



## Legislation Details (With Text)

**File #:** 21-206      **Version:** 2      **Name:**  
**Type:** Operational Focus Updates      **Status:** Agenda Ready  
**File created:** 2/10/2021      **In control:** City Council Work Session  
**On agenda:** 2/15/2021      **Final action:**  
**Title:** Presentation and discussion by the Police Department (Safe and Secure City) Cross-Functional Team providing information on key activities, efforts and processes.

1. CFT Operations (Dionne Mack)
2. Team Lead Reports:
  1. Training Focus (Cary Westin)
  2. Approach for Best Practices and Comparative Analysis (Denice Sepulveda)
  3. Racial Profiling Report Development (Zina Silva/Justice Research Consultants)
  4. Use of force and deadly force incidents historical review Report Development (Zina Silva/Hillard Heintze)
  5. Composition and scope of the El Paso Discipline Review Board and the Shooting Review (Bruce Collins)

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:** 1. 02152102 DHS POLICE DEPT. CFT, 2. Safe + Secure City CFT

Date	Ver.	Action By	Action	Result
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## CITY OF EL PASO, TEXAS AGENDA ITEM SUMMARY FORM

**All Districts**

City Manager's Office, Dionne Mack, (915) 212-1064

**SUBJECT:**

*APPROVE a Resolution / Ordinance / lease to do what? OR AUTHORIZE the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.*

Presentation and discussion by the Police Department (Safe and Secure City) Cross-Functional Team providing information on key activities, efforts and processes.

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(Bruce Collins)

**BACKGROUND / DISCUSSION:**

*Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?*

Click or tap here to enter text.

**PRIOR COUNCIL ACTION:**

*Has the Council previously considered this item or a closely related one?*

Click or tap here to enter text.

**AMOUNT AND SOURCE OF FUNDING:**

*How will this item be funded? Has the item been budgeted? If so, identify funding source by amount numbers and description of account. Does it require a budget transfer?*

Click or tap here to enter text.

\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

Department Head:

*If Agenda Item Summary Form is initiated by Purchasing, client department should sign also*