



Tulsa Police Department

This policy statement and the procedures thereunder are intended for Police Department use only. The policies, procedures, and regulations are for internal Police Department administrative purposes and are not intended to create any higher legal standard of care or liability in an evidentiary sense than is created by law. Violations of internal Police Department policies, procedures, regulations, or rules form the basis for disciplinary action by the Police Department. Violations of law form the basis for civil and/or criminal sanctions to be determined in a proper judicial setting, not through the administrative procedures of the Police Department.

Policy # 304C Attachment **Effective Date** 11/30/2005
Policy Name Employee Tracking and Assistance Program – Attachment **Approved Date** 11/30/2005
Approved by *Wendell Franklin, Chief of Police* **Previous Date** 04/28/2004

TULSA POLICE DEPARTMENT **EMPLOYEE TRACKING AND ASSISTANCE PROGRAM**

Identification Phase ETAP NUMBER _____

Employee Name

SOC# _____ DOB _____ DOE _____

Present Assignment: _____

Criteria being used for identification into the program include:

IA Case #	Type of Case	Findings
_____	_____	_____
_____	_____	_____
_____	_____	_____

Assault Incident #	Date	Disposition
_____	_____	_____
_____	_____	_____
_____	_____	_____

Accident Report #	Date	Determination
_____	_____	_____
_____	_____	_____
_____	_____	_____

A conference has been held in accordance with Policy 304 C, Phase 1, and Paragraph 5. A review of the information has resulted in the employee being ☐ admitted ☐ not admitted into the Employee Tracking and Assistance Program.

_____ Chief of Police (or designee)	_____ Bureau Deputy Chief	_____ Division Commander
_____ Shift Commander	_____ Immediate Supervisor	_____ Date of Conference

TULSA POLICE DEPARTMENT EMPLOYEE TRACKING AND ASSISTANCE PROGRAM

Development Phase

ETAP Number: _____

The Development Phase of the Employee Tracking and Assistance Program is a phase where the identified employee can have quality counseling time with an assigned supervisor. It is the responsibility of all supervisors in the employee's chain of command, as well as the employee, to contribute in this planning stage for preparing a program of training/assistance to assist the employee.

On _____ (date) Employee _____
and Supervisor _____ met and the following training/assistance or plan of action was
developed: _____

_____ ; or,

I feel the employee is in need of professional evaluation or counseling. I recommend that a committee meet in accordance with Policy 304 C, Phase 2, Paragraph 3.A.

Explain: _____

_____ ; or,

The employee has refused to participate in the program and/or cooperate in developing a plan of action.

Explain: _____

Assigned Supervisor's Signature: _____

Employee Comments: _____

Employee's Signature: _____