

TRANSIT POLICE



PRISONER CARE, CONTROL AND TRANSPORTATION

Effective Date: May 9, 2005
Revised Date: May 26, 2011; February 22, 2013; February 10, 2023
Reviewed Date:
Review Frequency: 2 Years
Office of Primary Responsibility: Inspector Patrol Section

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POLICY

Definitions

BCAS – BC Ambulance Service.

BCPPS – British Columbia Provincial Policing Standards.

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Delirium – “Delirium is a serious change in mental abilities. It results in confused thinking and a lack of awareness of someone's surroundings. The disorder usually comes on fast — within hours or a few days. Delirium can often be traced to one or more factors. Factors may include a severe or long illness or an imbalance in the body, such as low sodium. The disorder also may be caused by certain medicines, infection, surgery, or alcohol or drug use or withdrawal.”² (Refer to [Delirium - Symptoms and causes - Mayo Clinic](#) for more on symptoms related to reduced awareness of surroundings, poor thinking skills, and behavior and emotional change.)

GO – General Occurrence report in PRIME.

JPD – Jurisdictional Police Department.

Medically Unfit – An ill or injured person and includes questionable consciousness, psychiatric illness and acute alcohol poisoning or drug overdose.

Member – For the purpose of this policy, Designated Constable (all ranks), Deputy Chief Officer, Chief Officer, and Designated Law Enforcement Officer of the Transit Police.

Metro Vancouver Transit Police (“Transit Police”) – The operating name of the South Coast British Columbia Transportation Authority Police Service (Designated Policing Unit and Designated Law Enforcement Unit).

MHA – The *BC Mental Health Act* [RSBC 1996], c. 288, as amended from time to time.

OCC – The Transit Police Operations Communication Centre.

Police Act – The *BC Police Act* [RSBC 1996], c. 367, and the regulations thereto, all as amended from time to time.

Positional Asphyxia – A form of asphyxia that occurs when someone’s body position prevents them from breathing adequately.

Questionable Consciousness – A state of reduced awareness in which a person is not readily responsive.

Qualified Medical Practitioner – A physician or registered nurse. (*Note: BCAS paramedics are not medical practitioners and cannot declare a person fit for incarceration.*)

Restraint – Pursuant to BC Provincial Policing Standards 1.2.3, “any mechanical device or system that when used in its ordinary and intended manner restricts the normal physical activity of range of motion of an individual in part or in whole”.

Supervisor – For the purpose of this policy, any Member assigned the responsibility and the authority to supervise Transit Police Members and civilian professionals.

² [Delirium - Symptoms and causes - Mayo Clinic](#), extracted December 15, 2022.

Authority

1. Transit Police care, control, search and transport of persons in custody will be conducted in accordance with the *Criminal Code*, federal and provincial statutes, relevant case law, BC Provincial Policing Standards and directives, and Transit Police policies.
 - (1) The application of this policy to Designated Law Enforcement Officers at the Transit Police is subject to their function as a 'Peace Officer' and any restrictions within their peace officer appointment and as so determined by the Chief Officer.

General

2. Members are responsible for the safety and well-being of persons in their custody as well as for the safety of the Members and others when transporting and booking persons at a detention facility.
3. Members will ensure that all transportation of persons in custody is done in a timely manner. Unless exigent circumstances exist, when transporting a person, Members will not divert to a new or different task – the transportation task must take priority. (See s. 26 for exigent circumstances.)
4. The Transit Police will provide for the special handling of prisoners who are young persons, of the opposite sex of the assigned Member, mentally or physically disabled, violent or self-destructive, sick or injured, or transgender. [Refer to Transit Police **SOP88 – Interactions with Transgender Persons** for considerations.]
5. Prisoners will be searched subsequent to arrest and every time they are transferred to the custody of another Member or police agency.
6. Once arrested and in custody, prisoners will be supervised by Members, the detention facility personnel or appropriate Qualified Medical Practitioners.

PROCEDURES

[Refer also to Transit Police policy chapters [OD120 – Search](#), [OD170 – Police Warnings](#), [OD080 – Arrests](#), [OH020 – Use of Force](#), [OG040 – Communicable Diseases](#), [SOP53 – Injuries in the Workplace](#), [OD040 – Notebooks](#), [OF010 – Evidence](#), [OF020 – Exhibits/Property](#) and [OH080 – Restraints](#), [OH070 – Independent Investigations Office](#)]

Handcuffing and Restraints

7. Incident to lawful arrest and prior to subsequent transport of a prisoner, Members will take physical custody of the person, which may include handcuffing when warranted.
8. Members must be able to articulate the specific circumstance necessitating the use of restraints on a person (making appropriate notes). Members are to refer to

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Transit Police policy chapter [OH080 – Restraints](#) regarding the relevant considerations and parameters for use and application of different types of restraints, and safety provisions (including monitoring for safety and seeking first aid for persons who show signs of injury or medical distress).

9. To ensure the safety of prisoners, Members and the public, it may be appropriate in certain circumstances for Members to, temporarily, handcuff a person to fixed objects (such as hand/foot railings in light rail stations). Under no circumstances will a person be handcuffed to a movable object or the exterior of a vehicle. Persons handcuffed to a fixed object will remain under observation of the Members unless exigent circumstances exist. Members will not arbitrarily handcuff persons to fixed objects as a matter of routine procedure.
10. Prisoners will not be handcuffed to each other.
11. To avoid positional asphyxia, prisoners are to be transported in an upright, seated position, whenever possible, particularly if the person is obese or under the influence of drugs and/or alcohol, and in situations where prone restraints (hand and feet) are necessary. Members will closely, and continuously, monitor the prisoner.
12. If the prisoner is acting contrary to public order or causing a disturbance, putting themselves, Members or the public at risk, (e.g., screaming, swearing, kicking or spitting), then it is the responsibility of the Member to consider moving that person to an area that minimizes contact with the public. For the sake of transparency and accountability, Members will consider conducting their investigation in view of a video recording camera, when practicable.

Spit Hoods

13. Members may only apply the spit hood to arrested persons who are already handcuffed and in situations where there is reasonable risk to the Members or others of being spat on. A Member's application of a spit hood to a prisoner will be in accordance with the requirements set out in Transit Police policy chapter [OH080 – Restraints](#). This includes the safety components and the continuous monitoring provisions specific to spit hood use on persons.

Search of Prisoners

14. Members will thoroughly search all prisoners in their custody, regardless of whether they have already been searched by another Member or not, and document in their notebook.
15. Members who conduct a search will take appropriate precautions to protect themselves (e.g., wearing protective gloves, glasses, face mask). Any Member who suffers a puncture wound or comes into contact with bodily fluids from a person suspected to be in a high risk category will follow procedures as set out in Transit Police policy chapter [OG040 – Communicable Diseases](#) and [SOP53 – Injuries in the Workplace](#), and submit a Transit Police Form [AZ0950 – Employee Injury and Investigation Report \(M180A-B\)](#).

NOTE: Members will need to be cautious when handling any drugs found on the person as the potency of some drugs may permit them to be absorbed through the skin or inhaled accidentally. Refer to Transit Police policy chapter [OB100 – Drugs](#) for safe handling instructions.

16. The arresting Member is responsible for searching, recovery of evidence, and cataloguing of all personal property associated to the prisoner prior to turning them over to transport, a detention facility, medical facility or sobering centre. It is the responsibility of the Member who seizes or is safekeeping property of a prisoner to account for that property. Members are required to record their actions in relation to the receipt and transfer/movement of property in their notebook, General Occurrence Report and/or PRIME Property Module, as appropriate. (Members will refer to policy chapters [OF010 – Evidence](#) and [OF020 – Exhibits/Property Control](#) for additional guidelines).
 - (1) Personal effects will be placed in clear plastic bags, with the prisoner's surname and first initial on the bag. All currency will be secured in an envelope (or clear plastic bag if envelope not available), labeled with the amount (quantity and denominations) and the prisoner's surname, and then placed in the larger plastic effects bag, ensuring that it is visible through the bag. The currency amount is to be documented on the detention arrest report. Currency will be counted and witnessed by another Member in accordance with Transit Police policy OF020 – Exhibits/Property Control. Members will also note if there is no currency among the prisoner's effects. Any seizure(s) made from the prisoner's effects will be noted.
 - a. Members are to follow Transit Police policy and procedures, and any specific detention facility requirements for handling and securing of an adult prisoner's personal drugs³ taken for property safekeeping while in the detention facility.
 - (2) When booking a prisoner, Members will follow the JPD detention facility procedures on tagging and handling of a prisoner's personal effects (including any special handling required for personal drugs). Any large/over-sized or dangerous items not accepted by the JPD detention facility will be transferred to the JPD or Transit Police property office for storage.
 - a. Where feasible, Members will use Transit Police [Form OZ0700](#) to record any safe keeping property being transferred to the Transit Police property office and have the prisoner sign (where possible). Members will submit the form to the IMS basket and the IMS section will scan and attach it to the GO.

³ [Exemption from Controlled Drugs and Substances Act: Personal possession of small amounts of certain illegal drugs in British Columbia \(January 31, 2023 to January 31, 2026\) - Canada.ca](#). Effective January 31, 2023, in BC, adults 18 years and older will no longer be arrested or charged for possessing small amounts of certain illegal drugs for personal use. The total amount of drugs must be equal to or less than 2.5 grams. People who use drugs will not have their drugs seized or face fines or administrative penalties. Instead, they will be offered information about voluntary health and social supports. NOTE: The exemption does not apply in certain prescribed locations, e.g., schools, airports or in a motor vehicle.

17. It is the responsibility of the investigating Members to advise any subsequent police officers or JPD detention facility staff of any special instructions (i.e., seizure of clothing, risk of suicide, known medications, medical conditions such as pregnancy, disclosure of any contagious diseases, personal drugs being held for safekeeping, or security concerns).

Police Transport Vehicles

18. Unless exigent circumstances exist, police transport vehicles will be searched by the operating Member before and after transporting prisoners to ensure that the person (and Member) will be safe and that no items were left behind by the person being transported.
19. Unless an exigent circumstance exists, prisoners will be transported in a police vehicle equipped with a security cage. Prisoners will be transported in a manner that allows for constant visual observation with the prisoner placed in the back seat on the passenger side of the vehicle.
20. If the situation dictates that a prisoner is to be transported in a vehicle without a cage, the prisoner will be placed in the rear of the vehicle on the passenger side, with a second Member seated in the rear seat, immediately behind the driver.
 - (1) The Member will contact their Supervisor if transporting a prisoner in a vehicle that is NOT equipped with a security cage.
21. Where there are two or more prisoners from the same incident, they will be transported separately, unless there are separate, secure compartments in the transport vehicle.
22. All prisoners will be handcuffed during transport; however, there may be physical limitations and/or other aggravating health conditions that preclude handcuffing.
23. Seatbelts are to be worn by the Member and the prisoner subject to the following:
 - (1) Member reasonably believes that utilizing the seatbelt would obstruct their performance of duties when transporting the prisoner (refer to Transit Police policy chapter [AG090 – Police Vehicles](#)) or may subject the Member to harm when securing the seatbelt of the prisoner; or
 - (2) Member reasonably believes that utilizing the seatbelt may subject the prisoner to harm.
24. Prisoners who are handcuffed will not be transported in the same compartment of a police transport as prisoners who are not handcuffed.
25. The physical well-being of prisoners will be monitored during transport, with particular attention of those who reported to have or suspected of being under the influence of drugs and/or alcohol, or who have a history of violence.

26. Members will not engage in unrelated enforcement activity while transporting a prisoner unless failure to act would result in death or serious bodily injury to another person. In the event of a non-life threatening but serious situation, Members will request assistance and remain on scene until such assistance has arrived.

JPD Assistance

27. While Transit Police is responsible for transporting prisoners in its custody to the appropriate JPD detention facility, as required, Transit Police may request the assistance of the Jurisdictional Police with prisoner transport.
28. In the event that Transit Police needs to request JPD assistance with prisoner transport, the OCC will contact the JPD communications centre. The attending JPD member and Transit Police Member will exchange relevant particulars concerning the prisoner and CAD will be used to record the related files.

Transporting Prisoners

29. The transporting Member will advise the OCC dispatcher of the intended destination, times of departure and arrival, and the vehicle's odometer reading at the beginning and end of the transport. Where practicable, the dispatcher will record this information on the CAD file. (The Member will record the same information in their notebook; see s. 62.)

- (1) This same protocol is to be applied to circumstances where there was no arrest or the person was released; however, the Member decides that safe transport of a vulnerable person to their home or a place of care is necessary for the person's personal safety (e.g., young person being taken home to their guardian).

30. Persons of the opposite sex will not be transported in the transport vehicle, except if utilizing a transport vehicle with separate compartments.
31. Young persons will not be transported together with adult prisoners in the transport vehicle, except if utilizing transport vehicle with separate compartments. (Refer to Transit Police policy chapter **OD180 – Young Persons** for guidance and considerations arising from the *Youth Criminal Justice Act*.)
32. Transgender persons will be transported separately from other prisoners (in consideration of personal safety and to prevent possible harassment or harm). In exigent circumstances where this is not possible, the Member may transport the person with another prisoner, in accordance to the transgender person's stated gender preference.

Persons with Physical Disabilities

33. Any wheelchairs, crutches, prosthetic devices, and medications should be transported with, but not necessarily in the possession of, the prisoner. If the medical equipment is unable to be transported inside the same vehicle as the

prisoner then the Member must make arrangements to have the medical equipment delivered.

34. In the circumstance where a Member must transport a physically disabled person, they will be transported in the same manner as any other prisoner, unless the person's disability is of a nature that transportation by police vehicle would be impractical or cause undue discomfort and/or injury to the person, or would cause physical injury to the Member while attempting to manoeuvre the person into the police vehicle. Under those circumstances, the transporting Member will consult with a Supervisor regarding alternate transport, such as BCAS, Handy Dart, or an appropriately equipped taxi.
35. Regardless of the form of transport selected, a Member must accompany the prisoner in the vehicle, with a second Member following in a police vehicle.

Persons in Mental Health Crisis

36. When a Member apprehends a person in apparent mental health crisis, the person is to be transported by BCAS or, in exigent circumstances, by the Members after consultation with their Supervisor, if this can be done safely having assessed the needs of the apprehended person. If BCAS conducts the transport, a Member will be sent with BCAS to provide security for both the paramedics and the apprehended person. (For additional guidelines, refer to Transit Police [SOP02 – Emotionally Disturbed Persons](#).)

Special Needs Persons

36. Members may be required to restrain special needs persons. Consideration is to be given to the potential impact that the restraint may create to the circumstances. However, when circumstances warrant it, the persons will be restrained in a manner similar to any other prisoner. Otherwise, common sense and good judgement should be the guide for the method and type of restraint.

Sick or Injured Prisoners

37. Members will be guided by BCAS personnel, when present, regarding appropriate medical treatment for the prisoner.
38. The prisoner will be restrained consistent with Transit Police policy chapter OH080 – Restraints, unless such restraint would interfere with essential medical treatment.
39. Prisoners who are sick, injured, or displaying signs of a possible medical condition (such as Delirium) or Questionable Consciousness are to have an initial assessment from BCAS to assess if they need to have treatment. Those prisoners who are considered competent and accept the advice of BCAS that they should seek treatment from a medical doctor, will be transported to hospital by BCAS.

*NOTE: Refer to **Refusal of Care** for handling of prisoners who refuse care.*

40. Members will provide BCAS and Qualified Medical Practitioners with all the relevant available information concerning the condition and circumstances of the person in custody prior to and during custody.
41. Any time a prisoner has been attended to/received treatment by BCAS, Members will advise the detention facility staff that BCAS has assisted in the assessment of the prisoner and provide any known history on the prisoner, including if the prisoner:
- (1) Suffers from any illness or any injury, known or suspected, whether prior to or as a result of contact with police;
 - (2) Was placed in a vascular neck restraint;
 - (3) Is a known drug user or has taken any substance, object of contraband that may cause harm to themselves;
 - (4) Requires, or is presently, on medication;
 - (5) Has received medical treatment or refused such treatment from the BCAS;
 - (6) Has a medical information bracelet, including the information contained;
 - (7) Has a history of mental illness or suicide attempts or suicidal ideations;
 - (8) Was placed in a spit mask;
 - (9) Has had intermediate weapons deployed on them (i.e., Baton, Oleoresin Capsicum Spray, Conducted Energy Weapon or Extended Range Impact Weapon); or
 - (10) Has a history of being a security or escape risk.

NOTE: Certain detention facilities (e.g., Surrey) may have mandatory requirement for a sick or injured prisoner to be medically cleared by a Physician at hospital, prior to transport to the facility for incarceration.

42. Prisoners requiring medical aid will be transported via BCAS with an accompanying police officer, unless there is a security risk that would prohibit transport in this manner. In exigent circumstances, Transit Police may transport the prisoner, after consultation with their Supervisor.
43. All prisoners transported to hospital will remain under constant guard during the transportation and throughout the duration of the stay at the facility unless released from police custody or until a JPD Member, Sheriff's Deputy or a Provincial or Federal Corrections guard relieves the Member (or, for example, the person is transferred to responsibility of a Qualified Medical Practitioner in a s. 28 apprehension or Form 21 arrest under the *MHA*).

44. When a prisoner is taken from hospital to a detention facility, the Member will provide a copy of the hospital medical treatment and/or release form to the detention facility staff.
45. In some cases, Members will arrest persons who require medical treatment and cannot be transported to a detention facility. In consultation with a Supervisor, Members will consider a bail hearing in the hospital, where appropriate, so that Members are not obligated to guard the prisoner. When considering this option, the safety of the prisoner, hospital staff and general public will be the primary concern.
46. The primary responsibility for addressing the medical needs of a prisoner lies with the agency having custody of the prisoner when the medical condition is reported or detected. A Supervisor will not authorize the release or transport of any prisoner requiring medical treatment to another agency without first obtaining verification from the receiving agency that they are aware of the condition and are still willing to accept the prisoner. That verification will be documented by the Supervisor.
47. In all cases where an injury to the prisoner may have been sustained during an interaction with the Member (including during arrest) or in transport, the Member will make an assessment and determine if the person requires first aid, assessment by BCAS, and/or taken to hospital, All such incidents must be reported and documented in accordance with this policy.
48. A police vehicle used to transport a person that becomes contaminated by any bodily fluids (i.e., saliva, blood, feces, urine or vomit) will be withdrawn from use until the authorized contractor attends to decontaminate the vehicle.

Refusal of Medical Care

49. Members must ensure that a prisoner who refuses medical treatment has the capacity to make a rational decision to refuse medical treatment. In assessing whether a person in custody is capable of making a rational decision regarding the need for medical treatment, Members must record in their notebook their personal observations as appropriate in the circumstances and make record of the refusal (where practicable, have the refusal witnessed). *NOTE: This section will not apply if the receiving detention facility has a mandatory requirement that a sick or injured person be medically cleared, such as Surrey.*
50. If a person in custody who is Medically Unfit refuses medical care but is not capable of making a rational decision regarding the need for medical care, Members must make a decision on behalf of the person in custody. Members exercising their authority may use force when justified by s. 25 of the *Criminal Code* and the *MHA*.

Communicable Diseases and Insect Contamination

51. Members interacting with prisoners with a communicable disease, virus or infection, or if exposed to insect contamination, will take precautions to protect their health and safety. (Refer to Transit Police policy chapter [OG040 – Communicable Diseases](#) and [SOP66 – Bedbugs and Insect Contamination](#)).

52. Members with any concerns as to the type of disease, virus or infection carried by a prisoner must consider the prisoner to be in need of medical care. Members will transport the prisoner to a hospital or request BCAS.
53. Any Member exposed to a communicable disease/insect contamination must report the exposure to a Supervisor and submit a WorkSafeBC Injury form ([TP Form AZ050](#)).
54. A police vehicle used to transport a person who is, or is suspected of having, a communicable disease/insect contamination will be withdrawn from use until the authorized contractor attends to decontaminate the vehicle. (Members will refer to Transit Police policy chapter OG040 – Communicable Diseases for additional guidelines).

Reportable Injury and Death

55. Any time a person is injured or dies during the course of their arrest or transport, that injury/death must be reported by the Member to a Supervisor and the Watch Commander, and the required reports completed. The Watch Commander will inform the Duty Officer and Transit Police Professional Standards Unit, who will ensure that the appropriate notifications are made to the Office of the Police Complaints Commissioner and Independent Investigations Office, pursuant to the *Police Act*. Members will refer to Transit Police policy chapters [AC140 – Complaints](#) and [OH070 – Independent Investigation Office](#) for specific reporting parameters/requirements.

Detention Facility Protocols

56. Members will familiarize themselves with and exercise the individual practices and operating procedures of the various JPD detention facilities, in order to ensure that the Transit Police complies with the JPD policy. When unsure of protocols, Members will seek direction of the JPD Supervisor of the detention facility.

Transportation to Court

57. Prisoner transportation to court will be the responsibility of the JPD and the BC Sheriff Services. However, there may be occasions where a JPD will request the Transit Police to transport a person arrested on a warrant directly to court. In this case, the Transit Police will transport the prisoner to the appropriate court and turn the prisoner over to the BC Sheriff Services.

Prisoner Escape

58. Any escape will be immediately reported by the Member to the OCC Dispatcher and a Supervisor, including a description of the fugitive, mode and direction or travel, original offence and propensity for violence, if known.
 - (1) Resources such as the Lower Mainland Integrated Police Dog Services and Air One are to be requested, as applicable, and as directed by the Supervisor.

- (2) When the fugitive is not immediately captured, the OCC is to notify the JPD and, if necessary, in consultation with the Watch Commander, request assistance from the JPD.

Officer Documentation

59. Members must be able to articulate in each circumstance their reasons in applying any restraint device to a prisoner. Members will record the use of handcuffs (and any other restraints) to restrain a person in a GO and in their notebook.
60. Pre-existing injuries (e.g., bruising or lacerations) or medical conditions of the prisoner will be documented in the Member's notebook, on the booking sheet, in the GO, and reported to a Supervisor.
61. Members will make an entry in their notebook regarding any conversations with BCAS and Qualified Medical Practitioners pertaining to the prisoner's well-being and care.
62. Members will make an entry in their notebook regarding police transport vehicles being searched before and after transporting prisoners. Members will record in their notebook information about each transport, including intended destination, times of departure and arrival, and the vehicle's odometer reading at the beginning and end of the transport.

Key References

BC Mental Health Act [RSBC 1996], c. 288
BC Police Act [RSBC 1996], c. 367
BC Provincial Policing Standards
Canadian Charter of Rights and Freedoms [1982]
Criminal Code of Canada [RSC 1985, c. C-46]