

File#:

CITIZEN COMPLAINT PACKET



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4.09.05 COMPLAINT INVESTIGATION

- A.** The Santa Fe Police Department shall accept complaints from any person who believes he or she has been stopped or searched based on racial, ethnic or national origin profiling. No person shall be discouraged, intimidated or coerced from filing a complaint, nor discriminated against because he or she filed such a complaint.

- B.** Any employee who receives an allegation of racial profiling, including the officer who initiated the stop, shall record the person's name, address and telephone number, and forward the complaint through the appropriate channel or direct the individual(s). Any employee contacted shall provide to that person a copy of a complaint form or the department process for filing a complaint. All employees will report any allegation of racial profiling to their superior before the end of their shift.

- C.** Investigation of a complaint shall be conducted in a thorough and timely manner. All complaints will be acknowledged in writing to the initiator who will receive disposition regarding said complaint within a reasonable period of time. The investigation shall be reduced to writing and any reviewer's comments or conclusions shall be filed with the chief. When applicable, findings and/or suggestions for disciplinary action, retraining, or changes in policy shall be filed with the chief.

- D.** If a racial profiling complaint is sustained against an officer, it will result in appropriate corrective and/or disciplinary action, up to and including termination.

- E.** If there is a departmental video or audio recording of the events upon which a complaint of racial profiling is based, upon commencement of an investigation by this department into the complaint and written request of the officer made the subject of the complaint, this department shall promptly provide a copy of the recording to that officer.

CITIZEN COMPLAINT PROCEDURES

The Complaint Process:

The Santa Fe Police Department's complaint process is designed to deal with each case factually and fairly. Citizens who file complaints are treated respectfully and all accusations against police employees are taken seriously. All complaints are investigated thoroughly and all findings are based on impartial evidence gained during the investigation. You may be assured that appropriate procedures are in place to prevent retaliation against anyone who files a legitimate complaint.

Shift supervisors are available at any time, day or night, to discuss or initiate your complaint about any member of the department.

To start the process of your complaint to the Santa Fe Police Department, you must submit a written complaint in person at the police department.

You should be aware that the internal review process deals solely with matters of police department policy and the conduct of departmental employees. If you have current criminal or traffic charges pending against you which are associated with your complaint, those charges must be dealt with through the appropriate court regardless of the outcome of your complaint through the police department.

Thus, in most instances, a disagreement over the validity of a traffic citation or arrest normally should first be directed to the court that has jurisdiction over the dispute instead of this complaint process. The courts have been delegated primary responsibility over such issues and, thus, are often in the best position to resolve this type of dispute in accordance with established legal principles.

The Importance of Your Complaint:

Santa Fe Police employees are expected to demonstrate the highest level of professionalism at all times but the Department realizes that at times conflicts between citizens and police employees occur.

The Department understands that a proper relationship between police employees and citizens is necessary to maintain confidence and trust, which is essential to effective law enforcement.

Police Officers, however, must also be free to exercise appropriate discretion, guided by their best judgment in preserving the rights of all people; and initiate action in a reasonable, lawful, and impartial manner, without fear of reprisal.

This complaint process and appropriate disciplinary procedures, therefore, not only subject police department employees to corrective action when they conduct themselves improperly, but also protects them from unwarranted criticism when they discharge their duties properly.

The Department realizes that there may be a legitimate explanation for some reasonable variations in the perceptions of the same event by different people. Beyond reasonable mistake however, the deliberate reporting of information that you know to be false or misleading could constitute a violation of State Law as the statutes cited below show.

Penal Code:

Section 37.02 Perjury

- (a) A person commits an offense if, with intent to deceive and with knowledge of the statements meaning:
 - (1) he makes a false statement under oath or swears to the truth of a false statement previously made and the statement is required or authorized by law to be made under oath; or,
 - (2) he makes a false unsworn declaration under Chapter 132, Civil Practice and Remedies Code
- (b) An offense under this section is a Class A misdemeanor.

Section 37.02 Aggravated Perjury

- (a) A person commits an offense if he commits perjury as defined in Section 37.02, and the false statement:
 - (1) is made during or in connection with an official proceeding; and
 - (2) is material
- (c) An offense under this section is a felony of the third degree.

Also, the Texas Legislature has enacted specific laws which afford police officers some degree of protection from unsubstantiated complaints. The relevant statutory provisions are listed below for your information.

Government Code

Section 614.022 Complaint to be in Writing and Signed by

To be considered by the head of a state agency or by the head of a fire or police department, the complaint must be: (1) in writing; and (2) signed by the person making the complaint.

Section 614.023 Copy of Complaint to be given to Officer or Employee

- (a) A copy of a signed complaint against a law enforcement officer, fire fighter, or police officer shall be given to the officer or employee within a reasonable time after the complaint is filed.
- (b) Disciplinary action may not be taken against the officer or employee unless a copy of the signed complaint is given to the officer or employee.
- (c) In addition to the requirement of Subsection (b), the officer or employee may not be indefinitely suspended or terminated from employment based on subject matter of the complaint unless:
 - (1) the complaint is investigated; and
 - (2) there is evidence to prove the allegation of misconduct.

Disposition of Complaint:

After a thorough and objective investigation, your complaint will be classified into one of the following disposition categories:

Exonerated – The employee's conduct was lawful and proper.

Unfounded – The incident did not occur, or the accused employee was not involved.

Not sustained – Insufficient evidence was found to clearly prove or disprove the allegation.

Sustained – The allegation is supported by sufficient evidence. Violation of policy and procedure occurred and appropriate administration action will be taken.

There are five (5) types of administrative actions that can be recommended for a sustained complaint:

- **Training**
- **Verbal/Written Counseling**
- **Written Reprimand**
- **Suspension**
- **Termination**

The City's Chief of Police will make the final determination about the disposition of your complaint and the disciplinary action taken, if any.

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This complaint packet allows citizens to file a complaint against employees of the Santa Fe Police Department,

Please follow the procedures as set out below:

SWORN AFFIDAVIT

Completion Procedure:

1. Sworn affidavit is to be completed by you only.
2. Additional complainants and /or witnesses should complete additional sworn affidavits.
3. If additional writing is needed, please use blank lined pages. **Do not write on the back of sworn affidavit.**
4. After completing the sworn affidavit, please review it for proper completion and content.
5. Your affidavit **MUST** be signed, notarized and returned to the Santa Fe Police Department, before the investigation can proceed.

MEDICAL RELEASE

Requirement/Completion Procedure:

1. You will also complete the attached copy of "**Release of Medical Information**" if you are alleging injury.
2. The **Release of Medical Information** must be signed and notarized.

PACKET COMPLETION

Complaint Packet Return:

1. Review all forms for completion, signatures and notary requirements.
2. Attach all papers together and return to the Santa Fe Police Department, P.O. Box 950, Santa Fe, Texas 77510
3. If additional information is needed, contact SFPD Internal Affairs at (409) 925-2000.

File # _____

SWORN AFFIDAVIT

**State of Texas
County of Galveston**

Date of Statement: _____, 200____.

Before me, the undersigned authority, appeared _____, who after being sworn on his/her oath deposes and says: My name is _____. I am _____ years of age and my date of birth is _____. I reside at: (address) _____, (city) _____, (state) _____, (zip code) _____. My home telephone number is: (area code) _____ (number) _____. My work number is: (area code) _____ (number) _____. I can also be contacted at _____. My driver's license number or identification number is _____. I have completed _____ years of school and can read and write the English language.

I HAVE BEEN INFORMED THAT UNDER THE PENAL CODE OF THE STATE OF TEXAS, SECTION 37.02:

"THAT A PERSON COMMITS THE OFFENSE OF PERJURY IF, WITH INTENT TO DECEIVE AND WITH KNOWLEDGE OF THE STATEMENT'S MEANING; HE MAKES A FALSE STATEMENT UNDER OATH OR SWEARS TO THE TRUTH OF A FALSE STATEMENT PREVIOUSLY MADE; AND THE STATEMENT IS REQUIRED OR AUTHORIZED BY LAW TO BE MADE UNDER OATH".

In order to conduct a complete and thorough investigation of your complaint, please answer the following questions.

PLEASE BE SPECIFIC

1. Date of incident: _____ Time: _____ (AM)(PM)
2. Location of incident (address): _____.

3. List the name and badge number of the Santa Fe Police Department employee(s) being **accused**:

(a.) _____
Name Badge Number

(b.) _____
Name Badge Number

(c.) _____
Name Badge Number

4. If you do not know the name of the SFPD employee(s) being accused, please provide the following information:

(a) patrol unit number _____

(b) physical description of employee(s):

(c) other identifiers:

5. Were any other SFPD employee(s) **present** during the alleged incident? (Yes) (No)

If your answer is **yes** please provide the following information:

Name Badge Number

Name Badge Number

Name Badge Number

6. Were any **other witnesses** present during the alleged incident? (Yes) (No)

If your answer is **yes** please provide the following information:

| | | |
|------|---------|-----------|
| Name | Address | Phone No. |
|------|---------|-----------|

| | | |
|------|---------|-----------|
| Name | Address | Phone No. |
|------|---------|-----------|

7. Did you sustain any injury? (Yes) (No)

If your answer is **yes** please list the type of injury:

8. Did you receive medical treatment? (Yes) (No)

If your answer is **yes**, please provide the following information:

(a) Name, address and telephone number of the doctor/hospital that treated you:

If you were treated by a doctor/hospital, please complete the attached Medical Release Form. Please note that the form must be notarized.

9. Were you arrested?
(Yes) (No)

Were you issued a citation?
(Yes) (No)

If your answer is **yes** to either of the above questions, please provide a list of the charges filed and/or citations issued:

Charge(s):

Ticket #

I have made, read and signed this affidavit. It is true and correct to the best of my knowledge and belief.

Complainant (Affiant)

SWORN TO and SUBSCRIBED before me on this ____ day of _____,
200____.

Notary--State of Texas

Printed Name of Notary

My commission expires: _____

Santa Fe Police Department Medical Records AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize all Custodian(s) of Records to release the following information from the medical record(s) of:

PATIENT INFORMATION (Please Print)

| | | | |
|--------------|---------------|------------------------|--------------|
| Patient Name | Date of Birth | Social Security Number | Phone Number |
| Address | City | State | Zip Code |

Information to be released:

- | | | |
|---|--|--|
| <input type="checkbox"/> Complete Hospital Records | <input type="checkbox"/> Doctors Medical Records | <input type="checkbox"/> Front Sheet |
| <input type="checkbox"/> Emergency Room Report | <input type="checkbox"/> History & Physical | <input type="checkbox"/> Radiology Reports |
| <input type="checkbox"/> Discharge Summary | <input type="checkbox"/> Operative Report | <input type="checkbox"/> Clinic Visits |
| <input type="checkbox"/> Psychological Evaluation | <input type="checkbox"/> Pathology Report | |
| <input type="checkbox"/> Other report(s) specify: _____ | | |

Purpose of disclosure: Santa Fe Police Department Internal Investigation
 Information is to be released to: Santa Fe Police Department/ Internal Affairs
 P.O. Box 950
 Santa Fe, Texas 77510
 Phone: (409) 925-2000 Fax: (409) 925-4806

The question of privacy between hospitals, medical facilities, its employees and attending physician(s) and the patient are **WAIVED** by this authorization. The aforementioned **are released from legal responsibility or liability** for the release of the above information, **which may include Drug, Alcohol, Psychiatric, HIV, or Aids information**, to the extent indicated and authorized herein.

ALCOHOL AND DRUG ABUSE PATIENTS:

PROHIBITION ON REDISCLOSURE: This information has been disclosed to you from records whose confidentiality is protected by Federal Law. Federal Regulations (42CFR part 2) prohibits you from making any further disclosure of this information except with the specific written consent of the patient. A general authorization for the release of information if held by another party is NOT sufficient for this purpose. Federal Regulations state that any person who violates any provision of this law shall be fined not more than \$500.00, in the case of the first offense, and not more than \$5,000.00 in the case of each subsequent offense.

HOSPITAL/DOCTOR INVOLVED: _____ Phone: _____

ADDRESS: _____

Signature of Patient Date Signed

Signature of Parent or Guardian Relationship Date Signed

Signature of person authorized to sign in lieu of patient Relationship Date Signed

Witness Address Date Signed

**THE STATE OF TEXAS
COUNTY OF GALVESTON**

BEFORE ME, the undersigned, a Notary Public in and for the State of Texas, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.
 GIVEN UNDER MY HAND AND SEAL OF OFFICE this _____ day of _____, 200____.

Printed Name of Notary Notary Public-----State of Texas

Date Commission Expires: _____

