RADIUS Portal Online User Guide

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RADIUS is the Reporting Application for Disciplinary Incidents, Use of Force, and Separations. This guide is intended to help users of the RADIUS Portal understand how to complete and submit APOSTC Form POST-11. For any questions about this document please email radius@apostc.alabama.gov or call APOST at 334-242-4045.

WHERE DO I FIND THE FORM

The RADIUS Form or APOSTC Form 11 is on the website for the Alabama Peace Officers Standards and Training Commission website located at: https://www.apostc.alabama.gov/. Select RADIUS from the menu bar and the form will load.

Note: You will need the RADIUS-User-Entry privilege assigned to your Alacop account by your agency's AISO in order to access the site.

HOW DO I SUBMIT THE FORM

Once all required information is entered into the form, you will conduct the following to upload your form to APOSTC.

- 1. Save a copy of the form for your records.
- 2. Click the Submit a Form button
- 3. Choose the form and any associated documentation to upload with it
- 4. Click the Submit Button
- 5. Receive a successful submission message

Note: For more detailed instructions, here is an Upload Instructions Guide.

WHAT INFORMATION SHOULD BE INCLUDED IN THE COMPLETED FORM

Note: Fields listed below denoted with a * are required fields.

OFFICER INFORMATION

- 1. First Name* First name of law enforcement officer.
- 2. Middle Name Middle name of law enforcement officer. Leave blank if no middle name.
- 3. Last Name* Last name of law enforcement officer.
- 4. Suffix Standard suffix.
- 5. Date of Birth (DOB)* Date of birth of law enforcement officer.
- 6. Race of Law Enforcement Officer Race of law enforcement officer.

- 7. Sex of Law Enforcement Officer Male or Female.
- 8. Social Security Number (SSN)* Social Security Number of law enforcement officer.
- 9. APOSTC Certification Number (APOSTC#) APOSTC certification number of law enforcement officer.
- 10. Law Enforcement Officer Certification Status* Active certified officer; certified reserve; noncertified officer; certified correctional officer.
- 11. ALACOP Username ALACOP username of law enforcement officer.
- 12. Law Enforcement Officer Employment Date* Date of appointment of law enforcement officer. Should be the month, day and year of appointment.
- 13. Is the law enforcement officer still employed with the agency? Yes/No
- 14. Separation Date* Date of law enforcement officer separation if applicable. Should be month, day and year of separation if applicable.
- 15. How did the officer separate?
 - a. Resignation in good standing Officer resigned in good standing.
 - b. Resignation in lieu of termination Officer resigned in lieu of termination.
 - c. Resignation in lieu of investigation Officer resigned after notification of an open investigation into officer's behavior.
 - d. Termination Officer was terminated for cause by the employing agency.
 - e. Retirement in good standing Officer retired in good standing.
 - f. Retirement in lieu of termination Officer retired in lieu of termination.
 - g. Retirement in lieu of investigation Officer retired after notification of an open investigation into officer's behavior.
 - h. Deceased Officer's death, including non-line of duty death.
- 16. Did the Event Happen while the Law Enforcement Officer was on duty Yes/No. Was the officer acting in their official capacity.
- 17. Rank/Position of Law Enforcement Officer at the time of event Rank/position the officer held at the time the event occurred.
- 18. Did the event happen within the Officer's jurisdiction? Yes/No If no list investigating agency. Was the officer within their assigned jurisdiction when the event took place.?
- 19. Were there other law enforcement officers involved? Yes/No. If yes provide a list officer's names.

REPORTING AGENCY

- 1. Agency Name* Full name of agency entering officer information.
- 2. Agency Originating Identification Number (ORI)* Nine-character ORI number of agency entering officer information.
- 3. Chief Executive Officer First Name (CEO)* First name of the chief executive officer of the agency.
- 4. CEO Middle Name Middle name of the CEO.
- 5. CEO Last Name Last name of the CEO 6. CEO Suffix Standard list of suffixes.
- 7. CEO Title Can be a chief, sheriff, or director etc.
- 8. Agency physical Street* Street and number of the agency's physical address.

- 9. Agency Phone* Ten-digit agency phone number.
- 10. Agency Physical City City in which agency is located.
- 11. Agency Physical State Set to Alabama
- 12. Physical Zip Zip Code of Agency
- 13. Agency Mailing Address* Mailing PO Box/Drawer of agency. Only provide information if mailing and physical address are not the same.
- 14. Agency Mailing City City in which agency receives mail.
- 15. Agency Mailing State Set to Alabama
- 16. Agency Mailing Zip Zip used for mailing address.
- 17. Did agency have a written use of force policy* Yes/No/NA check box. If this event is related to an complaint of excessive force, then answer this question. If not then select NA.
- 18. Was the Use of Force Policy changed after the event. Yes/No/NA. If this event is related to an complaint of excessive force, then answer this question. If not then select NA.
- 19. Has agency submitted ALEA CJIS Form 16 to ALEA Check box for Yes/No/NA. This is only applicable for complaints of excessive use of force.

AGENCY REPORTING PERSON

- 1. First Name* first name of the reporting person.
- 2. Middle Name middle name of the reporting person.
- 3. Last Name* Last name of the reporting person.
- 4. Suffix standard list of suffixes.
- 5. Reporting Person Rank/Position* Rank/Position held of reporting person.
- 6. Email address* email address of reporting person.
- 7. Phone Number* 10-digit phone number plus extension of reporting person

EVENT INFORMATION

- 1. Event Type select the event type.
 - a. Disciplinary Action
 - b. Complaint of Excessive Force
 - c. Reassignment for Cause
 - d. Separation
- 2. Event County County where the event took place.
- 3. Agency Case Number Agency generated case number if available.
- 4. Date of Occurrence date the event initiated.
- 5. Determination of Event Based on the facts and evidence discovered during the investigation into the event.
 - a. Founded
 - b. Unfounded
- 6. Date of Determination Date the final results of the investigation were completed.
- 7. First Name of Complainant* First name of the complainant against an officer. Only to be used in case of a complaint against the officer. Select NA if there is not a complaint against the officer.

- 8. Middle Name of Complainant Middle name of complainant. Only to be used in case of a complaint against the officer. Select NA if there is not a complaint against the officer.
- 9. Last Name of Complainant* Last name of complainant. Only to be used in case of a complaint against the officer. Select NA if there is not a complaint against the officer.
- 10. Complainant Suffix Standard list of suffixes.
- 11. Complainant Race Race of complainant if known. Only to be used in case of a complaint against the officer. Select NA if there is not a complaint against the officer.
- 12. Complainant Sex Sex of the complainant if known. Only to be used in case of a complaint against the officer. Select NA if there is not a complaint against the officer.
- 13. Event Details Provide a brief description of event. Additional pages may be added if needed.
- 14. Criminal Court Adjudication Was the case brought to a Grand Jury or any other type of criminal court.
- 15. Civil Court Adjudication Was the case brought to any civil court.
- 16. Criminal Court Name and location Criminal court name and location.
- 17. Civil Court Name and location Civil court name and location.

SUPPORTING DOCUMENTATION

- 1. Are you attaching supporting documentation? Yes/No.
- 2. List of attachments Please provide a list of all attached documents. (Photographs will not be allowed to be uploaded to RADIUS in phase 1. Phase 2 will allow this functionality once implemented.)

APOSTC REVIEW (APOSTC EMPLOYEES WILL COMPLETE THIS SECTION)

- 1. First Name of Reviewing Agent first name of reviewing agent.
- 2. Middle Name of Reviewing Agent middle name of reviewing agent.
- 3. Last Name of Reviewing Agent last name of reviewing agent.
- 4. Reviewing Agent Suffix standard list of suffixes.
- 5. Review Date Date of APOSTC review.
- 6. Continuing Education (CEU) Is the law enforcement officer current on CEUs at the time of the event.
- 7. Law Enforcement Officers Certification Date Date law enforcement officer received their certification.
- 8. Text box for APOSTC Notes.

HOW DO I CHECK THE RADIUS DATABASE WHEN MAKING A HIRING DECISION?

During Phase 1, chief executive officers or their designees will have to complete a POST form RFI-2 or contact APOSTC at (334) 242-4400 or radius@apostc.alabama.gov to request information in RADIUS. This information will be provided to your agency in a PDF format.

Information provided to your agency to assist in hiring decisions will include:

1. Law Enforcement Officer (LEO) full name

REPORTING APPLICATION FOR DICPLINARY INCIDENTS, USE OF FORCE AND SEPARATIONS (RADIUS)

- 2. The date of the disciplinary action
- 3. Type of disciplinary action imposed
- 4. A description of the conduct upon which such disciplinary action is based
- 5. The name of the person alleging the complaint
- 6. Name of Agency submitting RADIUS information