

<b>Department Name</b>	
<b>Surveillance Technology Name</b>	
<b>Location of Surveillance Tech</b>	
<b>Nature of Surveillance Tech</b>	Hardware/ Software (select one)
<b>Data Sources that STO applied to</b>	[Toolkit 5.4 answer]
<b># of Requests for BOS Approval</b>	[List number of times department requested approval for BOS for existing policy – Ask COIT staff if unsure ]
<b>BoS Approval Date</b>	Wednesday, August 4, 2021
<b>ASR Submission Deadline</b>	Wednesday, August 3, 2022
<b>Date of ASR Completion</b>	
<b>Department Staff involved in ASR form completion</b>	

**Note:** Completion of this Annual Surveillance Review form is mandatory for compliance with the 19B Ordinance. After the Board of Supervisors approves a Surveillance Technology Policy, the department must submit an Annual Surveillance Report to the Committee on Information Technology ("COIT") within 12 months of Board approval and make that report available on the department's website. In subsequent years, the Annual Surveillance Report must be completed by November 1 of that year. Please review the [19B.6](#) of the 19B Ordinance for more information. In this form, "surveillance technology" refers to the technology listed in the "Surveillance Technology Name" field above.

This year is the initial year for this process and so the submission deadline is **Wednesday, August 3, 2022.** Please contact COIT Privacy Analyst Julia Chrusciel at [julia.chrusciel@sfgov.org](mailto:julia.chrusciel@sfgov.org) with any questions or concerns.

### Change in Authorized Use Cases

1. Please list the authorized use cases in from your Surveillance Technology Policy documents:
2. In the last year, did your department have use cases which differed from your "approved use cases" in your BOS-approved policy? (Yes/No?)
  - 2.a. If yes, please list new use cases:
  - 2.b. If yes, please explain why use cases have changed:

### Change in Authorized Job Titles

3. Does the list of "authorized job titles" in your BOS-approved policy need to change? i.e. Do you need additional job titles to be authorized to access the data, or do you need to remove any current job titles? (Y/N?)
  - 3.a. If yes, please provide an updated list of authorized job titles:
  - 3.b. If yes, please explain why job titles have changed:

### **Changes in Number or Type of Technology and Reason for Change(s)**

#### **Replacement of Old Technology**

4. Has any technology listed in the policy been replaced? (Y/N?)
  - 4.a. If yes, why has the technology been replaced?
  - 4.b. If yes, please list technology which was replaced (include manufacturer and model information):
  - 4.c. If yes, please list technology which replaced the original technology (include manufacturer and model information):
  - 4.d. If yes, please list how many units have been replaced:

#### **Addition of New Technology**

5. Has any technology listed in the policy been added? (Y/N?)
  - 5.a. If yes, why has the technology been added?
  - 5.b. If yes, please list technology which was added (include manufacturer and model information):
  - 5.c. If yes, please list how many units have been added:

#### **Ceased Operation of Technology**

6. Is any technology listed in the policy no longer in use? (Y/N?)
  - 6.a. If yes, why is the technology no longer used?
  - 6.b. If yes, please list how many units have ceased operation:

#### **Services or Equipment Sources**

7. List any and all entities, companies or individuals which provide services or equipment to the department which are essential to the functioning or effectiveness of the Surveillance Technology (list "N/A" if not applicable):

### **Surveillance Technology Goals**

8. Has the surveillance technology been effective at achieving its identified purpose? (Y/N?)
9. In 3-5 sentences, please explain how the technology has or has not been effective?
  - 9.a. Provide quantitative data to support your response. This should include crime statistics for the radius where the technology operates if that was a motivating factor in acquiring the surveillance technology.

### **Data Sharing**

10. Has data acquired through the surveillance technology been shared with entities outside of the department? (Y/N?)

10.a. If yes, was the data shared with city and county departments or other entities associated with city and county government? (Y/N?)

10.a.1. If yes, list which departments received surveillance technology data from your department, what type of data was disclosed, under what legal standard the information was disclosed, and a justification for the disclosure.

10.b. If yes, was the data shared with entities outside of city and county government? (Y/N?)

10.b.1. If yes, list which non-city entities received surveillance technology data from your department, what type of data was disclosed, under what legal standard the information was disclosed, and a justification for the disclosure.

### **Accidental Receipt of Face Recognition Data**

11. Did your department inadvertently or unintentionally receive, retain, access or use any information obtained from Face Recognition Technology? (Y/N?)

11.a. If yes, please log any instances of your department receiving, accessing or using information from Face Recognition Technology inadvertently or unintentionally. For each incident, include the

- Date and time
- Description of how your department acquired the data
- Description of the data received.

Create a numbered list so each instance can be referenced later.

11.b. If yes, what is your department's plan to prevent any future transfers of face recognition data to your department?

### **Complaints**

12. How many complaints or concerns has your department received from community members about the surveillance technology?

13. Please summarize the complaints or concerns which your department received about the surveillance technology:

### **Violations**

14. Were there any violations of the Surveillance Technology Policy or Surveillance Impact Report, reported through community members, non-privileged internal audits, or through other means in the last year? (Y/N?)

14.a. If yes, how many violations have there been over the last year?

- 14.b. If yes, please describe each violation and document what the department did to respond to violation – in terms of correction, public disclosure, and discipline of involved parties.
15. Has your department conducted any internal audits of the technology? (Y/N?)
- 15.a. If yes, please provide general aggregate information about the result of your department's internal audits:
- 15.b. If the audits revealed violations, please list any actions taken in response to the violations:

### **Statistics and Information about Public Records Act Requests**

16. Has your department received any public records act requests for this surveillance technology? (Y/N?)
- 16.a. If yes, how many public records requests have been made regarding this surveillance technology?
- 16.b. If yes, please summarize what has been requested via public records requests, including the general type of information requested and disclosed, as well as the number or requests for each general type of information.

### **Total Annual Costs for the Surveillance Technology**

17. List the number of FTE (new & existing).
18. The one-time costs for Fiscal Year 2021-22 are:
- Total Salary & Fringe:
  - Software:
  - Hardware/ Equipment:
  - Professional Services:
  - Training:
  - Other:
19. The annual costs for Fiscal Year 2021-22 are:
- Total Salary & Fringe:
  - Software:
  - Hardware/ Equipment:
  - Professional Services:
  - Training:
  - Other:
20. What source of funding will fund the Surveillance Technology for Fiscal Year 2022-23?:
21. Have there been any changes to the one-time costs from your department's approved Surveillance Impact Report? (Y/N)
- 21.a. If yes, why have the one-time costs changed?
22. Have there been any changes to the annual costs from your department's approved Surveillance Impact Report? (Y/N)

22.a. If yes, why have the annual costs changed?

### **Annual Inventory Check**

Note: In 2019, all departments were asked to compile a list of surveillance technologies which their department uses. Since then, departments have been asked to contact COIT about new technologies for a surveillance technology review via the [Surveillance Technology Ordinance Form](#) in ServiceNow. Please feel free to reference the current [Surveillance Technology Inventory](#) for your department to help you answer the following questions

23. Is the Surveillance Technology Inventory for your department current and accurate? (Y/N)

23.a. If no, are there any technologies which need to be removed from the inventory because the department no longer uses the technology? (Y/N)

23.a.1. If yes, please list which technologies need to be removed and when your department stopped using the technology (month and year).

23.b. If no, are there any technologies which need to be added to the inventory because they are non-exempt surveillance technology? (Y/N)

23.b.1. If yes, please list which technologies need to be added and when your department started using the technology (month and year).

Note: If you are not sure if a technology needs to be added to the inventory, please complete the [Surveillance Technology Ordinance Form](#) in ServiceNow.

23.c. If no but technologies do not need to be added or removed to the current inventory, please explain what issue there is with your department's Surveillance Technology Inventory.