



Royal Canadian Gendarmerie royale
Mounted Police du Canada

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Classification / Désignation sécuritaire

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JUL 03 2013

MINISTRY OF SOLICITOR GENERAL
OFFICE OF THE CHIEF CORONER

Mail Stop #306
14200 Green Timbers Way
Surrey, BC
V3T 6P3

Your file Votre référence

June 18, 2013

2011:0727:0038

Our file Notre référence

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

2011CP-0373

**Re: Coroner's Inquest Recommendations
 In Custody Death of
 Sargent, Blaine Conrad (B: 1992-07-23)
 University Hospital of Northern British Columbia - 2011-09-21**

Dear Ms. Lapointe:

We acknowledge receipt of the BC Coroners Service Verdict at Inquest report dated May 8, 2013, in relation to the death of Mr. Blaine Sargent. We have now had an opportunity to review the recommendation directed to the Commanding Officer, "E" Division RCMP, and I wish to provide the following response.

To BC Corrections/BC Sheriffs/RCMP - Continue to work on an information sharing system that shares pertinent information.

The care and handling of prisoners remains amongst the highest risk of all police procedures, and there is, therefore, within the RCMP National HQ Operational Manual and Divisional Supplements numerous directives—twenty separate chapters—on the subject. I have attached the current National RCMP policy for your perusal (attachment 1). When an agency such as BC Sheriffs or Correctional Service of Canada assumes carriage and responsibility of a prisoner, the RCMP supplies them with a copy of Government of Canada form C-13. This prisoner report outlines a full suite of indicators, including the individual's known medical and emotional state(s). I have attached a copy of the revised form C-13 for your review (attachment 2).

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To BC Corrections and RCMP - Information posters on the danger of drug packing are made and placed in high visibility areas, both in RCMP cell blocks as well as in Correctional Centres. The posters are to be made in such a way that anyone can understand, including illiterate and non English speaking people.

This recommendation is not practical. In this instance the individual purposely secreted contraband drugs within his body to avoid detection. To suggest that a visual warning within police cells would have changed or prevented this type of deceitful behavior would not be realistic.

To RCMP - Make notation on the prison jail forms if they have any reason to suspect the inmate is packing drugs or has other medical issues.

The RCMP's prisoner report (form C-13) contains numerous locations where prisoner handlers can record observational behaviors displayed by prisoners while in custody. If the police believe that a prisoner has consumed a container of drugs or hidden them within his body, the police will attempt to seize this material via an enhanced search protocol. If that is unsuccessful, the police will seek immediate medical attention for the prisoner.

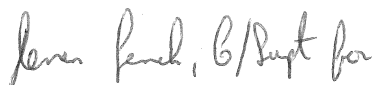
To RCMP - A written assessment check list be designed for the RCMP for use when a medical check has been requested.

This is covered by RCMP National HQ Operational Manual 19.2 and Appendix 19-2-1.

Upon receipt of this Verdict at Inquest, I also directed the Williams Lake OIC, Inspector Warren Brown, to review his detachment's cell block operations personally. He has advised me that Williams Lake detachment is compliant with all RCMP National and Divisional policies.

Thank you for bringing these recommendations to my attention. Incidents such as this, while tragic, serve to reinforce the importance of ongoing training and policy development in an effort to minimize the recurrence of like incidents. The RCMP is committed to improving its service to communities through the ongoing development of appropriate policies.

Yours truly,



R.J. (Randy) Beck

Assistant Commissioner

OIC Criminal Operations - Core Policing

RCMP, "E" Division



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MAY 08 2014

MINISTRY OF SOLICITOR GENERAL
OFFICE OF THE CHIEF CORONER

May 6, 2014

File: 45600-20 / Sargent

Lisa Lapointe
Chief Coroner
Office of the Chief Coroner
Metrotower II
Suite 800 – 4720 Kingsway
Burnaby, BC V5H 4N2

Dear Lisa Lapointe:

I am in receipt of your April 4, 2014, letter with regard to jury recommendations four and six flowing from the Coroner's Inquest into the death of Blaine Conrad Sargent.

With respect to recommendation four, BC Sheriff Services (BCSS) revised its policy with respect to the frequency of checks of in-custodies with the addition of a 10 minute check for in-custodies who possess suicidal tendencies, have medical issues, are kept in isolation cells or otherwise are of concern. The 10 minute check policy for these higher risk in-custodies applies to both courthouse lock-up facilities and prisoner compartments in sheriff transport vehicles. For all other in-custodies, deputy sheriffs are required to visually check each occupied holding cell not less frequently than once every 15 minutes on an irregular schedule. As such, I believe BCSS is fully compliant with this recommendation.

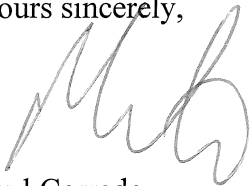
With respect to recommendation six, BC Sheriff Services currently shares pertinent information with BC Corrections and police personnel using the VISEN plus coding system. VISEN plus is a behavioural attitude coding system designed for the exchange of pertinent information regarding in-custodies being transferred between holding agencies. This information relates to various behavioural attitudes or medical conditions about an in-custody such as: violent, infectious, suicidal, escape risk, drug medication, medically unstable etc. The coding system is used on the receipt for prisoner documentation exchanged between agencies and it is also shared electronically between BC Corrections and BCSS. A working group with representation from sheriffs, BC Corrections and the police will review the operation of the VISEN plus coding with the goal of suggesting improvements. The working group will also review other information sharing processes between the agencies to determine if improvements can be made.

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In addition to the VISEN plus coding system, BCSS policy specifies the security and restraint procedures which must be followed for in-custodies suspected of carrying contraband in a body cavity. In such circumstances, the prisoner is restrained using a belly chain and leg restraints so access to the body cavity is made virtually impossible. The prisoner is isolated from other in-custodies and kept under observation. If the in-custody is scheduled for transport, all escorting staff and receiving locations such as correctional centers are made aware of the situation. BCSS policy will be revised to provide that in addition to verbally informing other receiving agencies that a prisoner may be carrying contraband in a body cavity, a notation must also be made of this fact on the receipt for prisoner documentation. As such, I believe BCSS is fully compliant with this recommendation.

BC Sheriff Services appreciates the efforts of the Coroner's jury for its insightful and constructive recommendations in this matter.

Yours sincerely,



Paul Corrado
Executive Director & Chief Sheriff
Court Services Branch, BC Sheriff Services

cc. Kevin Jardine
Ross McKenna
Peter Robinson



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MAY 16 2014

MINISTRY OF SOLICITOR GENERAL
OFFICE OF THE CHIEF CORONER

C500967
59100-20/SARGENT

May 14, 2014

Lisa Lapointe
Chief Coroner
Province of British Columbia
Metrotower II
Suite 800 – 4720 Kingsway
Burnaby BC V5H 4N2

Dear Ms. Lapointe:

I am responding to your April 4, 2014 letter in which you inquire as to action taken by the Corrections Branch regarding jury recommendations arising from the Verdict at Inquest concerning the death of Blaine Conrad Sargent. Mr. Sargent died while in the custody of Prince George Regional Correctional Centre.

All recommendations directed to the attention of the Corrections Branch and Sentry Correctional Health Services Inc., the branch's provincially contracted health services provider, have been addressed as follows and as detailed in the attached response table:

1. A poster and handout materials explaining the risks of packing drugs for inmates has been developed and distributed. Intake nurses advise inmates of these materials and the risks of packing drugs. Confirmation that this has occurred is recorded in the Initial Health assessment in PAC. Inmates suspected of packing drugs have medical needs addressed first and foremost. Once medical needs are addressed, the correctional centre may pursue charges or placement within the correctional centre as per the *Correction Act Regulation*. The security and operational concerns that arise from drug packing cannot be ignored and treated solely as a medical issue.
2. Sentry has posted a training package on the SharePoint site for all health care professionals that addresses inmates packing drugs into the correctional centre in their body and directs staff in what to look for regarding signs and symptoms of impairment at intake. Sentry has amended their initial training checklist to include drug packing awareness training for all new hires.

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Protect Communities, Reduce Reoffending

Ministry of Justice

Corrections Branch
Office of the
Assistant Deputy Minister

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PO BOX 9278 STN PROV GOVT
Victoria BC V8W 9J7

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Lisa Lapointe
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3. Health care managers have been instructed to ensure mock emergency situations are practiced with all staff on a regular basis at least every three months. These mock situations are tracked and recorded by the Sentry Quality Assurance Manager.
4. Adult Custody Policy requires correctional staff to continually conduct visual checks of all inmates that identifies activities or conditions that may compromise the safety and health of inmates. Adult Custody Policy directs staff to conduct 15 minute checks on inmates with medical concerns. Correctional staff are trained to meet this policy requirement.
5. BC Corrections Branch statistical information indicates that on an annual basis the number of inmates returning from court is significantly greater than the number of admissions. These inmates are escorted by BC Sheriff Service officers. The branch could not manage a screening of all inmates returning to the centres from court without a substantial increase in staff resources. Any unusual behaviour or condition brought to the attention of, or noted by, correctional staff upon admitting a returning inmate would precipitate a check by a health care professional.
6. A working group comprised of representatives from BC Corrections, Sheriff Services and RCMP "E" Division has been established to review the information sharing process between the agencies, and use of the VISEN Plus behavioural coding system, to identify and action recommended enhancements.
7. The BC Corrections Branch has developed a poster which is placed in intake and health care areas in all correctional centres to advise inmates of the risks of packing drugs. These utilize plain language and include clearly understood graphics.

The BC Corrections Branch strives to provide a safe and secure environment for incarcerated offenders. When tragedies such as this occur, the branch endeavours to modify and improve procedures to prevent similar occurrences.

Yours sincerely,



Brent Merchant
Assistant Deputy Minister

Attachment

pc: Pete Coulson (w/a)
Joanne Hawkins (w/a)
Donita Kuzma (w/a)

**PRINCE GEORGE REGIONAL CORRECTIONAL CENTRE
DEATH OF INMATE – SEPTEMBER 21, 2011**

RECOMMENDATION	RESPONSE			
	ACTION TAKEN	ACTION PLANNED	TIME FRAME	RESP.
<p>1. To Sentry Correctional Health Services Inc. During the medical intake process of inmates, the health care professional explains in plain and simple language the risks of packing drugs. The medical professional explains if they are, it will be treated as a medical issue.</p>	<p>A poster and handout materials explaining the risks of packing drugs for inmates has been developed and distributed. Intake nurses advise inmates of these materials and the risks of packing drugs. Confirmation that this has occurred is recorded in the Initial Health Assessment in PAC.</p> <p>Inmates suspected of packing drugs have medical needs addressed first and foremost. Once medical needs are addressed, the correctional centre may pursue charges or placement within the correctional centre as per the <i>Correction Act Regulation</i>. The security and operational concerns that arise from drug packing cannot be ignored and treated solely as a medical issue.</p>		Completed	
<p>2. To Sentry Correctional Health Services Inc. Each health care professional participates in advanced drug awareness training or information session during orientation.</p>	<p>Sentry has posted a training package on the SharePoint site for all health care professionals that addresses inmates packing drugs into the correctional centre in their body and directs staff in what to look for regarding signs and symptoms of impairment at intake. Sentry has amended their initial training checklist to include drug packing awareness training for all new hires.</p>		Completed	

**PRINCE GEORGE REGIONAL CORRECTIONAL CENTRE
DEATH OF INMATE – SEPTEMBER 21, 2011**

RECOMMENDATION	RESPONSE			
	ACTION TAKEN	ACTION PLANNED	TIME FRAME	RESP.
<p>3. To Sentry Correctional Health Services Inc. and B.C. Corrections</p> <p>Routine emergency mock situations are practiced and discussed on a three month basis consistently.</p>	<p>Health care managers have been instructed to ensure mock emergency situations are practiced with all staff on a regular basis at least every three months. These mock situations are tracked and recorded by the Sentry Quality Assurance Manager.</p>		<p>Completed</p>	
<p>4. To B.C. Corrections and B.C. Sheriffs</p> <p>To implement 10 minute time checks on prisoners that have had notations that there are medical concerns.</p>	<p>Adult Custody Policy requires correctional staff to continually conduct visual checks of all inmates that identifies activities or conditions that may compromise the safety and health of inmates.</p> <p>Adult Custody Policy directs staff to conduct 15 minute checks on inmates with medical concerns. Correctional staff are trained to meet this policy requirement.</p>		<p>Completed</p>	
<p>5. To B.C. Corrections and Sentry Correctional Health Services Inc.</p> <p>If prisoners are leaving the correctional facility, but are still in custody of the RCMP or B.C. Sheriffs, they are re checked by a health care professional when returning to the facility.</p>	<p>B.C. Corrections Branch statistical information indicates that on an annual basis the number of inmates returning from court is significantly greater than the number of admissions. These inmates are escorted by B.C. Sheriff Service officers.</p> <p>The branch could not manage a screening of all inmates returning to the centres from court without a substantial increase in staffing resources.</p> <p>Any unusual behaviour or condition brought to the attention of, or noted by, correctional staff upon admitting a returning inmate would</p>		<p>Completed</p>	

**PRINCE GEORGE REGIONAL CORRECTIONAL CENTRE
DEATH OF INMATE – SEPTEMBER 21, 2011**

RECOMMENDATION	RESPONSE			
	ACTION TAKEN	ACTION PLANNED	TIME FRAME	RESP.
	precipitate a check by a health care professional.			
6. To B.C. Corrections/ B.C. Sheriffs/ RCMP Continue to work on a information sharing system that shares pertinent information	A working group comprised of representatives from B.C. Corrections, Sheriff Services and RCMP "E" Division has been established to review the information sharing process between the agencies, and use of the VISEN Plus behavioural coding system, to identify and action recommended enhancements.		Ongoing	
7. To B.C. Corrections and RCMP "E" Division Information posters on the danger of drug packing are made and placed in high visibility areas, both in RCMP cell blocks as well as in Correctional Centers. The posters are to be made in such a way that anyone can understand, including illiterate and non English speaking people.	The B.C. Corrections Branch has developed a poster which is placed in intake and health care areas in all correctional centres to advise inmates of the risks of packing drugs. These utilize plain language and include clearly understood graphics.		Completed	