

PROBATION-MARKED FIELD JACKETS AND POLOS

- AUTHORITY:** Administrative Directive
- RESCINDS:** Procedure Manual Item 1-4-112, dated 04/18/14
- FORMS:** Probation Department Equipment Request Form (Attachment A)
Annual Audit Checklist (Attachment B)
- PURPOSE:** To outline uniform criteria for use and issuance of Probation-marked field jackets/polos.

I. GENERAL INFORMATION

- A. Field jackets/polos to identify probation officers in field activity situations are available to authorized staff for use as supplemental equipment in field activities.
- B. Field jackets/polos are advisable when staff participate in field activities involving suspected extraordinary risks, such as when teaming with law enforcement for search and seizure and arrests.
- C. Deputies are not expected to place themselves in any situation which presents an unreasonable degree of peril to their lives or health, whether or not protected by available safety equipment, and if unexpectedly placed in such a situation should withdraw from the situation if possible.
- D. Each employee who uses a field jacket/polo is responsible for the proper care of the departmentally issued property.
- E. When conducting field enforcement activities and probation staff are wearing Probation-marked clothing (field jackets and/or polo shirts), probation officers will wear body armor.

II. PROCEDURE

- A. Probation-marked field jackets/polos are to be obtained via a Probation Department Equipment Request form through the designated chain of command.
- B. Once a probation-marked field jacket/polo is issued, they will be visually verified by the staff's supervisor as part of the annual equipment audit.
- C. When the probation-marked field jackets/polos are not in good repair, staff will request a replacement via the Probation Department Equipment Request form.

REFERENCES:

Procedures:	1-4-111	Protective Body Armor
	1-4-119	Field Officer Safety Information/Required Equipment for Field Activities
Policies:	D-5	Arrests/Temporary Detentions
	D-7	Search and Seizure
	G-7	Distribution and Use of County Services, Supplies and Equipment

Attachments

J. Hong/J. Johnson

APPROVED BY:

PROBATION DEPARTMENT EQUIPMENT REQUEST

Last Name (Legal): Click or tap here to enter text.
 Position Title: Click or tap here to enter text.
 Telephone #: Click or tap here to enter text.
 Supervisor: Click or tap here to enter text.

First Name (Legal): Click or tap here to enter text.
 Work Assignment: Click or tap here to enter text.
 Location: Click or tap here to enter text.
 Supervisor Telephone #: Click or tap here to enter text.

Deputy Juvenile Correctional Officer I, II, and Sr. Juvenile Correctional Officer *** If required by assignment	Deputy Probation Officer I, II, and Sr. Deputy Probation Officer *** If required by assignment
<input type="checkbox"/> Jacket Size: Choose an item. (all assignments) <input type="checkbox"/> Name Patch for Jacket <input type="checkbox"/> Shirt Size**: Choose an item. (all assignments) <input type="checkbox"/> Hat <input type="checkbox"/> Duty Belt: Choose an item. <input type="checkbox"/> Handcuffs <input type="checkbox"/> Handcuff Case: Choose an item. <input type="checkbox"/> Radio Holder <input type="checkbox"/> OC Spray Holder <input type="checkbox"/> Key Holder/Lanyard/Extender <input type="checkbox"/> Safety Pouch <input type="checkbox"/> Scissors <input type="checkbox"/> Keepers	<input type="checkbox"/> Jacket Size: Choose an item. (all assignments) <input type="checkbox"/> Name Patch for Jacket <input type="checkbox"/> Shirt Size**: Choose an item. (all assignments) <input type="checkbox"/> Hat <input type="checkbox"/> Duty Belt: Choose an item. <input type="checkbox"/> Handcuffs <input type="checkbox"/> Handcuff Case: Choose an item. <input type="checkbox"/> Radio Holder <input type="checkbox"/> OC Spray Holder <input type="checkbox"/> Key Holder/Lanyard/Extender <input type="checkbox"/> Flashlight <input type="checkbox"/> Keepers <input type="checkbox"/> Safety Pouch
Supervising Juvenile Correctional Officer	Supervising Probation Officer
<input type="checkbox"/> Jacket Size: Choose an item. (all assignments) <input type="checkbox"/> Name Patch for Jacket <input type="checkbox"/> Shirt Size**: Choose an item. (all assignments) <input type="checkbox"/> Hat <input type="checkbox"/> Duty Belt: Choose an item. <input type="checkbox"/> Handcuffs <input type="checkbox"/> Handcuff Case: Choose an item. <input type="checkbox"/> Radio Holder <input type="checkbox"/> OC Spray Holder <input type="checkbox"/> Key Holder/Lanyard/Extender <input type="checkbox"/> Safety Pouch <input type="checkbox"/> Scissors <input type="checkbox"/> Keepers	<input type="checkbox"/> Jacket Size: Choose an item. (all assignments) <input type="checkbox"/> Name Patch for Jacket <input type="checkbox"/> Shirt Size**: Choose an item. (all assignments) <input type="checkbox"/> Hat <input type="checkbox"/> Duty Belt: Choose an item. <input type="checkbox"/> Handcuffs <input type="checkbox"/> Handcuff Case: Choose an item. <input type="checkbox"/> Radio Holder <input type="checkbox"/> OC Spray Holder <input type="checkbox"/> Key Holder/Lanyard/Extender <input type="checkbox"/> Flashlight <input type="checkbox"/> Keepers <input type="checkbox"/> Safety Pouch

Employee Signature	Date
Supervisor	Date
Assistant Division Director	Date
Division Director	Date

Scan approved form to QuarterMaster at Prob-QuarterMaster@prob.ocgov.com. Route original to QuarterMaster at GAO

**Staff will be allowed new shirts with justification at the discretion of the QuarterMaster and with required supervisor approval.

***Note/Justification: _____

ANNUAL AUDIT CHECKLIST

Employee: _____ Classification: _____
Employee ID: _____

Equipment

- Supervisor must visually verify the employee has all department-issued property and indicate controlled asset number, if applicable:

- | | | | |
|----------------------------------|-------|---------------------------------|-------|
| 1. Access/ID Card | _____ | 16. Keys | _____ |
| 2. Badge I.D. card | _____ | 17. Key Holder/Lanyard | _____ |
| 3. Badge (indicate #) | _____ | 18. Laptop/Comp. Equip. Asset#: | _____ |
| 4. Belt Badge (indicate #) | _____ | 19. Locker Locks | _____ |
| 5. Blackberry/Cell Phone Asset#: | _____ | 20. PAK Set | _____ |
| 6. Body Armor | _____ | 21. PAK Set Charger | _____ |
| 7. Computer Token (indicate #) | _____ | 22. PAK Set Holder | _____ |
| 8. Dictaphone Asset#: | _____ | 23. Parking Card | _____ |
| 9. Duty Belt | _____ | 24. Pepper Spray | _____ |
| 10. Duty Belt Pouch | _____ | 25. Pepper Spray Holder | _____ |
| 11. Flashlight | _____ | 26. Probation Jacket | _____ |
| 12. Flashlight Charger | _____ | 27. Probation Vest | _____ |
| 13. Flashlight Holder | _____ | 28. Other | _____ |
| 14. Handcuffs | _____ | 29. Other | _____ |
| 15. Handcuff Holder | _____ | 30. Other | _____ |

Emergency Notification Information (ENI)

- Instructions and ENI form attached for update
- Verify completion and submit to PSD with checklist

Supervisor's Initials _____

Authorization to Drive on County Business

- Instructions and form attached
- Verify completion and submit to PSD with checklist

Supervisor's Initials _____

Policy Manual and Procedure Manual Items

- Employee is aware that the current policy manual and PMIs are available to the employee on PROB-NET for reference.

Employee's initials _____

Employee's Signature Date Supervisor's Signature Date

Return completed ENI and Authorization to Drive with the checklist to the Professional Standards Division, NCFSO