

"E" DIVISION CRIMINAL OPERATIONS CORE POLICING

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MINISTRY OF JUSTICE OFFICE OF THE CHIEF CORONER

February 24, 2017

Ms. Lisa Lapointe, Chief Coroner Chief Coroner's Office Metrotower II Suite 800 - 4720 Kingsway Burnaby, BC V5H 4N2

RE: Rene VAUGEOIS Coroner's Inquest into the Death of BCCS Case File: 2016:0380:0014

Dear Ms. Lapointe:

As a result of the tragic death of Mr. Vaugeois, we undertook a review of related RCMP Policy, and wish to respond to the following Coroner's Jury recommendations directed to the "R.C.M.P.":

Recommendation 6

"Note-taking should be mandatory in respect of all incidents attended by R.C.M.P. officers."

Response:

National Headquarters Operational Manual (NHQ OM) Chapter 25.2.—Investigator's Notes (amended 2016-05-11) reminds members of the RCMP, in part, that:

Investigator's notes serve to refresh memory, justify decisions made, and record evidence. Well documented notebook entries lend credibility to testimony and can substantiate information years after the original entry was made. Inadequate and inaccurate entries in a notebook can compromise an investigation and subsequent criminal, civil, and/or administrative proceedings. [NHQ OM 25.2.1.1.]

Members must make written and/or electronic notes, as soon as practicable, in order to prepare accurate, detailed, and comprehensive notes articulating observations made and

actions taken during the course of their duties. [NHQ OM 25.2.1.2]

All notes made during an investigation are an integral part of an operational file. [NHQ OM 25.2.1.3.]

Investigator's notes should thoroughly describe the details of the occurrence and answer: who, what, when, where, why, and how. [NHQ OM 25.2.3.1.]

Official RCMP directives are clear: members must make notes of the incidents they attend. How much detail those notes contain will vary depending on the seriousness or complexity of the particular incident.

Recommendation 7

"Mental health liaison units should be available for consultation by R.C.M.P."

Response:

NHQ OM Chapter 19.7.—Mentally Ill Persons/Prisoners (amended 2017-02-08) reminds members of the RCMP, in part, that:

A member should be able to recognize when a person's behaviour shows signs of a mental illness, and the person is acting in a manner likely to endanger his/her safety or the safety of others. [19.7.1.1.1.]

Where possible, use Crisis Intervention De-escalation techniques to de-escalate the situation and minimize risk. [19.7.1.1.1.]

In appropriate circumstances, regardless of whether an apprehension/arrest has been made and after a careful risk assessment, members may seek the assistance of a close friend, family member, religious or spiritual leader, or a mental health professional. [19.7.1.4.]

In areas where a joint mental health response is available, and when situational factors permit, members should consult with mental health personnel before apprehending a person and transporting him/her to a facility for examination. This may ensure the most appropriate resolution to the situation. [19.7.2.3.]

Police officers dealing with a call for service must take a totality of circumstances into account when formulating their response. But when police officers are faced with an individual who poses an imminent risk of death or serious injury to himself or others, the totality of circumstances may be reduced to a very small number, and the officers have to act quickly into order to preserve life. Consultation with other professionals—including mental

health professionals—in order to provide an integrated, interagency or holistic response, though ideal, may therefore not be available to all police officers in every given situation.

Thank you for bringing these recommendations to my attention. The RCMP is committed to learning from tragic incidents such as these and to developing policies and procedures that will help prevent their recurrence.

Yours truly,

Dand B. alexans

C/Supt Dave Attfield Deputy Criminal Operations Officer (CORE Policing) "E" Division

cc: A/Commr. Bill Fordy Lower Mainland District Commander

> Supt. Deanne Burleigh OIC, UFVRD