### Need for Change

1. Ensure the AG and public can comment on, and the Monitor will review, proposed CPD plans and trainings; require CPD to implement plans—not just draft them; ensure the Monitor will review the City’s compliance with the entire decree; empower the Monitor, not CPD, to decide if there is discrimination; and ensure public access to key plans, trainings, and assessments.

### Excerpts Illustrating Redlines Needed to the Text

The following concepts must be included in the consent decree:

- CPD must be required to implement the plans;
- There should be a defined process to revise plans;
- Plans must be subject to public comment;
- The Monitor must pre-approve, without limitations on his or her discretion, the methodologies used to assess discrimination;
- The Monitor’s pre-approval and review process must apply to every section of the decree, including those, like the schools section, that contain additional process steps involving the Monitor or CPD;
- The decree should standardize the method to request review, the workout period, and the public comment process, and all three should apply to developing policies and plans;
- The Monitor’s plans for assessment of compliance must be public;
- The Monitor should not be restricted from providing information about the progress of the reform; thus, while files should not be subject to FOIA, there should not be a broad confidentiality restriction;
- CPD’s required analyses, evaluations, and assessments under this agreement should be made public.

Below are example line-edits to the draft decree to implement these concepts.

Add to the end of paragraph 43:
CPD will make public its evaluation and proposed changes.

72. Prior to conducting this assessment, CPD will share its proposed methodologies, including any proposed factors to be considered as part of the assessment, with the Monitor for the Monitor to choose among or request additional options. The assessment will use the methodology selected by the Monitor, review and approval. The Monitor will
approve CPD’s proposed methodology provided that the Monitor determines that CPD’s methodology comports with published, peer-reviewed methodologies and this Agreement. Upon completion of the assessment, CPD will identify any modifications to CPD’s practices to address the findings in the assessment and develop a timeline for implementation, subject to Monitor review and approval.¹

Identical revisions are required to paragraph 550.

Add to the end of paragraph 604, 617, and 618:
Sections of this Agreement that vary from this process are not excluded from the Monitor review described elsewhere in the Agreement.

Add to the end of paragraph 605:
The process described in this paragraph shall be known as “the process for additional time for review.”

Add to the end of paragraph 607:
The process described in this paragraph shall be known as the “workout period process.”

Add to the end of paragraph 610:
The process in this paragraph shall be known as “the public comment process.”

617. CPD will submit the final draft of each plan required by this Agreement and subject to review and approval by the Monitor and OAG to the Monitor and OAG at least 30 days prior to the proposed date for initial implementation. In the event that the Monitor and OAG fail to comment on a submitted plan within the 30-day period, the Monitor and OAG will be deemed to have no objection to the plan, unless the Monitor, OAG, or both state in writing that additional time is necessary to complete an adequate review. Requests for additional time to review plans will be subject to “the process for additional time for review.”

¹ If this redline is not used, we propose including the following: “Nothing in this paragraph binds the Monitor to look only at this study in assessing compliance with the agreement.”
standard and process set forth above for requesting additional time to review policies and procedures. To the extent the Parties and the Monitor have unresolved disagreements regarding a plan after attempting to resolve them for at least 30 days, the Monitor or OAG may provide an objection notice. The Parties and the Monitor will adhere to the workout period process to resolve objections as necessary. The Monitor or OAG may object if a proposed plan does not incorporate the requirements of this Agreement or is inconsistent with the goals and objectives of this Agreement.

Add after paragraph 617:
After the Monitor and OAG comment on a plan, or the workout period processes described above have been completed, CPD will engage in the public comment process.

CPD will post final plans on CPD’s public website, subject to reasonable exceptions for policies and procedures that are law enforcement sensitive. CPD will implement the final versions of the plans.

CPD, OAG and the Monitor will periodically review each plan required by this Agreement and conduct an initial review of each such policy no later than two years after the plan's implementation as provided for in this Agreement. CPD, OAG and the Monitor will conduct subsequent reviews every two years thereafter, although the Parties may modify the timeframe for the review of a specific plan. The purpose of the initial and subsequent reviews is to evaluate whether the plan is effective at achieving the goals and is consistent with the requirements of this Agreement and current law. This modification process will be subject to the process for additional time for review, the workout period process, and the public comment process.

618. CPD will submit all new or revised curricula, lesson plans, and course materials related to trainings ("training materials") required by this Agreement to the Monitor and OAG for their review, comment, and, subsequently, if necessary, objection. Requests for additional time to review training materials will be subject to the process for additional time for review same standard and process set forth above for requesting additional time to review policies.
The Parties and the Monitor will adhere to the workout period process to resolve objections as necessary. The training materials will be made public.

Add after paragraph 618:

CPD will develop, revise, and implement plans as required by this Agreement consistent with the timelines identified herein.

629. Within 90 days of being appointed by the Court, the Monitor will develop a plan for conducting compliance reviews and audits (“Monitoring Plan”) for the first year of implementation. . . . The Monitoring Plans will be made public.

652. The Monitor is an agent of the Court and not a state or local agency, or an agent thereof. Accordingly, the records maintained by the Monitor will be treated confidentially, and will not be deemed public records subject to public inspection under the Illinois Freedom of Information Act, or subject to discovery in any litigation.

See Newark Consent Decree ¶ 18; Baltimore Consent Decree ¶ 285.

| 2. Require the City to share disciplinary findings about officer misconduct with prosecutors and defense counsel, and require Civilian Office of Police Accountability (COPA) to investigate incidents that lead to a civil or criminal proceeding. | 425. The City will use best efforts to initiate and undertake a process with the CCSAO, United States Attorney’s Office, Cook County Public Defender’s Office, and the Federal Defender’s Office to share information on at least a quarterly basis regarding any affirmative judicial findings made during the course of criminal proceedings that a CPD member was untruthful or engaged in other misconduct, including any findings made at suppression hearings. Likewise, the City will provide those entities with all officer disciplinary findings bearing on credibility or bias, including Rule 14 findings, as soon as practical after the finding has been rendered. Upon receipt of information from the CCSAO, United States Attorney’s Office, Cook County Public Defender’s Office or the Federal Defender’s Office that may suggest misconduct COPA will initiate the intake process.

464. The City will continue to provide the Chief Administrator of COPA the discretion to direct COPA shall to review and investigate the facts of individual civil lawsuits and criminal |
proceedings involving alleged misconduct in order to identify and investigate incidents of misconduct.

*See* DOJ Report on CPD, pp. 65-66, 72, 76-77; Albuquerque Consent Decree ¶ 174.

| 3. Require that officers report all uses of force by fellow officers that they witness, and authorize COPA to investigate complaints of sexual abuse and First Amendment violations. | 200. Whenever a CPD member engages or observes another CPD member engage in a reportable use of force, the member must complete a TRR, or any similar form of documentation CPD may implement . . .

201. . . .The narrative requirement does not apply to CPD members who discharged a firearm in the performance of duty or participated in an officer-involved death in the performance of duty. . . .Any CPD member who observes or is present when another CPD member discharges a firearm or uses other deadly reportable force must complete a written witness statement TRR, or any similar form of documentation CPD may implement, prior to the end of his or her tour of duty. . . .

Baltimore Consent Decree ¶ 173.

421. The City will undertake best efforts to ensure that COPA has jurisdiction to conduct administrative investigations of allegations of officer-involved sexual misconduct and sexual abuse, as defined by this Agreement, as well as allegations of First Amendment violations.

*See* Joint Proposal on Accountability and Oversight ¶ 2. 2

438. Within 72 hours of receiving an allegation, COPA, BIA, or the district shall assign an investigator to assess allegations of misconduct. Within 30 days of receiving an allegation, . . .

Baltimore Consent Decree ¶ 338(e).

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2 References to “Joint Proposals” refer to joint proposals from the *Communities United* and *Campbell* plaintiffs, while “CU Proposals” refer to proposals from the *Communities United* plaintiffs.
4. Ensure 911 operators have alternatives for calls that do not require a police response, and that officers who respond to people in crisis have options other than arrest and hospitalization.

Add after paragraph 77:
The City will revise its policies and procedures to ensure that police officers responding to individuals in crisis have response options other than arrest or hospitalization. The City will develop programs and resources to divert individuals in crisis to the Behavioral Health service system rather than the criminal justice system or a hospital emergency room whenever appropriate.

121. The City will request that the Advisory Committee provide guidance on crisis response-related policies, procedures, and training of City agencies, including CPD and OEMC, and assist the City in developing and expanding current strategies for responding to individuals in crisis, including reducing the need for police-involved responses to individuals in crisis whenever possible and consistent with public safety, and developing municipal and community resources, such as pre- and post-arrest diversion resources and alternative response options.

Add after paragraph 123:
Nothing in this Section should be construed to limit efforts by the City or CPD to increase diversion programs and alternatives to police responses to individuals in crisis.

Add after paragraph 137:
The City will develop resources, referrals, and response options for call takers and dispatchers to utilize with the goal of limiting police involvement in crises where appropriate. Within 180 days of the Effective Date, the City will have a means of diverting calls related to crises that do not necessitate a police response to other crisis services, such as crisis lines, direct service referrals, and/or alternative response teams. OEMC call takers and dispatchers will receive training and written guidance on when and how to utilize alternative response options, including but not limited to referrals.

Baltimore Consent Decree ¶ 114; Joint Proposal on Responding to People with Behavioral Health Disabilities or in Crisis ¶¶ 8, 13.
Add after paragraph 142:
The City will develop a Behavioral Health Unit that utilizes a range of strategies and approaches based on best practices in responding to Behavioral Health and crisis incidents:

- BHU staff and programs will provide non-criminal justice responses to Behavioral Health and crisis incidents. BHU will be staffed by civilians who are not employed by CPD and who have sufficient training and experience to function as first responders for people experiencing Behavioral Health and crisis incidents involving self-harm and/or non-violent behavior;
- The BHU will develop, implement, and regularly update resources and referrals for use by call takers, dispatchers, and CIT responders;
- The BHU will create and maintain alternative response teams, such as Mobile Response and Service Coordination Teams, that include social workers and/or Qualified Mental Health Professionals, based upon the particular needs of the communities in which they function;
- A pre-arrest diversion program that includes a non-police response option(s) to Behavioral Health and/or crisis calls; and
- Other efforts to create more safe, efficient and productive responses to Behavioral Health and crisis incidents.

The City will provide the necessary resources to staff and administer the BHU program consistent with its obligations herein.

<table>
<thead>
<tr>
<th>5. Require the CIT program to assess whether officers are capable of responding to CIT calls and to stop sending officers to those calls when they are not, and to set clear benchmarks for CPD to have enough CIT officers to respond to calls involving individuals in crisis.</th>
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<td>Add after paragraph 84: An annual assessment of all Certified CIT Officers will be conducted by the CIT program to assess the skill, quality, and effectiveness of each CIT officer’s crisis responses in furtherance of the unit’s mission and purposes. The assessment will include feedback from the officer on any successes and barriers to the CIT responses and the officer’s needs to improve performance. The assessment will include feedback from the CIT program regarding the officer’s performance, whether any additional training may be needed, and whether the officer remains appropriate for CIT.</td>
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<tr>
<td>99. Within 180 days of the Effective Date, CPD will develop an implementation plan (“CIT</td>
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Implementation Plan”) based on, at a minimum, its analysis of the demand for crisis intervention services for each watch in each district. The CIT Implementation Plan will identify the number of Certified CIT Officers necessary, absent extraordinary circumstances, to meet the following response ratio targets:

a. By January 1, 2020: a sufficient number of Certified CIT Officers to ensure that Certified CIT Officers are available on every watch in each district to timely respond to at least 50% of the calls for service identified as involving individuals in crisis, absent extraordinary circumstances (“initial response ratio target”); and

b. By January 2022: a sufficient number of Certified CIT Officers to ensure that Certified CIT Officers are available on every watch in each district to timely respond to at least 80% of the calls for service identified as involving individuals in crisis, absent extraordinary circumstances (“second response ratio target”).

c. By January 2023: a sufficient number of Certified CIT Officers to ensure that Certified CIT Officers are available on every watch in each district to timely respond to the calls for service identified as involving individuals in crisis, absent extraordinary circumstances (“final response ratio target”).

100. The CIT Implementation Plan will further identify the steps that are necessary to meet and maintain the ratio targets set forth above initial response ratio target by January 1, 2020, and the second response ratio target by January 1, 2022 and the strategies, methods, and actions CPD will implement to make progress to timely achieve and maintain these response ratio targets.

108. The responsibilities of the CIT Coordinator will include, at a minimum:

... d. overseeing the annual review of Certified CIT Officers to assess the skill, quality, and effectiveness of each CIT officer’s crisis responses, including whether any additional training may be needed and whether the officer remains appropriate for CIT;

e. selecting and removing Certified CIT Officers . . .

Baltimore Consent Decree ¶ 110, 120; Ferguson Consent Decree ¶ 203.
6. Require that OEMC collect data on all calls requiring CIT dispatch for later analysis, regardless of whether an officer is available; CPD officers record when de-escalation and diversion is used in order to assess improvements and reward officers who get it right; and ensure data is aggregated so the collection of medical information will not be disclosed or used against individuals.

Add after paragraph 108:
Revise CPD form 15.520, as necessary, to be consistent with and fulfill its obligations under this Agreement, to ensure its consistent and effective use by CIT officers, and to protect the private and confidential mental health information of any individuals. The revised form should not collect private medical information unless necessary and precautions are taken to protect its confidentiality.

Information relating to an individual’s medical and mental health diagnosis, treatment, and conditions should only be collected if voluntarily provided by the person and where necessary to appropriately respond. Where collected, such information shall be strictly maintained confidentially within the CIT program and will only be used for the purpose of referring the individual to appropriate health and community service organizations. The CIT Program may utilize such information in the aggregate, without any identification of personal health information, for reporting purposes. The CIT Program will develop protocols to ensure the compliance with this provision in the collection, maintenance, and use of this information.

Revise CPD form 15.520, as necessary, to allow for data collection and analysis relating to the CIT mission function to use de-escalation tactics and decrease criminal justice involvement.

109. . . The CIT Report, or similar documentation, at a minimum, will include: . . . c. the subject’s age, gender, and race/ethnicity, and perceived disability or nature of crisis; . . . the behaviors observed during the incident, including indications of crisis and whether the subject used or displayed a weapon; . . k. whether de-escalation techniques were used; l. the outcome of the incident (referred to community services, emergency room; involuntary civil commitment petition; arrested or booked); k.m. whether a reportable use of force . . .

111. CPD will collect, analyze, and report data regarding the number and types of incidents involving individuals in crisis and responses of CPD officers to such events to assess staffing and deployment of Certified CIT Officers and department-wide responses to individuals in crisis. CPD will collect, analyze, and report aggregate data relating to crisis
responses, whether initiated as crisis calls or otherwise, including the number of calls, the nature of the crisis, and the disposition of those calls, including whether CIT techniques were employed; whether there was a referral to community services, an emergency room, or other organization; whether arrested and/or charged; whether force was used; the type of forced used; and the steps taken, if any, to de-escalate interactions. The CIT Program will review the data contained within the submitted CIT Reports, or any similar form of documentation CPD may implement, to evaluate the overall response and effectiveness by CPD officers and identify any district-level and department-wide trends regarding responses to incidents identified as involving individuals in crisis.

Add after subheading K (before paragraph 129):
The City will revise, and periodically update, its dispatch policies and protocols as necessary to meet the requirements of this Agreement, with input from the Advisory and Planning Committee and the Monitor, in order to coordinate dispatch and responses to behavioral health and crisis incidents.

Add after paragraph 130: Whether or not a Certified CIT Officer is available for dispatch, OEMC will code any call identified as potentially involving an individual in crisis in a manner that allows for subsequent data analysis pursuant to Paragraph 98 above.

Cleveland Consent Decree ¶¶ 157-59; Baltimore Consent Decree ¶¶ 121-22.

7. Ensure policies are improved, and ensure adequate annual training of officers on disabilities and individuals in crisis.

67. Consistent with the requirements set forth in the Training section of this Agreement, CPD will incorporate the concept of impartial policing into its annual in-service training for all officers, including supervisors and command staff, by providing training on the following topics: . . .

[add after a.] diversion resources and the least intrusive law enforcement response; . . .

d. cultural competency training that prepares officers to interact effectively with people from diverse communities including, but not limited to, people with disabilities, people of color, LGBTQI individuals, religious minorities, and immigrants. This will include methods and strategies to reduce
misunderstanding, conflict, and complaints, including how to access CPD-authorized telephonic and in-person interpreters; how to work with interpreters in the field; how to communicate with LEP and deaf individuals in commonly encountered scenarios; and basic command of commonly-spoken languages identified above, for officers assigned to districts with significant LEP populations;

e. effectively interacting with people with disabilities, including:

i. disability awareness: recognizing when a person has a physical, intellectual, developmental or mental disability; interacting with people with disabilities, and understanding how disability can impact police encounters. This training will include a broad range of disabilities, such as intellectual, developmental, mental health, and physical disabilities, including epilepsy, seizure disorder, and deafness. including

ii. best practices for police encounters with people with disabilities, including: protocols for providing timely and meaningful access to police services for individuals with disabilities; effective communication and barriers to communication; when and how to make reasonable modifications, including use of force procedures and techniques; response options, including alternatives to use of force and arrest; trauma-informed strategies and responses; de-escalation techniques, including when to consult with a CIT responder and how to address crisis situations when CIT is not available; community resources referrals available to provide services, support or treatment for people with disabilities, including community mental health services, and how officers can and should draw on those resources; and . . .
See CU Proposal on Training Section D.2; New Orleans Consent Decree ¶ 191; Baltimore Consent Decree ¶ 93; Albuquerque Consent Decree ¶ 120. Similar revisions are also required in paragraph 227 regarding annual use of force training.3

90. . . . The CIT Program will seek input from the Advisory Committee, the Monitor, and individuals with lived experience with behavioral health disabilities and the criminal justice system in the development of the refresher training.

94. The CIT Program staff responsible for the CIT training curriculum will, where it would add to the quality or effectiveness of the training and when feasible and appropriate, encourage and seek the participation of individuals with disabilities who have had experience with crisis and the criminal justice system, as well as professionals and . . .

117. Consistent with the requirements set forth in the Training section of this Agreement, all officers will receive in-service training, every within three years and annually thereafter, regarding responding to individuals in crisis that is adequate in quality, quantity, and scope for officers to demonstrate competence in the subject matter. This in-service training will include, but not be limited to, the following topics:

a. a history of the mental health system and the over-representation of people with mental health disabilities in the criminal justice system;

b. how to recognize and respond to common characteristics and behaviors associated with mental illness, Behavioral Health Disabilities, or Intellectual and Developmental Disabilities individuals in crisis, including, but not limited to, identifying types of behavioral health and mental disabilities mental health . . .

3 Specifically: “227. . . . b. proper and required use of force decision-making that utilizes a critical thinking framework in which officers gather relevant facts; assess the situation, threats, and risks, including whether a subject may be noncompliant due to limited English proficiency, a medical condition, disability, age/developmental immaturity, behavioral health crisis, a language barrier, and/or drug or alcohol use; consider CPD policy; identify options and determine the best course of action, including employing de-escalation tactics and techniques where possible; and act, review, and reassess the situation . . . .” See Joint Proposal on Use of Force Principles and Policies ¶ 6(o); Ferguson Consent Decree ¶ 136(b).
conditions, signs and symptoms of mental health conditions, common treatments and medications, and common characteristics, behaviors, or conduct associated with individuals in crisis;

c. how to recognize and respond to conduct or behavior that is related to these disabilities, including by understanding how their disability may impact their perception of the events and interactions;

d. the potential interactions officers may have on a regular basis with individuals in crisis, their families, and service providers, including steps to ensure effective communication and avoid escalating a crisis situation an interaction with a person with disabilities and/or in crisis;

e. the use of effective communication and disability- and trauma-informed techniques to avoid the use of force;

f. techniques to safely de-escalate a potential crisis situation;

g. the circumstances in which a Certified CIT Officer should be dispatched or consulted; and

h. outcome options other than arresting, including local resources that are available to provide treatment, services, or support for individuals in crisis, and when and how to draw upon those resources; and

i. ways in which the resolution of incidents through CIT-driven approaches (such as de-escalation and disability- and trauma-informed practices) to achieve outcomes other than arrest or hospitalization represent best practices in policing and how such practices are valued within the Department, including by the consideration of such practices and outcomes in performance evaluations and in the merit evaluations in the promotion process.

See Baltimore Consent Decree ¶ 107 (requiring 8 hours of annual in-service training); Ferguson Consent Decree ¶ 312.

Add after paragraph 162:
CPD will provide guidance on specific protocols and practices to use when engaging with people with disabilities, which will include the following:

a. CPD will employ disability-informed and trauma-informed de-escalation tactics
including, but not limited to, using a calm, neutral demeanor and avoiding threatening language;

b. During police contacts with people who are known or believed to have disabilities, officers shall provide reasonable accommodations, to the extent necessary and available, in order to facilitate the encounter without the use of force. Such reasonable accommodations may include modification of response techniques to gain compliance to avoid initiating physical contact, including alternative communication methods, and utilizing time and space to avoid the use of force;

c. In considering whether and how to use force, CPD officers will make an individualized assessment of the circumstances, the person involved, and the specific risk posed; and

d. CPD will ensure that officers consider whether a subject may be noncompliant due to a disability.

Joint Proposal on Use of Force Principles and Policies ¶ 10; Baltimore Consent Decree ¶ 131(a), (c).

8. Revisions are needed to incorporate modes of communication deaf and hard of hearing people use into language access reform, ensure CPD has qualified interpreters, and ensure nonverbal communication is attempted before force is used.

59. . . . CPD will ensure that its language access policy provides timely and meaningful access to police services for individuals with limited English proficiency (“LEP”), and incorporates sign language and other modes of communication deaf and hard of hearing people use. CPD will also require that Department-authorized and qualified interpreters are used in accordance with CPD policy, including for the provision of Miranda warnings. CPD will publish its language access policy on its website and, consistent with the requirements of Paragraph 27 of the Community Policing section of this Agreement, make the policy available to community-based groups serving LEP and deaf communities in Chicago.

181. When objectively safe and feasible to do so, CPD officers must give verbal commands and warnings, or attempt to utilize hand signals where there is a potential language barrier or hearing impairment, prior to, during, and after deployment of a Taser. When objectively safe and feasible to do so, CPD officers will allow a subject a reasonable amount of time to comply with a warning prior to using or continuing to use a Taser . . .
See Portland Consent Decree ¶ 68(b); Joint Proposal on Use of Force ¶ 13(g).

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<tr>
<th>9. Require CPD to have a designated employee to ensure CPD's compliance with the Americans with Disabilities Act (ADA).</th>
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| 63. **Before January 1, 2020, Within sixty (60) days of the effective date of this Agreement, CPD will hire at least one employee to coordinate its efforts to comply with and carry out its responsibilities under Title II, Section 504, and this Agreement (“ADA Compliance Officer”).** The duties of the ADA Compliance Officer will include:
| a. CPD will review and, to the extent necessary, revise its CPD’s policies and practices for ensuring that individuals with physical, mental, or developmental disabilities have meaningful access to CPD programs, services, and activities. These policies will include, but not be limited to, specific procedures and responsibilities applicable to circumstances in which CPD officers encounter persons with intellectual or developmental disabilities, autism, dementia, blindness, deafness, hearing loss, and mobility disabilities. The review will include consultation with people with disabilities and organizations with particular expertise in issues affecting people with disabilities.
| b. Audit and analyze the provision of police services for compliance with Title II;
| c. Make reports and recommendations to the Superintendent on how to improve compliance with Title II and/or police services for people with disabilities, including to avoid or decrease use of force incidents involving people with disabilities;
| d. Review the Bureau of Internal Affairs’ and the civilian investigative agency’s investigations of any complaint that alleges or describes misconduct against people with disabilities, or relating to compliance with Title II, Section 504 or the disability components of this Agreement;
| e. Recommend merit awards or commendations for officers who have demonstrated excellence in serving people with disabilities or improved policy relations with the disability community; and
| f. Act as a liaison between CPD and Chicago’s disability community.

The qualifications of the ADA Compliance Officer will include expertise in Title II compliance, experience with a broad range of disabilities, and familiarity with local disability advocacy groups. CPD will make available to all interested members of the public the name, office address, and telephone number of the ADA Compliance Officer.
| 10. Revisions are needed to allow input from outside of CPD in the creation of policies and selection criteria for school-based officers, and to set limits on use of force and arrests in schools. | 35. Before the 2019-2020 school year begins, in consultation with CPS, school personnel, families, students, and community stakeholders, CPD will develop and implement screening criteria to ensure that all officers assigned to work in CPS schools have the qualifications, skills, and abilities necessary to work safely and effectively with students, parents and guardians, and school personnel. . . .

36. Before the 2019-2020 school year begins, in consultation with CPS, school personnel, families, students, and community stakeholders, CPD will develop a policy that clearly defines the role of officers assigned to work in CPS schools. . . . The policy will reflect best practices and will include, but not be limited to:

a. the duties, responsibilities, and appropriate actions of officers assigned to work in CPS schools and school personnel, including: (1) requirement that CPD officers, in all circumstances, de-escalate school incidents wherever objectively safe and feasible, using age-appropriate de-escalation techniques; (2) an express prohibition on the administration of school discipline by CPD officers; (3) a duty not to intervene in incidents on school grounds unless to address a real and immediate threat to a student, teacher or public safety; (4) an express prohibition on arresting students at school or on school grounds absent a showing of probable cause and a real and immediate threat to a student, teacher or public safety, and only after all alternatives have been exhausted and privacy protections have been ensured; (5) a prohibition on using handcuffs or restraints at schools except where necessary to address a real and immediate threat to a student, teacher or public safety; (6) a prohibition on using force in school or on school grounds on anyone who does not present an immediate threat to another person; (7) absent exigent circumstances, a prohibition on conducting interviews or interrogations relating to non-school-related matters; and (8) an express prohibition on collecting information on behalf of CPD and/or any other law enforcement agency; . . . |
| 38. CPD officers assigned to work in CPS schools will receive specialized initial and annual refresher training that is adequate in quality, quantity, scope, and type, and that addresses subjects including, but not limited to, school-based legal topics, cultural competency, problem-solving, adolescent development and psychology, developmentally-appropriate student engagement and de-escalation, use of restorative approaches, accommodations for students with disabilities, the creation of safe spaces for LGBTQIA students, youth development, and crisis intervention. . . .

*For policies, see Ferguson Consent Decree, ¶¶ 212, 215, 218, 222-23, 315; Consent Order involving the DOJ in Barnhardt v. Meridian Municipal Separate School District, ¶¶ 89, 92, 96; Settlement Agreement in United States v. City of Meridian, § III.A.1(a); Illinois Council of School Attorneys, Guidelines for Interviews of Students at School by Law Enforcement Authorities, p. 3 (rev. Jan. 2018).*

| 11. Ensure CPD immediately starts working on creating and implementing a foot pursuit policy that addresses unsafe foot pursuit tactics and sets forth guidelines for foot pursuits that balance the objective of apprehending suspects with the risk of potential injury.

*Delete paragraphs 158-160, 162 and replace with:*

*CPD will ensure that its policies provide guidance on the circumstances that may warrant engaging in a foot pursuit and the tactics officers should use to avoid the use of excessive force during or at the conclusion of a foot pursuit, and to keep members of the public and officers safe.*

*CPD will provide all current officers with use of force training that includes the circumstances that may warrant engaging in a foot pursuit and appropriate tactics to avoid the use of excessive force during or at the conclusion of a foot pursuit, and to keep members of the public and officers safe. The foot pursuit policy adopted by CPD and its implementation will be subject to review and approval by the Monitor and OAG.*

*Baltimore Consent Decree ¶¶ 130, 166(m). See DOJ Report on CPD, p. 26 (“[CPD] does not have a foot pursuit policy. It should.”); see also id. pp. 5, 151.*

| 12. Recognize that unholstering or pointing a firearm is a use of force, and

*Add after paragraph 177:*

*Officers will not unholster and display a firearm unless the circumstances create a reasonable belief that lethal force may become necessary. CPD will prohibit officers from exhibiting*
require that officers report it as such. and/or pointing a firearm unless the officer reasonably believes that the situation may escalate to create an imminent threat of serious bodily injury or death to the officer or another person. Unholstering or pointing a firearm at a person is a reportable use of force under this Agreement.

Ferguson Consent Decree ¶ 183; Cleveland Consent Decree ¶ 55.4

We also support the proposed addition to ¶ 28(d) by First Defense Legal Aid (“that telephones will be available to every arrestee or suspect within an hour of arrest and before any questioning”).

We also support the proposed revisions of the Campbell plaintiffs except for their request to include the Community Police Accountability Ordinance in the consent decree. The Communities United plaintiffs support the positions of the Grassroots Alliance for Police Accountability (GAPA).

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4 See also, Baird v. Renbarger, 576 F.3d 340, 345 (7th Cir. 2009) (“we held that gun pointing when an individual presents no danger is unreasonable and violates the Fourth Amendment”), citing Jacobs v. City of Chicago, 215 F.3d 758, 773–74 (7th Cir. 2000) (pointing a gun at an elderly man’s head for ten minutes even after realizing that he is not the desired suspect and when he presents no resistance is “out of proportion to any danger that Jacobs could possibly have posed to the officers or any other member of the community”); McDonald v. Haskins, 966 F.2d 292, 294–95 (7th Cir. 1992) (pointing a gun at a nine-year-old child during a search and threatening to pull the trigger was “objectively unreasonable”).