.) is recommended and encouraged to be attached for boxes checked in the Meets or Exceeds Standards column. **However, documentation in the form of Employee Comment Sheets, NTCs, Complaint Adjudication Forms (01.28.05), etc., shall be attached to the SBA for all boxes checked in the Needs Improvement column.** The attached documentation should describe an objective account of specific events and/or incidents. The documents must describe acts or omissions by the employee that support the Needs Improvement assessment.

If a particular document is not being used to support a Needs Improvement assessment or an Unsatisfactory Overall Rating, the assessing supervisor has the discretion to attach or not attach the document. However, the employee's commanding officer has the final say in whether or not the document will be attached to the SBA.

In each Specific Performance category, boxes may be checked at different assessment levels, as long as they are not for the same skill set. In other words, only the box corresponding to one assessment level (Meets or Exceeds Standards or Needs Improvement) may be checked when the action/behavior descriptions relate to the same skill, duty, or task.

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For example, an employee may meet or exceed standards for one skill set, but need improvement for all of the other skill sets in that Specific Performance category, or vice versa.

An evaluation could look something like the below example:

Example

A. SKILLS REQUIRED TO PERFORM CURRENT ASSIGNMENT: Consider skills, competencies, and knowledge of policies and procedures demonstrated during job performance.	
MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT
<input checked="" type="checkbox"/> Demonstrated skills and knowledge which meet or exceed the standards of competence in the areas deemed important by divisional management.	<input type="checkbox"/> Lacked skill or knowledge in some important performance areas.
<input checked="" type="checkbox"/> Acquired skills or knowledge readily and applied them properly.	<input type="checkbox"/> Did not acquire skills or knowledge to improve identified deficiencies.
	<input checked="" type="checkbox"/> Produced work requiring supervisory remediation or corrections.

Mandatory

Specific Performance category H addresses community engagement. If the employee was not directly involved in community engagement during the rating period, in the text box under the category, the assessing supervisor shall explain how the employee's assignment supported the Department's Core Value of Service to Our Communities.

For example, "Officer Dowd teaches law as part of the Department's Regular Basic Course. He educates recruit officers on their role in the legal system, and on the civil rights of community members, thereby supporting the Department's Core Value of Service to Our Communities." **Completion of this box is mandatory on SBAs for all employees not directly involved in community engagement.**

Not Applicable for A. Through H.

Indicate items that are not applicable by striking through the appropriate text: Use a black or blue pen to draw a line through the skills, duties, and tasks description, in the Meets or Exceeds Standards column, for the item that is not applicable for this employee. Do not line out any skills, duties, and tasks description in the Needs Improvement column.

Note: Do not line out the skills, duties, and tasks description, in the Meets or Exceeds Standards column, if the corresponding skills, duties, and tasks description in the Needs Improvement column is checked.

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In the box located below the Not Applicable heading, identify the Specific Performance category containing the lined-out text and explain why the item is not applicable. All not applicable items must be explained.

For Example:

E. The employee was not the subject of a Department-generated integrity audit during this rating period.

Part II – Overall Rating:

Check **Satisfactory** or **Unsatisfactory**: Self-explanatory.

Signatures:

Signature lines for the assessor, reviewing supervisor, commanding officer (CO), and employee shall be completed. The comment boxes below the assessor, reviewing supervisor, and CO signature lines contain directions for completion. Completion of these boxes is optional. Comments should only be added to any of these boxes if the comments relate to employee performance that exceeds standards or needs improvement. If the employee's performance exceeds standards, no performance documentation is required. If the comments relate to employee performance that needs improvement, the comments must be supported by attached performance documentation that was completed during the assessment period. For example, "Officer DeJesus excels in his role as a Youth Services Officer. His ability to build rapport with young community members has contributed greatly to the success of the division's youth programs." Or, "During this assessment period, Officer Milius received a sustained adjudication for a complaint alleging discourtesy and the use of profanity. The CAF is attached to this SBA."

Contributing Supervisors:

Self-explanatory.

Supervisor and Field Training Officer Supplemental Assessments

These sections are to be completed in the same manner as Part I of the SBA.

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☐ PROBATIONARY ☐ REGULAR ☐ TRANSFER ☐ SPECIAL

ANNIVERSARY DATE OF CURRENT RANK:

RMIS ACTION ITEM NO.

PERIOD COVERED
(MONTHS)

FROM:

TO:

NAME (LAST, FIRST M.I.):

SERIAL NO.:

RANK:

ASSIGNMENT:

JOB DESCRIPTION: (A specific description of the duties of the assignment. DO NOT comment on employee performance.)

Instructions:

Check ***all*** boxes that apply. Attach documentation [e.g., Employee Comment Sheet, Notice To Correct Deficiencies (NTCD), Complaint Adjudication Form (CAF), Form 15.02.00 that initiated a downgrade or deselection, etc.] that justifies all Needs Improvement boxes checked below. Documents may also be attached for any Meets or Exceeds Standards box checked below.

Note: It is appropriate to check multiple boxes in each column for each category.

PART I - SPECIFIC PERFORMANCE

A. SKILLS REQUIRED TO PERFORM CURRENT ASSIGNMENT: Consider skills, competencies, and knowledge of policies and procedures demonstrated during job performance.

MEETS OR EXCEEDS STANDARDS

- ☐ Demonstrated skills and knowledge which met or exceeded the standards of competence in the areas deemed important by divisional management.
- ☐ Acquired skills or knowledge readily and applied them properly.

NEEDS IMPROVEMENT *(Attach Required Documentation)*

- ☐ Lacked skill or knowledge in some important performance areas.
- ☐ Did not acquire skills or knowledge to improve identified deficiencies.
- ☐ Produced work requiring supervisory remediation or corrections.

B. INITIATIVE AND PRODUCTIVITY: Consider level of self-motivation in accomplishing daily tasks and special assignments. How productive was the employee in accomplishing tasks related to the goals and objectives of the unit, division, and/or Department?

MEETS OR EXCEEDS STANDARDS

- ☐ Produced work deemed important by employee's supervisor or commanding officer in a quantity which met or exceeded explicit supervisory or command expectations.
- ☐ Exhibited initiative to resolve problems or accomplish tasks deemed important by employee's supervisor and community.
- ☐ Work quality met or exceeded levels required for effective operations.
- ☐ Effectively managed priorities and workload.

NEEDS IMPROVEMENT *(Attach Required Documentation)*

- ☐ Produced unacceptably low quantity of work product in functions deemed important by employee's supervisor or commanding officer.
- ☐ Exhibited little or no initiative to problem solve or take on tasks deemed important by employee's supervisor and community.
- ☐ Required supervisory prompting and reminding, more than others in the same or a similar work unit, before getting work completed.
- ☐ Did not effectively manage priorities and workload.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

C. COMMUNICATION: How well has the employee communicated in verbal and written form? How well did the employee listen and apply information gained from others? When communicating, did the employee attempt to build trust by allowing others a voice and demonstrating respect and neutrality? How did others respond to the employee's oral, written, and non-verbal communication skills?

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Quality of written work met or exceeded requirements for effective operations.	<input type="checkbox"/> Written work often required editing to correct content errors or omissions.
<input type="checkbox"/> Written work was submitted on time.	<input type="checkbox"/> Written work often required editing to correct confusing or vague language.
<input type="checkbox"/> Communicated at appropriate times and with appropriate tact and demeanor.	<input type="checkbox"/> Written work was often submitted late.
<input type="checkbox"/> Communicated in ways that demonstrated respect and neutrality and promoted cooperation or understanding.	<input type="checkbox"/> Frequently responded to individuals' statements as though the individuals' perspectives were not understood.
<input type="checkbox"/> Demonstrated the ability to communicate with individuals from varied cultures and communities in a way that promoted respect and mutual cooperation.	<input type="checkbox"/> Communicated in ways that unnecessarily provoked complaints, anger, or confusion in others.

D. PERSONAL INTERACTIONS: How did the employee interact with community members and employees? Did the employee show regard for Department rules?

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Showed regard for Department policies by complying with rules and regulations.	<input type="checkbox"/> Was unnecessarily confrontational or discourteous with community members, co-workers, or supervisors.
<input type="checkbox"/> Exhibited a pleasing or congenial demeanor with co-workers and community members.	<input type="checkbox"/> Inappropriately expressed hostility toward the Department or its policies in the workplace.
<input type="checkbox"/> Encouraged peers, subordinates, or trainees to be productive.	<input type="checkbox"/> Responded to clear supervisory directions with resistance, delay, or indignation.
<input type="checkbox"/> Cooperated with co-workers and others.	<input type="checkbox"/> Resisted cooperation with co-workers and others.
<input type="checkbox"/> Demonstrated emotional intelligence (self-awareness, self-control, empathy, willingness to hear others' viewpoints, etc.).	<input type="checkbox"/> Made inappropriate comments, or exhibited behavior that is negative, unwarranted, and/or unprofessional, toward co-workers, supervisors, or community members.
<input type="checkbox"/> Demonstrated conduct consistent with Equal Employment Opportunity (EEO) mandates and the City Workplace Equity Policy.	

E. INTEGRITY: Did the employee's actions reflect the Department's commitment to integrity and reverence for the law? Did the employee display respect for community members' civil rights during all contacts?

MEETS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Exhibited concern and regard for community members' civil rights. Appropriately applied laws and policies regarding use of force, detention, arrest, and search and seizure.	<input type="checkbox"/> Exhibited an indifference to, or disregard for, civil rights.
<input type="checkbox"/> Took steps to implement procedural justice tenets (Trustworthiness, Respect, Neutrality, and Voice) consistent with the employee's duties and responsibilities.	<input type="checkbox"/> Exhibited indifference to, or disregard for, the tenets of procedural justice (Trustworthiness, Respect, Neutrality, and Voice).
<input type="checkbox"/> Passed a Department-generated integrity audit.	<input type="checkbox"/> Failed a Department-generated integrity audit.
<input type="checkbox"/> Demonstrated integrity.	<input type="checkbox"/> Demonstrated a lack of integrity.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

F. ACCEPTANCE OF RESPONSIBILITY: Consider examples of responsible, dependable, or trustworthy behavior exhibited by the employee. When the employee was entrusted with tasks or responsibilities, what was the outcome?

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Typically accepted personal responsibility for their own actions.	<input type="checkbox"/> Often, or in some particularly important situation(s), denied personal responsibility for their own actions.
<input type="checkbox"/> Generally assumed command or led others when employee was responsible for assuming leadership.	<input type="checkbox"/> Often, or in some particularly important situation(s), failed to assume command or lead others when employee was responsible for assuming leadership.
<input type="checkbox"/> Typically completed required assignments, tasks, and other clear job requirements.	<input type="checkbox"/> Often, or in some particularly important situation(s), failed to initiate or complete required assignments or tasks or meet some other clear job requirement.
<input type="checkbox"/> Was always, or nearly always, present at work, or at particular calls or events, when the employee knew they needed to be present, and was able to be present.	<input type="checkbox"/> Often, or in some particularly important situation(s), failed to be present at work, or at particular calls or events, when the employee knew they needed to be present, and was able to be present.

G. RISK MANAGEMENT - GENERAL: Did the employee demonstrate appropriate risk management practices in their assignment?

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Typically demonstrated safe driving practices.	<input type="checkbox"/> Often, or in some particularly important situation(s), did not demonstrate safe driving practices.
<input type="checkbox"/> Understood and complied with the Department's vehicle pursuit policy.	<input type="checkbox"/> Often, or in some particularly important situation(s), did not understand and/or comply with the Department's vehicle pursuit policy.
<input type="checkbox"/> Understood and complied with the Department's Use of Force policy.	<input type="checkbox"/> Often, or in some particularly important situation(s), did not understand or comply with the Department's use of force policy.
<input type="checkbox"/> Consistently demonstrated officer safety.	<input type="checkbox"/> Often, or in some particularly important situation(s), did not demonstrate officer safety.
<input type="checkbox"/> Typically demonstrated workplace safety practices and/or injury prevention.	<input type="checkbox"/> Often, or in some particularly important situation(s), did not demonstrate workplace safety practices and/or injury prevention.
<input type="checkbox"/> Understood, and/or complied with, Department policy regarding discrimination, harassment, bystander harassment, sexual harassment, retaliation, inequitable conduct, hazing, abusive conduct, and bullying in the workplace.	<input type="checkbox"/> Did not understand, and/or comply with, Department policy regarding discrimination, harassment, bystander harassment, sexual harassment, retaliation, inequitable conduct, hazing, abusive conduct, and bullying in the workplace.
<input type="checkbox"/> Engaged in respectful workplace conduct.	<input type="checkbox"/> Engaged in disrespectful workplace conduct.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

H. Community Engagement: Consider tasks that can be performed in support of the Department's Core Value of Service to Our Communities. How did the employee integrate these tasks into their daily duties?	
MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Received positive feedback (verbal or written) from community members for helpfulness, assistance, compassion, etc.	<input type="checkbox"/> Exhibited little or no initiative to identify or resolve quality of life concerns.
<input type="checkbox"/> Consistently identified and utilized available City and County resources, and/or public-private partnerships, to resolve quality of life concerns. Worked collaboratively with Department or divisional entities to address quality of life issues.	<input type="checkbox"/> Exhibited resistance to implementing community safety strategies.
<input type="checkbox"/> Demonstrated an ability to implement Department or divisional community safety strategies at a level appropriate for their assignment and tenure.	<input type="checkbox"/> Required more prompting or reminding than other employees in the same, or similar, work unit, to provide victims and community members with required, or otherwise relevant, information regarding appropriate resources and services.
<input type="checkbox"/> Provided victims and community members with required, or otherwise relevant, information regarding appropriate resources and services.	

Mandatory for all employees in assignments with limited contact with the public (administrative assignments, Academy Instructor, etc.). Please explain how their assignment supports the Department's Core Value of Service To Our Communities. (For further guidance, see Standards Based Assessment Guidelines for Completing the Report, Form No. 01.87.02).

NOT APPLICABLE for A. through H.

Indicate items not applicable by striking through ~~(example)~~ the text of the checkbox(es). Explain the reason why the item is not applicable in the space below. **All** not applicable items must be explained.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

PART II - OVERALL RATING

☐ **SATISFACTORY**

Satisfactorily handled assignments. Performance was generally equal to, or superior to, the expected requirements of the job.

☐ **UNSATISFACTORY**

Did not satisfactorily meet one or more job requirements.

SIGNATURES

Department/Unit Assessor's Name & Serial No.
Print Name

Department/Unit Assessor's Signature

Date

OPTIONAL - Comments should only be added to this box if the comments relate to employee performance that exceeds standards or needs improvement. If the employee's performance exceeds standards, no performance documentation is required. If the employee's performance needs improvement, the comments must be supported by attached performance documentation that was completed during the assessment period.

Reviewing Supervisor's Name & Serial No.
Print Name

Reviewing Supervisor's Signature

Date

OPTIONAL - Comments should only be added to this box if the comments relate to employee performance that exceeds standards or needs improvement. If the employee's performance exceeds standards, no performance documentation is required. If the employee's performance needs improvement, the comments must be supported by attached performance documentation that was completed during the assessment period.

Commanding Officer's Name & Serial No.
Print Name

Commanding Officer's Signature

Date

OPTIONAL - Comments should only be added to this box if the comments relate to employee performance that exceeds standards or needs improvement. If the employee's performance exceeds standards, no performance documentation is required. If the employee's performance needs improvement, the comments must be supported by attached performance documentation that was completed during the assessment period.

CONTRIBUTING SUPERVISORS (if applicable)

If more than one supervisor contributed to this assessment, list the name(s) and serial number(s) of the contributing supervisor(s) below:

PRINT NAME

SERIAL NO.

PRINT NAME

SERIAL NO.

Employee: I certify that this report has been discussed with me. I understand that my signature does not indicate agreement.

Employee's Signature

Date

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

Supervisor

The below-listed categories shall be completed to assess the performance of an employee who is a supervisor.

A. DEVELOPMENT AND TRAINING OF SUBORDINATES: Is this supervisor consistently developing their subordinates thoughtfully and effectively?	
MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Recognized when a subordinate needed training and ensured the employee received proper training.	<input type="checkbox"/> Did not ensure that subordinates received proper training when the need for training was clear.
<input type="checkbox"/> Regularly corrected at-risk behavior of subordinates.	<input type="checkbox"/> Failed to address at-risk behavior of subordinates.
<input type="checkbox"/> Regularly engaged with subordinates to mentor, developed, and encourage effective performance. Regularly monitors employee performance and completed performance documentation when appropriate.	<input type="checkbox"/> Seldom or never engaged with subordinates to mentor, develop, and encourage effective performance. Failed to appropriately monitor and/or document employee performance.
<input type="checkbox"/> Consistently modeled and engaged in expected inclusion behaviors within the workplace.	<input type="checkbox"/> Did not model and engage in expected inclusion behaviors within the workplace.
<input type="checkbox"/> Regularly reviewed various RMIS reports, audits, and/or Action Items using the TEAMS II system.	<input type="checkbox"/> Seldom or never reviewed various RMIS reports, audits, and/or Action Items using the TEAMS II system.

B. RISK MANAGEMENT-GENERAL: Did the supervisor demonstrate appropriate risk management practices in their assignment?	
MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Monitored subordinates' driving practices.	<input type="checkbox"/> Did not monitor subordinates' driving practices.
<input type="checkbox"/> Recognized subordinates' needs for additional use of force or officer safety training.	<input type="checkbox"/> Did not recognize subordinates' needs for additional use of force or officer safety training.
<input type="checkbox"/> Conducted thorough occupational accident/illness investigations.	<input type="checkbox"/> Did not conduct thorough occupational accident/illness investigations.
<input type="checkbox"/> Recognized key patterns and early warning signs to address workplace conflicts.	<input type="checkbox"/> Did not recognize key patterns and early warning signs to address workplace conflicts.
<input type="checkbox"/> Ensured Equal Employment Opportunity (EEO) mandates and the City Workplace Equity Policy were followed.	<input type="checkbox"/> Did not ensure EEO mandates and the City Workplace Equity Policy are followed.
<input type="checkbox"/> Prevented discrimination, harassment, bystander harassment, sexual harassment, retaliation, inequitable conduct, hazing, abusive conduct, and bullying in the workplace.	<input type="checkbox"/> Did not prevent discrimination, harassment, bystander harassment, sexual harassment, retaliation, inequitable conduct, hazing, abusive conduct, and bullying in the workplace.

C. USE OF FORCE AND PERSONNEL COMPLAINT INVESTIGATION SKILLS: Consider the ability to manage, investigate, and complete reports for Use of Force incidents and Personnel Complaints.

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Responded to, and properly managed, Categorical and/or Non-Categorical Use of Force incidents.	<input type="checkbox"/> Failed to respond to, and/or properly manage, Categorical and/or Non-Categorical Use of Force incidents.
<input type="checkbox"/> Conducted timely and complete Use of Force investigations and completed associated documentation that met Department standards.	<input type="checkbox"/> Submitted Use of Force investigations that were late, incomplete, required further investigation or revision, or inaccurately depicted events or statements.
<input type="checkbox"/> Responded appropriately to complaint investigations. Complaint investigation reports were complete and required minimal kickbacks to make reports effective for making final determinations on findings.	<input type="checkbox"/> Failed to respond to, or responded inappropriately to, complaint investigations. Produced complaint investigation reports of poor quality, lacking important interviews, missing important addenda, or substantially mis-paraphrased an interviewee's statements.

D. LEGAL OVERSIGHT OF FIELD OPERATIONS: Ensured that subordinates follow proper procedures, and respect community members' civil rights, in matters of searches, seizures, detentions, arrests, warrants, and related reports.

MEETS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Properly reviewed arrest, booking, and/or charging decisions.	<input type="checkbox"/> Failed to properly review arrest, booking, and/or charging decisions.
<input type="checkbox"/> Properly reviewed Investigative Reports and Arrest Reports for compliance with laws and policies regarding reasonable suspicion, probable cause, and search and seizure.	<input type="checkbox"/> Failed to properly review Investigative Reports and Arrest Reports for compliance with laws and policies regarding reasonable suspicion, probable cause, and search and seizure.
<input type="checkbox"/> Properly reviewed warrants and supporting affidavits.	<input type="checkbox"/> Failed to properly review warrants and supporting affidavits.
<input type="checkbox"/> Properly responded to incidents involving the service of search warrants.	<input type="checkbox"/> Failed to respond to search warrant services when a response is required.
<input type="checkbox"/> Properly evaluated 148 PC arrests for issues regarding training, policy, or tactics.	<input type="checkbox"/> Failed to properly evaluate 148 PC arrests for issues regarding training, policy, or tactics.
<input type="checkbox"/> Utilized and adhered to Department guidelines and procedures regarding the use of confidential informants.	<input type="checkbox"/> Failed to properly utilize and adhere to Department guidelines and procedures regarding the use of confidential informants.
<input type="checkbox"/> Encouraged subordinates to implement procedural justice tenets (Trustworthiness, Respect, Neutrality, and Voice) consistent with the employee's duties and responsibilities.	<input type="checkbox"/> Discouraged subordinates from implementing procedural justice tenets (Trustworthiness, Respect, Neutrality, and Voice) consistent with the employee's duties and responsibilities.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

E. SUPERVISORY ADMINISTRATIVE SKILLS: Consider the supervisor's ability to handle the administrative responsibilities associated with the employee's assignment.

MEETS OR EXCEEDS STANDARDS	NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i>
<input type="checkbox"/> Performance evaluations, including SBAs, generally: were complete; accurately reflecting subordinates' performance; were objective and based on subordinates' actions and behaviors; included appropriate supporting documentation; and were submitted on time. <input type="checkbox"/> Submitted complete reports, administrative investigations, and other administrative work on time. <input type="checkbox"/> Administrative work required no, or few, revisions; was accurate; and fulfilled its intended purpose.	<input type="checkbox"/> Performance evaluations, including SBAs, generally: were incomplete; did not accurately reflect subordinates' performance; were not based on subordinates' actions and behaviors; did not include appropriate supporting documentation; and/or were not submitted on time. <input type="checkbox"/> Submitted reports, administrative investigations, and other administrative work beyond deadlines; and/or submitted incomplete administrative work. <input type="checkbox"/> Administrative work required repeated kickbacks and/or substantial revisions; was inaccurate; and/or failed to fulfill its intended purpose.

NOT APPLICABLE

Indicate items not applicable by striking through ~~(example)~~ the text of the checkbox(es). Explain the reason why the item is not applicable in the space below. **All** not applicable items must be explained.

EMPLOYEE'S NAME: _____

SERIAL NO.: _____

Field Training Officer

The below listed categories shall be completed for all Police Officers III assigned as Field Training Officers (FTO).

A. ANNUAL REFRESHER TRAINING: Identify whether the employee completed FTO Annual Refresher Training.	
<p style="text-align: center;">MEETS OR EXCEEDS STANDARDS</p> <p><input type="checkbox"/> Attended and passed annual refresher training.</p>	<p style="text-align: center;">NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i></p> <p><input type="checkbox"/> Did not attend annual refresher training or failed to complete the training.</p>

B. OBSERVING AND EVALUATING PERFORMANCE: Consider quality of employee's observations, evaluations, training, and feedback as an FTO.	
<p style="text-align: center;">MEETS OR EXCEEDS STANDARDS</p> <p><input type="checkbox"/> Trained all probationary officers according to FTO program standards.</p> <p><input type="checkbox"/> Regularly documented probationary officers' performance according to FTO program standards.</p> <p><input type="checkbox"/> Evaluated probationary officers according to FTO program standards.</p>	<p style="text-align: center;">NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i></p> <p><input type="checkbox"/> Failed to train a probationary officer in compliance with FTO program standards.</p> <p><input type="checkbox"/> Often, or in an important situation, did not document probationary officers' performance according to FTO program standards.</p> <p><input type="checkbox"/> Received a Notice to Correct Deficiencies, sustained adjudication of a personnel complaint, or downgrade, for FTO-related behavior.</p>

C. TRAINING OFFICER ADMINISTRATIVE SKILLS: Evaluate the FTO's ability to document probationers' performance in a clear and timely manner.	
<p style="text-align: center;">MEETS OR EXCEEDS STANDARDS</p> <p><input type="checkbox"/> Documentation described probationers' performance in clear, objective, factual, and unambiguous language.</p> <p><input type="checkbox"/> Documentation of probationers' performance was complete and submitted on time.</p> <p><input type="checkbox"/> Documentation of probationers' deficiencies described the remediation that was provided.</p> <p><input type="checkbox"/> Probationers' checklists contained all required information and were completed on time.</p>	<p style="text-align: center;">NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i></p> <p><input type="checkbox"/> Documentation of probationers' performance was unclear, subjective, incorrect, and/or ambiguous.</p> <p><input type="checkbox"/> Documentation of probationers' performance was incomplete or submitted late.</p> <p><input type="checkbox"/> Documentation of probationers' deficiencies did not describe the remediation that was provided.</p> <p><input type="checkbox"/> Probationers' checklists lacked required information and/or was submitted late.</p>

D. RISK MANAGEMENT - GENERAL: Did the FTO demonstrate appropriate risk management practices in their assignment?	
<p style="text-align: center;">MEETS OR EXCEEDS STANDARDS</p> <p><input type="checkbox"/> Promoted understanding of Department policies and procedures.</p> <p><input type="checkbox"/> Encouraged effective performance, allowing subordinates/probationers to correct their behaviors.</p>	<p style="text-align: center;">NEEDS IMPROVEMENT <i>(Attach Required Documentation)</i></p> <p><input type="checkbox"/> Did not promote understanding of Department policies and procedures.</p> <p><input type="checkbox"/> Did not encourage effective performance, not allowing subordinates/probationers to correct their behaviors.</p> <p><input type="checkbox"/> Acted with inappropriate personal bias towards probationary officers.</p> <p><input type="checkbox"/> Hazed or otherwise treated probationary officers inappropriately.</p>

NOT APPLICABLE

Indicate items not applicable by striking through ~~example~~ the text of the checkbox(es). Explain the reason why the item is not applicable in the space below. **All** not applicable items must be explained.