



TRANSIT POLICE

DRUGS

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POLICY

All drugs coming into the possession of the Transit Police personnel for evidentiary purposes or for destruction will be handled in a professional and ethical manner that maintains the requirements of continuity of evidence, and is consistent with the *Controlled Drugs and Substances Act*, *Criminal Code*, *Workers Compensation Act*, and the law.

Definitions

Chief Officer – The Transit Police Chief Officer or delegate.

CDSA – *Controlled Drugs and Substances Act* (SC 1996, c. 19) and regulations, as amended from time to time; this includes the *CDSA (Police Enforcement) Regulation*, (SOR/97-234).

Chemical offence-related property (“chemical ORP”) – Pursuant to the *CDSA*, offence-related property that is a chemical or precursor and includes anything that contains such property or has such property on it.

Contaminated Syringe – A syringe or hypodermic needle that is not contained in sealed factory packing.

Controlled Substance (“drug”) – Any substance included in Schedule I, II, III, IV or V of the *CDSA*. A Controlled Substance also includes: any synthetic or natural forms of a listed substance; any substance that contains a Controlled Substance; and, anything that has on it a controlled substance and is used/intended/designed to either (i) produce the substance, or (ii) to introduce it into a human body.

Criminal Code – *Criminal Code of Canada* [RSC 1985, c. C-46], as amended from time to time.

Designated Constables – The Transit Police police officers appointed by the Police Board.

Drug Exhibit – Any seized controlled drug or substance or prescription drug, anything suspected of being a controlled drug or substance or prescription drug, or anything believed to be contaminated by a controlled drug or substance or prescription drug (e.g., containers, spoons, money or syringes).

Exhibit Custodian – The Transit Police Personnel designated by position to maintain property control for the Transit Police.

Form 5.2 – A federal Form 5.2 Report to a Justice to document seizures under the *Criminal Code* - Section 489.1. This section requires that where a peace officer seizes anything during the execution of their duties where either ownership is in dispute or the continued detention of the thing seized is required for the purposes of any investigation or court proceedings, the peace officer will report the items seized to a justice by way of Form 5.2.

HCSC 2018 Form (“HCSC 2018”) – The Health Canada Drug Offence and Disposition Report form for police reporting of seizure and disposition of controlled substances, precursors and chemical offence-related property (replaced HC 3515 form on July 16, 2018). [Refer to Transit Police forms [OZ0770A](#) and [OZ0770B](#) respectively for the HCSC Drug Seizure and Disposition Form and associated Reporting Guide.]

HCSC Envelope – A serial numbered envelope provided by Health Canada for the purpose of processing a drug exhibit for analysis.

Member – Designated Constable (all ranks), the Chief Officer or a Deputy Chief Officer of the Transit Police.

Metro Vancouver Transit Police (“Transit Police”) – The operating name for the South Coast British Columbia Transportation Authority Police Service.

Precursor – Any substance included in Schedule VI of the *CDSA*.

Transit Police Personnel – The Designated Constables and civilian staff who work for the Transit Police.

Authority

1. Federal and Provincial statutes authorize police officers to seize evidence/property in prescribed circumstances, based on reasonable and probable grounds. Members will document on PRIME their grounds and authorities for seizing or taking possession of any evidence.

General

2. Transit Police Personnel will safely and accurately process all drug exhibits in accordance with Transit Police policy, *CDSA* and the law, and Health Canada guidelines on the “Reporting of seizure and disposition of controlled substances, precursors, and chemical-offence related property.”
 - (1) When conducting drug investigations, Members will also follow provisions of Transit Police policies: [OD080 – Arrests](#), [OD120 – Search](#), [OD130 – Seizure](#), and [OD170 – Police Warnings](#).
3. Accidental drug exposures to Transit Police Personnel may occur during the course of their duties when conducting an arrest, searching an individual, a vehicle or

scene for drug related offences, administering first aid to overdose victims, or processing/handling of evidence. Transit Police Personnel will wear issue protective equipment and take safety measures in accordance with training and policy.

4. Members will conduct a risk assessment during the course of any *CDSA* investigation, or any other investigation that results in suspected drugs being located. Members are reminded to be vigilant to the threat of highly toxic substances (e.g., fentanyl, fentanyl analogs, or other potent synthetic opioids) that may be present in other drug commodities, such as heroin, tablets, cocaine, and methamphetamine. The risk/threat assessment is to be continuous and as additional information becomes known, modification to safe response and appropriate protection equipment may be needed to mitigate the risks and to ensure the safety of Transit Police Personnel and the public.
 - (1) Safe response considerations will also include whether there is a need to: establish a cordoned off area; limit the number of Members in proximity; and/or call for the attendance of a hazmat team.
5. Members will NOT transport any hazardous chemical at any time. Only a disposal firm qualified in the handling of hazardous chemicals may transport and dispose of a hazardous chemical exhibit.

[See also Transit Police policies: [OF020 – Exhibit/Property Control](#), [OB110 – Clandestine Laboratories](#), and [Transit Police – JPD Operational MOU](#)]

6. The Exhibit Custodian will be responsible for arranging disposal/destruction of drug exhibits that are no longer required by law, in accordance with Health Canada guidelines.

Sudden Death Incidents

7. Where prescription medication is found at the scene of any sudden death, the prescription medication will be treated as an exhibit, in accordance with policy. The prescription medication is not to be moved or seized by Members prior to the arrival of the Coroner or without instruction from the Coroner. The Coroners Service will provide the Transit Police with instructions for the disposition of the seized prescription medicine.
8. When drugs, other than prescribed medication, are found at the scene of a sudden death, Members will handle as drug exhibits in accordance with this policy.

[Refer to Transit Police policy: [OB080 – Sudden Death](#)]

PROCEDURES

Personal Safety

9. Transit Police Personnel will follow safe handling procedures when conducting drug investigations and processing drug related exhibits, in accordance with training and

policy. Transit Police Personnel are to consult with their Supervisor if unsure of appropriate personal protective equipment to use and safe handling of a substance/drug.

10. When conducting drug investigations, Members must not taste or smell any suspected drug (whether it is a powder, tablet, capsule, liquid or other form) and Members should avoid touching their eyes, nose and mouth.

NOTE: Some chemical drugs that are in use can be absorbed through the skin in sufficient quantity to cause a partial, if not total, reaction to the drug.

11. Members will not conduct presumptive field tests for drugs due to the risk of exposure to potentially highly toxic substances.
12. Members will carry issue nitrile gloves as part of their uniform equipment when performing operational duties. Protective gloves are to always be worn by Members (doubled layered where possible) when handling drug or drug contaminated exhibits, and issue face masks must be worn when handling unknown substances. (This includes any heat sealed packages of money or double heat sealed packages.)
 - (1) For suspected opioid related drug investigations, Transit Police Personnel will wear protection equipment that includes full sleeve or long sleeve shirt or jacket, nitrile gloves, eye protection and mask. (Caution is to be used where there is a risk of exposure to fentanyl, carfentanyl, or the W18 compounds, due to their high potency and the risk of permucosal exposure.)
 - a. This includes properly disposing of any items exposed to opioids by placing them in hazardous material bags or disposal containers.
 - b. The disposable gloves can be placed in the sharps containers (considered medical waste) located in various places within Transit Police facilities.

[Refer also to Transit Police policy: [OG050 - Opioid Overdose and Use of Naloxone](#)]

13. When Transit Police Personnel are processing an exhibit which may contain highly toxic substances, it should be completed with another staff person present. If a second staff person is not available, a Supervisor is to be informed and applicable safety protocols (e.g., check-ins, emergency buttons) followed. Naloxone is to be carried by or available to the Transit Police Personnel when in the exhibit processing area.
14. In the event of possible contamination during seizing/processing, the involved Transit Police Personnel will:
 - (1) Immediately advise another staff person present and/or Supervisor;
 - (2) If the contaminant is on a piece of clothing, immediately remove the clothing, if possible, or rinse with water to prevent further contamination;

- (3) In the event the substance has come in contact with skin, rinse thoroughly with soap and water for at least 15 minutes; and
- (4) If any noticeable drug/opioid exposure symptoms are present, inform another staff person present and have them request BC Ambulance attendance. Where trained Transit Police Personnel are present, they will apply first aid and administer Naloxone as appropriate to the incident, pending BC Ambulance arrival.
 - a. Transit Police Personnel will follow the injury reporting process and requirements as set forth in [Transit Police SOP53 – Injuries in the Workplace](#) and, if applicable, OG050 – Opioid Overdose and Use of Naloxone.

Coordination with Jurisdictional Police

15. If a Member involved in a drug-related investigation locates a significant quantity of drugs or possibly toxic substances and/or hazardous chemicals are involved, they must notify their Supervisor immediately. The Supervisor will notify the Watch Commander, who will promptly consult with the Jurisdictional Police and subject matter experts.

Drug Exhibit Management

16. At the onset of a drug investigation/seizure involving more than one Member, one Member will be designated as the field Exhibit Officer for that investigation and will be responsible for the seizure, continuity and processing of all associated exhibits.
17. It is recommended for large drug investigations, that an exhibit flow chart ([TP Form OZ100](#)) be utilized when a large volume of exhibits are expected to be seized. The flow chart will assist the assigned field Exhibit Officer in ensuring thorough and accurate recording of the seized items as well as testimony in court regarding the tracking of the exhibits.
18. At the time of any drug/property seizure, the following information will be recorded on an exhibit flow chart or notebook by the Member or the assigned field Exhibit Officer:
 - (1) Clear description of the exhibit;
 - (2) Precise location of the exhibit;
 - (3) Name of Member locating the exhibit, date and time of location;
 - (4) Name of Member seizing the exhibit, date and time of seizure;
 - (5) Disposition of the exhibit;
 - (6) Condition of the exhibit; and

- (7) Movement of the exhibit from seizure to disposition.
19. The weight of any drug(s) seized and HCSC Envelope number (if applicable) may be recorded later.
20. An exhibit will be kept in the direct positive control of the investigating Member to maintain continuity until it is submitted to Exhibits.

Forensic Identification Services ("FIS")

21. Members will consider whether there is a need to provide further evidence to link drugs to a person and, if required, then request attendance of the JPD's FIS to take prints from drug containers and equipment. (E.g., when drugs are on the person, this may not necessarily be needed; however, if the drugs are in a vehicle which is not registered to the driver, then such an investigative step may be valuable.)

[See also Transit Police policy: [OF020 – Exhibit / Property Control](#)]

Exhibit Processing and Analysis

22. Members will utilize the PRIME Property sub-system when exhibits are seized. The Member seizing the items will enter each exhibit into the Property Report, ensuring that all property is itemized.
23. To process for Exhibits, Members will follow the guidelines below, and complete and affix the exhibit tag.
 - (1) Members will keep drug exhibits in separate exhibit envelopes or bags to prevent possible contamination.
 - (2) If any capsules are found inside a container, the container will be opened and the contents weighed. Avoid handling the capsules with your hands.
 - (3) When a liquid is seized as an exhibit, the container will be sealed immediately to prevent possible contamination and/or evaporation. (Sealable containers are available in the exhibit processing area.)
 - (4) Needles should only be seized when absolutely necessary (e.g., when they contain a substantial amount of a drug or are required for charges or investigations). Members will place all other needles in the BIOHAZARD containers located in Transit Police facilities and sub-offices.

NOTE: When single needles are seized for exhibit, needle containers are available in the exhibit processing area.

- (5) When a large quantity of drugs is seized, only a sample from each item is required to be sent for analysis. When this is the case, only the sample has to be treated as the exhibit for analysis, the remainder may be handled as a bulk exhibit (placed in tamperproof packaging) and secured in the Exhibit Room.

- (6) Each drug exhibit will be weighed in metric (total weight prior to taking of any sample) using the scales available in the Exhibit Room, and the amounts recorded on the Property Report on PRIME.
 - (7) When a sample is removed from a larger item, the sample must be a separate entry in the Property Report.
 - (8) When “drug flaps,” “baggies” or “spitballs” are seized, the exhibits may be weighed with the packaging intact.
 - a. If the packaging is removed during weighing, the scale will be cleaned after each exhibit is weighed to avoid cross-contamination of the exhibits.
 - b. The presence or absence of packaging when weighed is to be noted by the member in the report, as this information will assist the assigned expert in preparation for trial.
 - (9) Any unidentified substance must be tagged with a biohazard sticker for the purposes of alerting the Exhibit Custodian.
24. If charges are being recommended and drug analysis required, Members will follow the Drug Analysis Service Laboratory guidelines for Drug Submission Envelope – Sampling and Contents.
- (1) Only one certificate is issued per drug submission envelope; therefore each envelope must contain only one type of sample. A suitable exhibit consists of a single plastic bag or container containing one of the following:
 - a. Cannabis plant material or resin: 1 to 2 grams;
 - b. Cocaine and other hard drugs: 250 mg (1/4 gram)
 - c. Tablets or capsules: 1 to 5 identical units;
 - d. Ampoule or sealed vial: 1 to 5 units or 1 ml;
 - e. Liquids: 1 to 5 ml;
 - f. Dry mushrooms: 1 to 5 grams
 - g. LSD: 10 units (doses, blotters, tablets);
 - h. Residue on pipe, spoon, syringe, etc.: 1 (single) unit.

NOTE: If less material is available, the entire amount should be submitted. If more material is available, the excess is to be entered into Exhibits.

- (2) Solution to potential problems:
 - a. When submitting syringes or biohazardous materials:
 - i. Mark the outside of the envelope with the word SYRINGE or BIOHAZARD; and
 - ii. Put a syringe in a plastic tube with stoppers at both ends or in another suitable protective container to prevent the object from penetrating the envelope and causing an injury.

- b. Avoid placing ink identification markings or sticky tape directly on the exhibit to be analyzed. The ink or glue may interfere with the analysis. This applies to "LSD" blotters, tablets, etc.
- c. Wet or fresh Cannabis is to be wrapped in paper towels and placed in a paper envelope, rather than sealing in a zip lock bag (to prevent mold or mildew that will destroy the evidence).

Heroin and Cocaine Seizures

25. All heroin seizures of 28 grams or more and all cocaine seizures of 150 grams or more must be analyzed quantitatively and bags initialed by the investigating Member and Supervisor or designate.
26. The bags must be sealed in a way that they cannot be opened and resealed without it being obvious.

NOTE: The clear tamperproof bag that allows viewing of the seizure should not have to be opened even for court presentation. Providing the investigating Member has properly initialed the seized article, persons who subsequently place identifying marks on a storage bag, for control purposes, should not be required to attend court to prove continuity of possession.

Evidence Continuity

27. Any drug exhibit requiring analysis will need to be secured in a sealed and labelled HCSC Envelope by the Member. The Member will:
 - (1) Double bag the drug exhibits needing analysis in the supplied plastic bags and then place the bag inside the HCSC Envelope; and
 - (2) Attach the PRIME property label to the HSCS Envelope (similar to any other exhibit) and then seal the HCSC Envelope.
28. The Member will deposit the properly completed HCSC Envelope in the Pass-Through Exhibit Locker. (This will ensure that the envelope is not accessible to anyone other than the Exhibit Custodian.) The Member will record in their notebook the time and date that they placed the exhibit in the Pass-Through Exhibit Locker.
29. The Exhibit Custodian will place all exhibits into the main exhibits area, and track all exhibit movement on PRIME.
30. When the Exhibit Custodian receives an exhibit back from Health Canada analysis, they will retain possession of the exhibit along with the original Certificate of Analysis. The Exhibit Custodian will provide a copy of the Certificate of Analysis to Court Liaison, who will update the PRIME file accordingly, and then forward to Crown for disclosure purposes.

Investigation Report

31. Members' actions and details of the drugs and their seizure must be clearly articulated in the narrative in the General Occurrence ("GO") report on PRIME.
32. Members must ensure that all exhibits are entered in the GO's Property Report.
33. A Form 5.2 will be submitted for all drug exhibits and seizures.
34. All reports regarding drugs will be completed prior to the end of a Member's shift, unless authorized by a Supervisor.

Report to Crown Counsel ("RTCC")

35. When charges are contemplated, the Member will complete on PRIME a RTCC, including the following information:
 - (1) Date, time and location of the offence;
 - (2) Drug type, quantity/weight, and packaging;
 - (3) Complete circumstances, including any conversations;
 - (4) Complete description of the accused, including clothing worn;
 - (5) Other pertinent information, such as needle marks, drug paraphernalia etc.;
 - (6) Narrative/articulation of the search and seizure;
 - (7) Photocopy of the Form 5.2; and
 - (8) Photocopy of the HCSC Envelope.
 - a. When processing the submitted drug exhibit, the Exhibit Custodian will make a photocopy of the front of the HCSC Envelope and post to the "Drug Exhibit" designated folder on the "O" Drive.
 - b. Court Liaison will retrieve the electronic copy of the HCSC Envelope from that folder and attach it to the RTCC, as well as adding the PRIME exhibit flow chart.
36. Once approved by the Watch Commander, the RTCC will be forwarded via PRIME to Court Liaison for processing. (Court Liaison will arrange for any needed drug analysis and Drug Expert reports; see ss. 39 to 43 of this policy.)

Reporting Form to Health Canada

37. The Exhibit Custodian will be responsible for completing the online HCSC 2018 through the Property Report on PRIME, and they will advise Court Liaison when it is ready to submit to Crown, if required.

38. Court Liaison will be responsible for ensuring that the completed HCSC 2018 is added to the attachment list of any RTCC. When the file involves an in-custody RTCC, Crown will accept the HCSC 2018 as a supplement, once it is completed by the Exhibit Custodian.

Drug Experts (“Expert”)

39. An expert and/or expert report will be required for court in order for Crown to proceed with ‘Possession for the Purpose of Trafficking’ charges. To assist, several details must be included in the Member’s RTCC, including but not limited to the following:
- (1) Articulation of search and seizure;
 - (2) Packaging of drugs (flaps, spitballs, tinfoil);
 - (3) Coding of drug packaging (by colour, type of paper etc.) to indicate drug type, weight etc.;
 - (4) Weight of seized drugs;
 - (5) Location of money and denominations;
 - (6) Score sheets/ledgers;
 - (7) Presence of cellular phones/pagers;
 - (8) Incoming phone calls to seized cellular phones (pursuant to warrant search);
 - (9) Presence of weapons;
 - (10) Drug paraphernalia; and
 - (11) Pertinent conversation.
40. Court Liaison will make the arrangements to acquire Jurisdictional Police expert assistance, in accordance with the operational Memorandum of Understanding (“MOU”) between the Transit Police and Jurisdictional Police. Any exception to the MOU will be as determined by the Deputy Chief Officer Operations (i.e., no Jurisdictional Police expert resource is available).
41. The expert will make their assessment on the review of the General Occurrence Report, associated documentation, video and any other evidence acquired.
42. The expert will be required to forward a written report to Court Liaison who will promptly submit to Crown.

Non-chemical Offence-Related Property – Drug Investigations

43. The Transit Police will seek advice from the Seized Property Management Directorate (“SPMD”) on non-chemical offence related property (e.g., vehicles, South Coast British Columbia Transportation Authority Police Service – Policies and Procedures Manual




jewelry, bonds, computer, furniture, cash, and real estate) prior to seizure. An enquiry and application to the SPMD will be handled through the investigating Member's Supervisor.

NOTE:



Destruction/Disposition of Drug Exhibits

44. The Exhibit Custodian will arrange for disposal of drug exhibits that are no longer required, pursuant to Health Canada guidelines. The following procedures will be followed (any exceptions will require authorization of the Deputy Chief Officer Administrative Support):

- (1) Two Exhibit Custodians must be present during the processing/securing of all drug/drug paraphernalia exhibits for destruction, until custody transferred for incineration;
- (2) The file number and exhibits will be verified against the HCSC 2018;
- (3) ;
- (4) 
- (5) 
- (6) The exhibit database will be promptly updated to reflect the disposal of the exhibits and date of occurrence; and
- (7) Within 30 days, the Exhibit Custodian will email Health Canada and report the incineration, via the HCSC 2018.

45. If the exhibit is heroin weighing 28 grams or more, or cocaine weighing 150 grams or more, prior to disposal the Watch Commander (or designate) of the investigating Member will:

- (1) Determine whether the tamperproof bag containing the exhibit has been opened;
- (2) If the tamperproof bag has been opened, have a sample of the drug submitted for quantitative analysis to the same analyst who performed the initial examination;

- (3) Reseal the remainder of the exhibit and retain;
 - (4) When the results of the quantitative analysis are received, compare them with the original analysis; and
 - (5) Authorize proceeding with destruction if satisfied that it has not been tampered with, otherwise commence an immediate investigation.
46. Pursuant to Health Canada guidelines, if a seized, found or otherwise controlled substance is no longer required for court purposes under the *CDSA* or any other Act of Parliament, instead of disposing of it, the Chief Officer (or delegate) may submit a request to Health Canada providing the purpose (e.g., training, undercover operations, etc.), name of the substance, quantity and GO number of the seized substance.

References:

Controlled Drugs and Substances Act (SC 1996, c. 19)
Controlled Drugs and Substances Act (Police Enforcement) Regulations (SOR/97-234)
Health Canada Guidance Document – Reporting Seizure and Disposition of Controlled Substances, Precursors and Chemical-Offence Related Property [2018-04-01]
Drug Analysis Lab – Customer Service Manual (2016)
Cannabis Control and Licensing Act (SBC 2018, c. 29)