# **MINUTES**

# **Mental Health Policing Working Group**

Thursday, May 5<sup>th</sup>, 2022 MS Teams, 3:00 pm - 4:00 pm

#### Attendees:

- PSSG: Devon Windsor (Chair), Sally Lin
- MMAH: Juanita Jara, Christine Tapp, Holly Clow, Irina Eldridge, Tricia Poilievre, Chris Van Veen
- HLTH: Kaz McKenzie

Regrets: Gerrit van der Leer (HLTH), Elizabeth Matheson (AG), Ali Bajwa (PSSG)

### Introductions, Agenda, Minutes

No additions to the agenda and April minutes were approved

### **PPSM Update**

- Special Committee report released April 28th, 2022, with 11 recommendations
- Meeting with Indigenous leadership organizations this month to co-develop engagement strategy
- Mental health related recommendations in the report were 4, 4a, 4b, 5, 5a, 5b, 5c, 8, 10.
- Discussion questions for the group:
  - How do the recommendations align with your ministry' priorities for 2022/23?
    - Addressing racism (Rec #8) aligns with In Plain Sight work
    - There had been many calls to reform Mental Health Act, but Ministry needs more resources and mandate to do this
    - Crisis response aligns with Recommendations 4a and 4b
  - What initiatives/programs are already underway to address the recommendations?
    - \$1.5 Million (some through UBCM) for PACT teams, an initial action to meet commitment to crisis response
  - Do you have suggestions for engagement questions as we begin our engagement sessions?
    - Level of specificity, ask stakeholders about priorities under the broad recommendations (e.g., prioritization for race-based data indicators)
    - Rooting in the foundations of equity and anti-racism, anti-colonialism as outlined in the report
  - Are there implications from the other SCRPA recommendations that would impact mental health related topics?
    - Everything has mental health implications, but fundamental question is how much involvement should police have in MH response? s.12 s.12
    - Some FN communities have strong relationships with RCMP, interested in Rec
       #2
    - The recommendation is broad and not rooted in mental health and health outcomes
- Discuss the next steps for the MHP Working Group, including a review of membership, TOR, and frequency of meetings.
  - Meet in early June and reassess frequency of meetings

 Membership: open to having external guests but generally should be an internal-togovernment group

### **Progress updates**

### **MMHA**

- <u>Decriminalization</u> still negotiating with Health Canada for the exemption, getting close to the approval but still figuring out thresholds
- Started working on implementation, such as training curriculum, s.12; s.17
- Planning regional town halls with First Nations, and a separate one for Metis Nation, in early June, working with PHO and FNHA
- · Holly Clow is the Director, Implementation who joined the team recently

### HLTH

- In Plain Sight lots of work ahead for implementation of Anti-Racism Data Act re: health
- Education and police work relates to cultural safety and humility standard
- Margot Greenwood at National Collaborating Centre for Indigenous Health developed key learnings in Northern Health Authority and designed webinar modules, which were endorsed by the Health Leadership Council
- All VP Indigenous at health authorities are part of a standing committee organized by HLTH
- The cultural safety and humility work being led by FNHA in BC may be used nationally
- Connecting with MMHA on youth-related topics, leverage relationships with MMHA and HLTH to link in point-of-care working group
- Working on an annual report that will come out in early June
  - ACTION: Kaz will share annual report with the group when available

Next meeting: June 2<sup>nd</sup>, 2022, from 3-4pm on MS Teams

# **MINUTES**

# **Mental Health Policing Working Group**

Thursday, June 2<sup>nd</sup>, 2022 MS Teams, 3:00 pm – 4:00 pm

#### Attendees:

- PSSG: Devon Windsor (Chair), Sally Lin, Ali Bajwa
- MMAH: Tricia Poilievre, Chris Van Veen, Holly Clow, Christine Tapp
- HLTH: Kaz McKenzie, Gerrit van der Leer
- AG: Elizabeth Matheson

Regrets: Juanita Jara, Irina Eldridge

## Introductions, Agenda, Minutes

No additions to the agenda and May minutes were approved

## **PPSM Update**

- s.12
- · Engagement questions discussion/feedback:
  - Instead of saying "do you support", say "what does this recommendation mean for you/the people you support?"; this may remove the negative framing and being more sensitive to not criticizing the recommendations of the committee
- Another question for discussion: At what stage should we be building the framework for Rec #4, given the timing of the RFD for fall 2022?
  - Do a list of existing programs, policy initiatives, etc. related to this recommendation and making sure you have the right people involved and at the right level
    - Ali noted that there is a scoping review that was done in PPSM previously
- WG members could help shape the Cabinet submission and contribute to the policy options
  - ACTION: Devon will follow up on this at the July meeting

## **Progress updates**

## **MMHA**

- <u>Safe supply</u> MMHA provided a presentation with other Ministries at the Select Standing Committee on Health and recommendations expected in Fall 2022
- <u>Decriminalization</u> Health Canada approved the Section 56 CDSA exemption request this
  week; no mandatory fines or tickets, but threshold amounts continue to be a divisive topic in
  the response to the exemption
  - Come-to-force date is Jan 2023, continue stakeholder engagement plan and working on training and guidance for police, working with municipalities, Indigenous engagements through town halls in partnership with FNHA and MNBC
  - o s.17
  - o ACTION: s.17

### **HLTH**

 In Plain Sight – Posting for a new Associate Deputy Minister right now as Dawn Thomas departed a week ago

- Suggestion for a grounding process at the start of these meetings (e.g., greetings and gratitude) to get to know each other better
  - ACTION: (Re)-introductions by current WG members at the July meeting
- Suggestion to invite Raj Maharaj (A/Director, Indigenous Health and Reconciliation) and Brittany Morgan (Policy Analyst) as they may be a better fit for this working group going forward
- Cultural safety and humility standard being released today at the Quality Forum conference held in Vancouver, developed by Mark Matthew and Diana Clarke (both on the Indigenous Health team) that may be useful and leveraged for the PPSM work
- Gerrit's update Supporting a 6-month pilot project in Vancouver Coastal Health led by ER physicians on Healthcare Consent Admissions Act instead of MHA to expedite transfer of responsibility between police re: wait time
  - There will be an evaluation to see what impact this will have since current wait time for police is ~1 hour in that region

### AG

- Anti-Racism Data Act going into Royal Assent today at 5pm
- First annual report to be released in May 2023; on-going consultations with Indigenous peoples and racialized peoples and setting up a committee for implementation by August 2022
- ACTION: Elizabeth to share their team's approach for consultation at the next meeting

### **PPSM**

- Situation Table recent briefing with Minister Malcolmson on Situation Tables went well
- Shift BC, Situation Tables, and Intervention Circles being amalgamated; updates to information sharing agreements underway

Next meeting: TBD, late-July; Devon to send invite

# **MINUTES**

# **Mental Health Policing Working Group**

Monday, July 25, 2022 MS Teams, 2:00 pm - 3:00 pm

### Attendees:

- PSSG: Devon Windsor (Chair), Ali Bajwa
- MMHA: Christine Tapp, Chris Van Veen, Holly Clow, Irina Eldridge
- HLTH: Gerrit van der Leer, Brittany Morgan

**Regrets:** Tricia Poilievre (MMHA), Raj Maharaj (HLTH), Juanita Jara (MMHA), Danielle Parish (MMHA), Kaz Mackenzie (HLTH), Elizabeth Matheson (AG)

## Introductions, Agenda, Minutes

- Longer time provided to give members an opportunity to tell a bit more about themselves (per Action Item from June meeting)
- The agenda item to provide an update on the Anti-Racism Data Act Consultation Process will be moved to the September 2022 meeting.
- No other changes to the agenda and June minutes were approved.

### **PPSM Project Update**

Devon provided an update on the s.12

o s.12

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## **Progress updates**

#### MMHA:

Safe supply – Christine Tapp

 s.12; s.17

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- Currently doing internal scoping to begin designing a safe supply implementation framework; identifying the principles for implementation to give the work more structure.
- There are ongoing conversations with Heath Authorities regarding continued implementation. MMHA is in the process of working on a Response Document to the Death Review Panel; anticipate being able to share the response in late summer/early fall.
- Decriminalization Chris Van Veen, Holly Clow

s.12

This will cover work with PSSG for the phased approach to training police. We are still in the early days in that planning, but it is coming along. The draft curriculum is in development and we are working with PSSG, policing partners, and external partners. MMHA & PSSG are co-chairing a Law Enforcement Working Group to review the curriculum.

o s.12

o s.13

### HLTH:

- Relevant updates Gerrit van der Leer:
  - Consolidating existing Health Authority funded crisis lines from the Health Authorities to the Provincial Health Services Authority (PHSA) which will allow for a more coordinated response; work is underway to standardize the crisis line responses and improve technology.
  - Through the Homelessness Strategy and Budget 2022, HLTH/Health Authorities received funding to continue implementation of urgent homelessness response initiatives across the province, and decampment initiatives in the Vancouver Coastal and Vancouver Island Health Authority. Health Authorities are responsible for delivering and coordinating health wraparound supports for homeless people and delivered a range of innovative and expanded services, including overdose prevention services at housing sites, partnerships between mental health clinicians and police departments, and Indigenous homelessness engagement teams.
    - ACTION: Invite Roxanne Blemings to provide update at next meeting
  - Opioid Agonist Treatment (OAT) optimization: there are barriers to access this type of substance use treatment; HLTH is working with Health Authorities to expand this service across the MHSU system of care, including primary care networks and mental health centres to address the needs of people with concurrent MHSU challenges.
- In Plain Sight progress Brittany Morgan:

Teresa Dobmeier is the new ADM for Indigenous Health.

### PSSG:

- Situation table Ali
  - s.13; s.16
     s.13; s.16
     to establish a team in their communities; also lots of interest in the s.13; s.16
  - Have finalized the Integrated Program Agreement (IPA) and Privacy Impact Assessment (PIA) for the Situation Table – will obtain approval on the IPA from the Office of the Information and Privacy Commissioner. The IPA allows different partners to sit on the table and share information freely.

Next meeting: September 9, 2022, 11:00am - 12:00pm

# **MINUTES**

# **Mental Health Policing Working Group**

Friday, Sept 9, 2022 MS Teams, 11:00 pm – 12:00 pm

#### Attendees:

- PSSG: Devon Windsor (Chair), Ardys Baker, Ali Bajwa, Sally Lin
- MMHA: Christine Tapp, Chris Van Veen, Juanita Jara
- HLTH: Gerrit van der Leer, Brittany Morgan, Raj Maharaj
- AG: Elizabeth Matheson

Regrets: Tricia Poilievre, Holly Clow, Irina Eldridge, Danielle Parish

## Introductions, Agenda, Minutes

• No other changes to the agenda and July minutes were approved.

## **PPSM Project Update**

s.12

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- Received a letter from UBCM stressing the importance of Rec
   #4 on mental health as a priority for them
- Agreement from multiple members that a tracking document on mental health/policing projects for group decision would be a good idea
  - ACTION: Sally to consolidate progress updates from previous meetings and put on Teams chat
  - ACTION: Members will be asked to access and update their sections before each monthly meeting

### Anti-Racism Data Act Consultation Process

- New data committee recently formed and consultations will continue through the implementation phases
- Extensive engagement with Indigenous partners, public survey, and community-led process – 425 sessions total

- CITZ and AG worked closely with FNLC and MNBC on every step of the legislative process
- Currently BC does not typically collect demographic data; for Indigenous peoples, data is collected but no consistent approach
- New data advisory committee will begin this fall, engagement process and reports available online
- ACTION: Elizabeth to circulate slide deck with group or send to Sally/Devon to circulate
- ACTION: Elizabeth to follow up with Gerrit about whether data division in HLTH was involved in consultations
- ACTION: Elizabeth's colleague in AG (Minah Ahn) to connect with Juanita and Gerrit's team separately

## **Progress updates**

### MMHA:

- Safe supply Christine Tapp

   s.12; s.17
- Decriminalization Chris Van Veen
  - Working with colleagues in PSSG to train police and working on monitoring and evaluation framework, especially looking at impacts of decriminalization over time and racialized enforcement of drug laws
  - Still on track to launch in Jan 2023
- Community based crisis response Juanita Jara
  - On track to launch two PACT teams in New West and Victoria in October
- Crisis lines Juanita Jara
  - New federal 988 suicide prevention line launching in Fall 2023
  - Scope may be expanded beyond suicide prevention
  - Working with federal colleagues on the role of province, PHAC aiming to do a Spring 2023 soft launch

#### HLTH:

- <u>Crisis lines</u> Gerrit van der Leer
  - Enhancing crisis lines through PHSA, common governance structure now whereas before the lines were funded through each separate health authority
  - 40% of calls not being answered in crisis lines, work underway to improve technology
  - Work being reviewed on integrating 911 with crisis line, but focusing currently on improving existing crisis line
- Homelessness strategy regular meetings with VCH and overview will be presented at October meeting by Roxanne Blemings
- New Assertive Community Team that will focus on forensic clients, intensive support model for this population being developed
- VCH is using Healthcare Consent Act for patients, which will have impacts on police wait times and transfer processes
- <u>In Plain Sight progress</u> Raj Maharaj

- Releasing annual report in September
- Recently released cultural safety and humility training intended to become an accreditation

### PSSG:

- Situation table Ali Bajwa
  - Engaging with more groups (e.g., Community Living BC) to add different perspectives and lenses to Situation Tables
  - There is a significant increase in housing as risk factor across different communities in the past year, which exacerbates other risk factors
  - Transition of police to more suitable agency increased to 92%, cases brought forward to police are transferred to more appropriate services at the appropriate time, decreasing caseload for police
  - SPDR has taken the lead to respond to the majority of cases, especially given housing as the highest risk factor
  - ACTION: Ali to share model and data with the team

**Next meeting:** October 6, 2022, 3:00 – 4:00 pm

# ISSUES NOTE: Public Safety and Solicitor General 2022-09-26

# **POLICE – Drug Decriminalization**

# SUGGESTED RESPONSE:

- More than 10,000 people have lost their lives to illicit drugs since a public health emergency was declared in 2016.
- The recent report from BC Coroners Service shows at least 1,297 British Columbians are believed to have been lost to the toxic drug supply between January and July 2022.
- This unprecedented number reflects the ongoing severity of the illicit drug toxicity crisis.
- In May, B.C. received a three-year exemption to remove criminal penalties for people who possess a small amount of certain illicit substances for personal use. The exemption will come into effect on January 31, 2023.
- The exemption request was not made in isolation, but as part of a comprehensive approach led by the Ministry of Mental Health and Addictions through cross-government initiatives and investments in other programs and services related to safer supply, acute case management, treatment, and harm reduction.
- BC's decriminalization framework is progressive, was developed in collaboration with partners, and takes a non-coercive, trauma-informed approach.
- We have also supported the Canadian Association of Chiefs of Police in advocating for a national plan on the decriminalization of simple possession of drugs for personal use.
- We want to see all people receive timely mental health and addictions support and for police to be freed up to focus on serious criminal activity.
- PSSG is also supporting the Ministry of Mental Health and Addictions in its engagement with police across B.C. regarding the details of the decriminalization framework while assessing police training needs.

 Over the next several months training activities will help equip police with the knowledge, skills, and abilities on how to apply the exemption and provide an understanding of the referral process and pathways to care.

### IF NEEDED:

- Police have both formal and informal policies and practices that support a harm reduction approach whereby incidents involving only 'simple possession offences' are not normally disposed of by charge recommendation.
- This approach also involves recognizing and responding to the nexus between gang violence and profits from the illicit drug trade.

# BACKGROUND:

The increasing number of overdose deaths in Canada, particularly during the pandemic, has elevated calls for a national approach to decriminalization.

In Canada, people are criminalized for the simple possession of drugs under the *Controlled Drugs and Substances Act* (CDSA), section 4(1). Section 56 exemptions to the Act are made on the basis that it is necessary for a medical or scientific purpose or is otherwise in the public interest.

Decriminalization involves removing criminal sanctions when it comes to the possession of small amounts of drugs for personal use. There are approximately 30 other countries that apply some form of drug decriminalization; however, countries differ significantly in terms of their approach.

Many police agencies in B.C. have adopted practices to not charge people with simple possession offences but instead choose other avenues available for disposition of the offence. Additionally, police may refer a matter to the federal Public Prosecution Service of Canada (PPSC) for consideration of more serious charges but due to various reasons, the PPSC may reduce the eventual charge to a lesser offence such as simple possession.

Despite de facto decriminalization in many parts of the province, between 2012-2021, there were 38,742 persons charged with possession in B.C.

### **Recent Actions:**

- August 2022 A police training plan has been approved by the Law Enforcement Implementation Working Group (co-chaired by MMHA and PSSG). The training plan will include the launch of a joint webinar for police with MMHA in November 2022, as well as a microlearning video in January 2023, followed by a comprehensive online course hosted on the Canadian Police Knowledge Network (CPKN).
- May 2022 B.C. received a three-year exemption under the Controlled Drugs and Substances Act (CDSA) to remove criminal penalties for people who possess a small amount of certain illicit substances for personal use. This exemption will be in effect from Jan. 31, 2023, to Jan. 31, 2026.

# ISSUES NOTE: Public Safety and Solicitor General 2022-09-26

- Early 2022 The Province moved into the next phase of work on decriminalization in B.C., including working with Health Canada to resolve outstanding policy questions, and planning for implementation should the exemption be approved.
- December 2021 The British Columbia Association of Chiefs of Police (BCACP) submitted
  a report to Health Canada in response to the Ministry of Mental Health and Addictions'
  (MMHA)submission. In the report, BCACP support a lower threshold amount of 1 gram of
  illicit drugs for personal possession and use as opposed to the proposed cumulative 4.5
  grams in the MMHA Proposal. The BCACP believes a lower threshold can act as part of an
  incremental approach which includes safer supply and fully resourced health supports,
  including timely and available treatment and/or rehabilitation programs across the province.
- October 2021 MMHA sent a proposal to Health Canada in support of a section 56 exemption from the Controlled Drugs and Substances Act. The proposal asks the federal Minister of Health to exempt all persons in British Columbia 19 years of age or older from the application of criminal penalties on the condition that the amount of any controlled substance in their possession does not exceed the thresholds for "personal possession" set out in a Schedule. B.C. seeks to establish a cumulative binding threshold quantity at 4.5g possession of opioids (i.e., heroin and fentanyl) and central nervous system stimulant (CNS) (i.e., cocaine, crack cocaine and methamphetamines).
- Summer 2021 MMHA established an inter-ministry project team, including Ministry of Public Safety and Solicitor General (PSSG) staff, and a Core Planning Table to support the development of a section 56 exemption from the Controlled Drugs and Substances Act to decriminalize personal possession of small amounts of illicit substances in British Columbia. The Core Planning Table includes a variety of partners and stakeholders, including Indigenous organizations, the justice and policing sectors, service providers, researchers and clinical experts, municipal partners, and people with lived experience.
- May 2021- The City of Vancouver submitted a request to Health Canada for a section 56 exemption to decriminalize possession within the city.
- February 18, 2021 Federal government introduced Bill C-22 to repeal mandatory minimum
  penalties for certain drug offences that have disproportionately harmed Indigenous and
  Black offenders and those struggling with addictions. The Bill will also require police and
  prosecutors to consider alternatives to laying charges in simple possession cases, such as
  diversion to addiction treatment programs, and give the courts leeway to use conditional
  sentence orders in cases where an individual isn't a public safety threat.
- Recent provincial policing priorities delivered to the Municipal Police Boards included guidance for any policing units who have not already done so to consider pursuing a public health and harm reduction approach in line with the April 2019 recommendations of the BC Provincial Health Officer in the report "Stopping the Harm: Decriminalization of People Who Use Drugs in BC". Further, priorities included to and work to support community efforts to reduce stigma and enhance pathways for those facing substance use challenges into substance use systems of care.

- February 11, 2021 BC Coroners Service reports that 2020 was B.C.'s worst year yet in terms of number of lives lost due to the effects of toxic illicit drugs (1716 deaths, or 4.7 per day a 74% increase over number of deaths recorded in 2019). At a press conference on this same day, MMHA Minister Malcolmson referenced a letter from Minister Farnworth to police chiefs asking that they not treat simple personal drug possession as a criminal matter, both as a way to combat stigma that interferes with people's ability to access addiction support and health care treatment as well as a way to allow police to focus on more serious crimes.
- **February 3, 2021** Minister Sheila Malcolmson wrote to the federal Health Minister to request consideration of a Section 56 exemption to the *Controlled Drugs and Substances Act* for B.C. to decriminalize the possession of small amounts of controlled substances.
- December 7, 2020 The City of Vancouver advised Health Canada of their intent to apply for a section 56 exemption to decriminalize possession within the city.
- November 26, 2020 mandate letter PSSG to work together with MMHA, who are leading B.C. efforts to fast track the move toward decriminalization of simple possession of small amounts of illicit drugs for personal use. The letter also highlights that in the absence of prompt action by the federal government, the B.C. government should develop a made-in-B.C. solution.
- **November 25, 2020** Vancouver city council passed a motion to seek an exemption from the federal Controlled Drugs and Substances Act. This exemption, if granted, would support a health-focused approach to substance use by decriminalizing simple possession of all illicit drugs within the City of Vancouver.
- **September 2, 2020** Prime Minister Justin Trudeau announced that the federal government would not support decriminalization of drugs as a public-health response to the opioid crisis, saying that they are prioritizing other options such as greater access to safe supply.
- August 17, 2020 The Public Prosecution Service issued an advisory on the prosecution of
  controlled substances asking federal lawyers to avoid prosecuting simple drug possession
  cases unless there are significant public safety concerns.
- July 20, 2020 Premier John Horgan wrote to Prime Minister Trudeau to urge the federal government to develop a national plan to decriminalize possession of illegal drugs for personal use.
- July 9, 2020 The Canadian Association of Chiefs of Police (CACP) called for decriminalization of possession for personal use on the basis that substance use and addiction should be treated as public health issues, not crimes. They endorsed alternatives to criminal sanctions including diversion to the health system. Premier Horgan publicly supported the call.

Program Area	Deputy / ADM	GCPE
W. Sutherland – Sept.14/22	G. Lewis – Sept. 26/22	D. Haslam – /22
M. Brown – Sept. 15/22		

# **MINUTES**

# **Mental Health Policing Working Group**

Thursday, October 6, 2022 MS Teams, 3:00pm – 4:00pm

Devon Windsor (Chair, PSSG), Ardys Baker (PSSG), Ali Bajwa (PSSG), Sally Lin

(PSSG), Wendy Sutherland (PSSG)

Tricia Poilievre (MMHA), Elise Buckley (MMHA) Brittany Morgan (HLTH), Raj Maharaj (HLTH)

Elizabeth Matheson (AG),

Juanita Jara (MMHA), Kendall Hammond (HLTH), Gerrit van der Leer (HTLH),

Christine Tapp (MMHA), Chris Van Veen (MMHA), Danielle Parish (MMHA), Irina

Eldridge (MMHA), Holly Clow (MMHA)

## **PPSM Project Update**

s.12

Regrets:

o s.12

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### **Progress updates**

## MMHA:

- Crisis Response
  - o First recommendation in the "Repeat Offender" report is to continue funding PACT
  - o CMHA will launch New West and Victoria PACT teams in November 2022
  - Working on scheduling a meeting with E-Comm and CMHA on challenges raised at UBCM re: integration
- Crisis Lines
  - Attending monthly FPT meetings aiming for simultaneous launch in Nov 2023
  - Still determining scope of the crisis lines, other PTs wondering about how the crisis line would integrate with 911 and existing crisis response

### HLTH:

- In Plain Sight progress
  - Looking at how to continue work on the task team after the term ends
  - Annual progress report to be released soon, tentatively before end of 2022

### AG:

- Race-based data legislation
  - PS Singh holding town halls this fall, wider consultations on new Anti-Racism legislation
  - Will be hiring Director and 6 other positions to support this process

- Recently met with the BC Human Rights Commissioner, will continue to inform work on legislation
- ARDA Advisory Committee formed
- Elizabeth moving to new position and will connect new Director to WG when hired

#### **PSSG**

- Collaborative programs, Situation Tables
  - "Repeat Offenders" report has recommendations that impact Situation Tables, continue to seek direction on next steps and analyzing the report
  - Looking at proposals in new sites, 17 existing and three in consideration
- Decriminalization
  - o s.12
  - Need a lot of communications as part of the public education campaign
  - Currently working on the implementation workflow processes
  - Colleagues at MMHA working with hospitals and health authorities and BCEHS on decriminalization and MHA
  - Considerations around liability of police to not be promoting drug use or returning substances, equipping police with naloxone and resource cards
  - Early 2023 online training course on stigma, trauma-informed practice, operational impacts

Next meeting: Nov 3, 2022, 3-4pm

# **MINUTES**

# **Mental Health Policing Working Group**

Thursday, December 1, 2022 MS Teams, 3:00pm – 4:00pm

Devon Windsor (Chair, PSSG), Sally Lin (PSSG), Nimmi Takkar (PSSG), Balraj

Kahlon (PSSG), Ardys Baker (PSSG)

Attendees: Tricia Poilievre (MMHA), Elise Buckley (MMHA), Chris Van Veen (MMHA),

Christie Wall (MMHA)
Kacie Poskitt (HLTH)

Guest: Tatiana Kim (CITZ)

Regrets: Juanita Jara (MMHA), Gerrit van der Leer (HTLH), Danielle Parish (MMHA), Irina

Eldridge (MMHA), Holly Clow (MMHA), Raj Maharaj (HLTH), Wendy Sutherland

(PSSG), Ali Bajwa (PSSG), Brittany Morgan (HLTH),

## **PPSM Project Update**

Update on PPSM – Devon Windsor

- Treasury Board on Dec 6<sup>th</sup>, will update at January meeting
- Safer Communities Action Plan was announced on Nov. 20th
- RCMP core policing funding announced on Nov. 23rd
- Project Tracker check-in
  - Not useful for now, given low usage

### Presentation

- Mental Health and Policing in BC Data Project Tatiana Kim (CITZ), Sally Lin (PSSG):
  - In October, PSB and BC Stats started discussing the opportunity to collaborate on a data project related to policing.
  - After considering branch priorities and considering the Safer Communities Action Plan, we decided that a project related to mental health and policing should be prioritized at this time.
  - Depending on how this initial pilot project goes, we may consider expanding to other areas, such as use of force and police misconduct.
  - Project roadmap: currently at the discovery state to identify partners, vision, feasibility, and scope
  - Question: where would the people with lived experience be involved in this project?
    - Can involve them at the discovery stage

- Chris Van Veen's team has been liaising with PRIME on cleaning data on interactions
  - ACTION: s.15
- s.15

- MMHA can provide input, can coordinate internally, and happy to partner
- o Important to include lived experience
- ACTION: Keep this project as a regular item on the agenda for this working group

### **Progress updates**

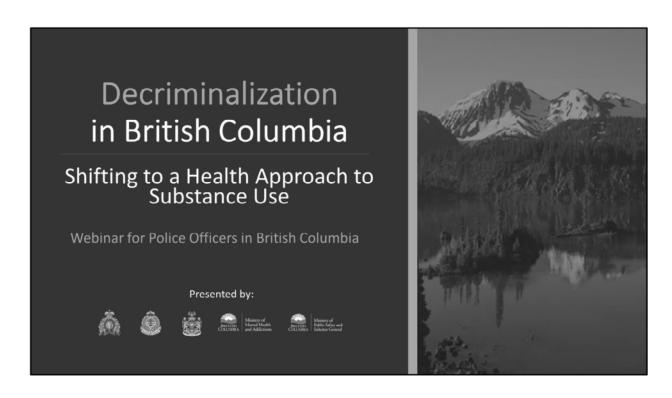
#### MMHA:

- Decriminalization Chris van Veen
  - Focusing on finalizing training for police and ongoing Indigenous engagement
  - o Started regional town halls with First Nations, good discussions so far
  - o Monitoring and evaluation, notification for other facilities that might be impacted
- Prescribed safer supply Christie Watt
  - o s.12; s.17
  - 0
  - 0
  - 0
- Crisis Response:
  - Funding committed for 10 PACT teams (7 new, 3 existing) in the Safer Communities Action Plan
  - Working with CMHA on grant agreement to cover this and next fiscal to have renewed funding for existing PACT teams and new ones
  - Have not identified the communities for the new PACT teams yet
- Car Programs:
  - \$10M for Car programs announced, still determining funding allocation
- 988 Crisis Line:
  - Scope of crisis line is suicide and mental health crisis calls
  - Modeling showed a sizable increase of call volume following the launch (in 2024) and some diversion from 911 calls

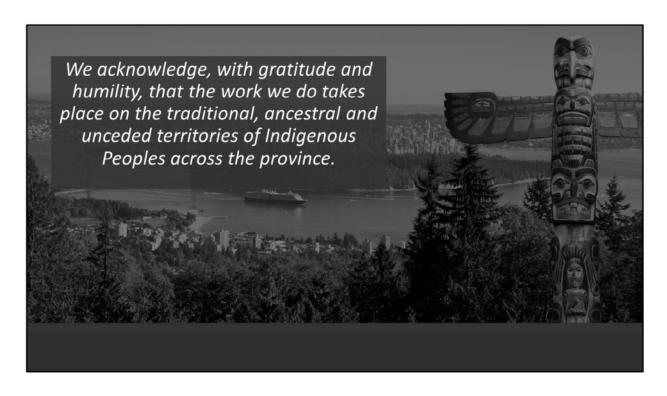
### HLTH:

- In Plain Sight progress:
  - Released the <u>annual report</u>; some recommendations completed but still work to be done on others, task team meeting in January to assess next steps

Next meeting: Thursday, January 5th, 2023, 3 - 4 pm



This presentation will provide an overview of the subsection 56 (1) *Controlled Drugs and Substances Act* class exemption relating to the personal possession of small amounts of certain illegal drugs in BC.



Before we get started, I would like to acknowledge that we are coming together from a number of ancestral, traditional and unceded territories. We acknowledge, with gratitude and humility, that the work we do takes place on the traditional, ancestral and unceded territories of Indigenous Peoples across the province.



I'm Mike Serr, Chief Constable from the Abbotsford Police Department.

The increased toxicity of the illicit drug supply, due to the introduction of fentanyl and its analogues, has contributed to the current public health emergency. First responders, health professionals, and the scale-up of harm reduction initiatives, such as naloxone availability, have saved approximately 6,000 lives from fatal drug overdose deaths.

Despite the scale up of a range of effective evidence-based interventions, rates of death remain at unacceptably high levels. This is why the provincial government requested, and was granted, an exemption under subsection 56(1) of the *Controlled Drugs and Substances Act (CDSA)*.

The British Columbia Association of Chiefs of Police supports the province's initiative to decriminalize personal amounts of illegal substances, as part of an integrated approach to divert persons who use drugs away from the criminal justice system and towards health services and pathways of care, with the goal of improving health and safety outcomes for those individuals.

In the next slide, we will hear some opening remarks from BC's Minister of Mental Health and Addictions.

# [Not for narration]

https://www150.statcan.gc.ca/n1/pub/11-633-x/11-633-x2021003-eng.htm



No narration required for this slide

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Hello everyone, my name is Jennifer Whiteside. I'm BC's Minister of Mental Health and Addictions.

Thank you for helping to implement decriminalization. We hope this training session will outline your role in this historic change, and how you will help connect people to care. I'm so grateful for your work.

More than 10,000 people have tragically been lost to the poisoned drug supply since the 2016 public health emergency was declared.

We must to do everything we can, to stem the tide on this terrible crisis.

That's why BC made the bold step to decriminalize people who use drugs. We're the first in Canada to do so, and we got here largely because police called for it.

And here's the rationale: The majority of people dying are dying alone in their own homes. The fear of being criminalized leads many to hide their substance use, and use drugs alone, and that can be fatal.

Decriminalization will break down the stigma, the fear and shame that prevents people for getting help.

Because addiction is a public health matter – not a criminal justice one.

Decriminalization will create new pathways to life-saving services.

And you will be on the frontlines of this major change.

And you'll be the example, should other provinces follow suit.

So we're doing all we can, to make sure you're prepared.

I want to thank you for ALL you do to protect people and keep our community safe.

And I look forward to working together, in the weeks and months to come.

# **Learning Outcomes**

- 1. Examine British Columbia's integrated approach to decriminalization.
  - Review legislation and guidelines that were implemented to reduce drug possession charges.
  - Define decriminalization.
- 2. Explain how decriminalization is being accomplished in British Columbia through a subsection 56(1) CDSA exemption.
  - · Identify the key features of decriminalization in British Columbia.
  - Outline the scope of the exemption.
  - Identify the conditions of the exemption.
- 3. Apply a workflow chart related to drug possession to a variety of scenarios.
  - Examine the workflow related to drug possession.

# [Narration]

At the end of this webinar you will be able to:

- 1. Examine British Columbia's integrated approach to decriminalization.
- 2. Explain how decriminalization is being accomplished in British Columbia through a subsection 56(1) CDSA exemption.
- 3. Apply a workflow chart related to drug possession to a variety of scenarios.

# What Is Decriminalization?



# **Decriminalization Does**

Remove criminal penalties, including:

Drug Seizures Arrests Criminal Charges Convictions

For possession of 2.5 grams or less of certain illegal substances for personal use.

# Decriminalization Does NOT

## **Legalize Drugs**

Drugs remain illegal Trafficking remains illegal

## **Increase Drug Use**

There is no evidence, from other decriminalization models around the world, that decriminalization increases drug use.

(Henry, B., 2019; Ministry of Mental Health and Addictions, 2021)

# [Narration]

Decriminalization involves removing an action or behaviour from the scope of the criminal justice system.

Decriminalization removes criminal penalties for drug seizures, arrests, criminal charges and convictions for possession of 2.5 grams or less of certain illegal substances for personal use.

Decriminalization does not legalize drugs and drug trafficking remains illegal.

# Decriminalization in BC: An Integrated Approach

BC's comprehensive package of evidence-based supports and services includes:



Treatment and recovery services



Take-Home Naloxone program



Overdose prevention services



Drug checking programs



Opioid Agonist Treatments



Prescribed safer supply



Overdose Outreach and Team-Based Care



Nurse Prescribed

reducing stigma and encouraging connections to care.



Detox



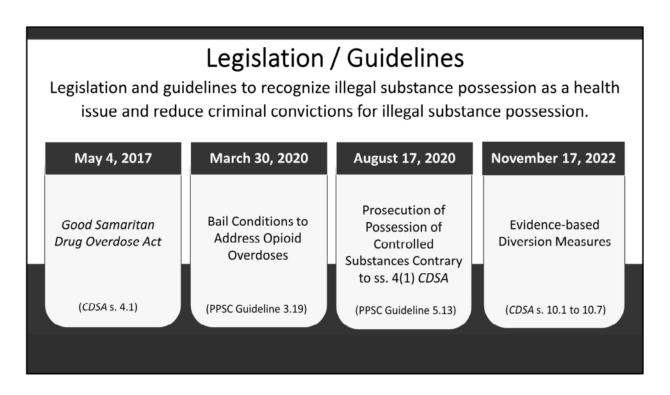
Decriminalization is key to increasing access to safer supply, treatments, and recovery by

(Henry, B., 2019; Ministry of Mental Health and Addictions, 2021)

### Narration:

The provincial government is in the process of enhancing the ability to quickly connect people who use drugs, to a range of evidence-based treatment and other social services.

The decriminalization of certain illegal substances is being implemented because the province believes this initiative will complement their integrated approach to reducing drug overdose fatalities, reduce stigma an encourage connections to care.



#### Narration:

In addition to the building up of harm reduction and support services, legislation and Public Prosecution Service of Canada (PPSC) guidelines were implemented to reduce criminal convictions for drug possession.

In May 2017, the *Good Samaritan Drug Overdose Act* amended the *CDSA* by adding section 4.1. This amendment exempts a person from criminal charges for drug possession, if they seek emergency medical or law enforcement assistance for themselves, or another person, following an overdose on a controlled substance.

In March 2020, PPSC created guideline 3.19 to minimize or eliminate the use of broad area restrictions and certain bail order conditions for individuals with a substance use disorder. Generally, conditions such as, "not to be in possession of controlled substances" and "not to be in possession of drug use paraphernalia", should be avoided.

Then, in August 2020, PPSC established Guideline 5.13 related to the prosecution of the possession of a controlled substance under subsection 4(1) of the *CDSA*. This guideline recognizes that drug possession is a health-related issue while acknowledging that certain substance use may present particular public safety concerns. Federal prosecutors are

required to consider alternatives to possession charges, unless there are serious manifestations of harm. Aggravating factors, such as risk to the safety or wellbeing of children or young persons, and risk to the health and safety of the public, are considered to be serious manifestations of harm.

This guideline has dramatically reduced drug possession convictions in BC. For example, prior to the implementation of this guideline, there were 50 convictions for drug possession in all RCMP jurisdictions in BC, when possession was the only offence. After this guideline was implemented, convictions for drug possession were reduced down to 14.

And lastly, in November 2022, the government of Canada introduced amendments to the *CDSA*. The amendments aim at providing more opportunities for pre-charge diversion for drug possession. Under the new section 10.2, police officers must consider whether it would be preferable to take no further action, to warn the individual, or with consent of the individual to refer them to a program, when dealing with an alleged subsection 4(1) offence.

Later in this presentation, we will share a workflow document with you, that shows how the PPSC Guidelines and the legislation work into the subsection 56(1) CDSA exemption to decriminalize certain illegal substances.

[Not for Narration]

#### Reference

Good Samaritan Drug Overdose Act: <a href="https://laws-lois.justice.gc.ca/eng/annualstatutes/2017-4/page-1.html">https://laws-lois.justice.gc.ca/eng/annualstatutes/2017-4/page-1.html</a>

PPS Guideline 3.19: <a href="https://www.ppsc-sppc.gc.ca/eng/pub/fpsd-sfpg/fps-sfp/tpd/p3/ch19.html?wbdisable=true">https://www.ppsc-sppc.gc.ca/eng/pub/fpsd-sfpg/fps-sfp/tpd/p3/ch19.html?wbdisable=true</a>

PPSC Guideline 5.13: <a href="https://www.ppsc-sppc.gc.ca/eng/pub/fpsd-sfpg/fps-sfp/tpd/p5/ch13.html">https://www.ppsc-sppc.gc.ca/eng/pub/fpsd-sfpg/fps-sfp/tpd/p5/ch13.html</a>

Act to Amend the Criminal Code and the Controlled Drugs and Substances Act: https://www.parl.ca/DocumentViewer/en/44-1/bill/C-5/royal-assent

# What Is a Subsection 56 (1) CDSA Exemption?

Provides authority to grant exemptions from any or all of the provisions in the *CDSA*, if, in the opinion of the Minister, the exemption is necessary for a medical or scientific purpose or is otherwise in the public interest.



QR code for subsection 56(1) CDSA exemption

(CDSA ss. 56(1))

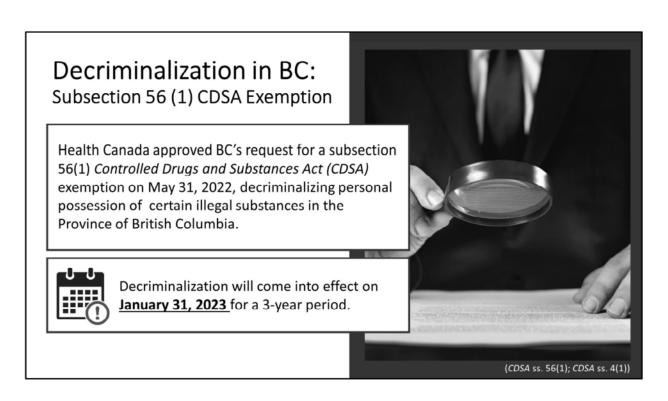
#### Narration:

The CDSA has a dual purpose to protect public health and maintain public safety. Under the CDSA, most activities with controlled substances are illegal, unless specifically allowed through a regulation or an exemption granted by the federal Minister of Health.

Subsection 56(1) in the CDSA provides authority to grant exemptions from any or all of the provisions in the CDSA, if, in the opinion of the Minister, the exemption is necessary for a medical or scientific purpose, or is otherwise in the public interest. A subsection 56(1) CDSA exemption is a formal document issued to a person or a group of people for a predetermined period.

The exemption is posted on the Health Canada website and can be accessed through this QR code. I would encourage you to read this 10-page document, to better understand this exemption.

It is important to note that the decriminalization of certain illegal substances is NOT being accomplished through new legislation; it is being accomplished through an exemption granted under subsection 56(1) in the CDSA.

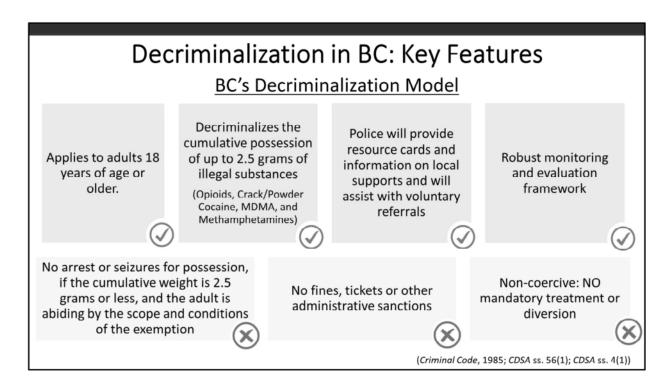


To support decriminalization of illegal substances, the provincial government applied to Health Canada and was granted a class exemption to allow persons, 18 years-of-age and older, to possess certain illegal substances and be exempt from a drug possession charge under subsection 4(1) CDSA, if they abide by the scope and conditions of the exemption.

The exemption will come into effect on January 31, 2023 for a 3-year period and expires on January 31, 2026. The provincial government will need to reapply to Health Canada if this exemption is to continue beyond the initial 3-year period.

[Not for Narration] References

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



Before discussing the scope and conditions of the exemption, let's start with some of the key features.

The exemption applies to adults 18 years-of-age and older to align with the federal age of majority. This creates a unique situation in BC where 18 year-olds will be able to possess certain illegal substances, but not possess cigarettes or liquor, which are regulated under provincial legislation.

The exemption decriminalizes the cumulative possession of up to 2.5 grams of certain illegal substances such as opioids - including heroin and fentanyl; cocaine, crack cocaine, MDMA and methamphetamine. Cumulative means that the adult could possess a combination of these substances that weigh up to 2.5 grams.

Police will offer a resource card with information on local health and social services to individuals in possession of illegal substances. The resource card will only be distributed when there is a police interaction in progress, for example another violation or a reason for police contact, or the person makes a request to pursue a service, resource, program or treatment.

The BC Ministry of Mental Health and Addictions will be implementing a robust monitoring and evaluation framework to ensure objectives of the exemption are met and that any identified risks are managed appropriately.

There will be NO arrests or seizures under the authority of subsection 4(1) CDSA when an adult possesses up to 2.5 grams of these illegal substances and is abiding by the scope and conditions of the exemption. This means that an adult who is arrested and found in possession of up to 2.5 gram of methamphetamine would have their drugs returned to them upon release from custody, if they were abiding by scope and conditions in the exemption.

The exemption does NOT create any fines, tickets, or administration sanctions like we currently have for other substances that are regulated under provincial legislation.

And lastly, this exemption does not require any mandatory treatment or diversion when an adult is found in possession of illegal substances listed in the exemption.

[Not for narration]

References:

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

# Scope of the Exemption

Police officers will continue to have arrest, search and seizure authorities for drug possession offences under subsection 4(1) of the CDSA in the following situations:



On K-12 school premises



On childcare facility premises (licensed)



In airports (certified)



On Canadian Coast Guard vessels and helicopters



For Canadian Forces members subject to the *Code of Service Discipline* 



In a motor vehicle or watercraft operated by a minor

(CDSA ss. 56(1); CDSA ss. 4(1))

### [Narration]

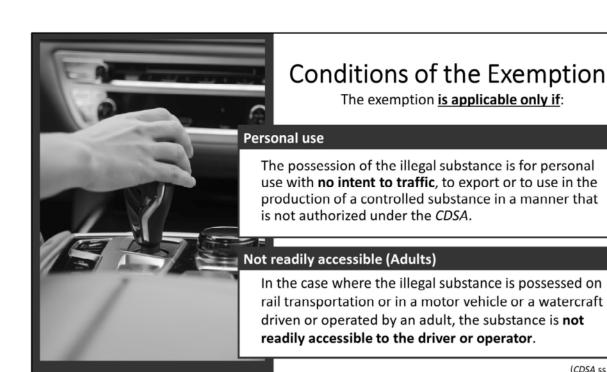
Within the scope of the exemption, police officers will continue to have arrest, search and seizure authority under subsection 4(1) of the *CDSA*, for any amount of illegal substances, including 2.5 grams or less, in the following situations:

- On K-12 school premises;
- On licensed child care facility premises;
- In certified airports;
- On Canadian Coast Guard vessels or in Canadian coast guard helicopters;
- To a Canadian Armed Forces member who is subject to the Code of Service Discipline;
- In a motor vehicle that is driven or operated by a minor, whether or not the vehicle is in motion;
- In a watercraft that is operated by a minor, whether or not the watercraft is in motion.

If there is a vehicle or motor craft being operated by a minor, the exemption wouldn't apply to any passenger.

\*If a location is not listed here, it means you will NOT be able to exercise your authority under subsection 4(1) of the CDSA when an adult is possessing up to 2.5 grams or less of

illegal substances listed in the exemption.



(CDSA ss. 56(1))

### [Narration]

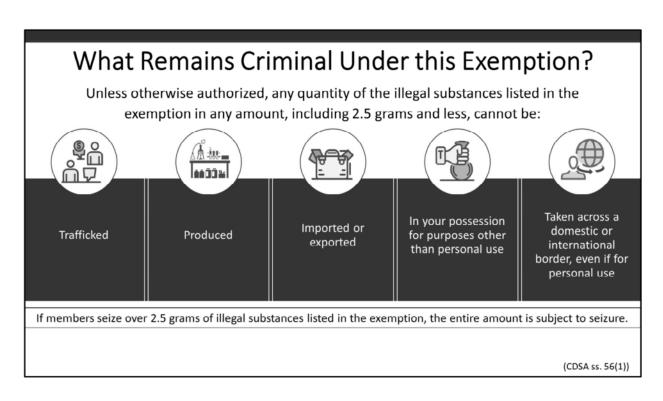
There are two conditions in the exemption:

- The possession of the illegal substance is for personal use with no intent to traffic, export or use in the production of a controlled substance in a manner that is not authorized under the CDSA; and
- In the case where the illegal substance is possessed on rail transportation or in a motor vehicle or a watercraft, driven or operated by an adult, the substance is not readily accessible to the driver or operator.

Readily accessible means within arm's reach. So the presence of illegal substances in an unlocked glove compartment, driver's console, area underneath the driver's seat, and any open storage area including the cup holders and driver's side door would be considered readily accessible. Illegal substances on a passenger's lap would be considered, "in the open" and readily accessible.

For example, an adult could be driving a vehicle with up to 2.5 grams of fentanyl in their vehicle as long as it is not readily accessible. In another example, the driver could have

multiple passengers, each with up to 2.5 grams of fentanyl on their person, as long as they are not readily accessible to the driver.



Any quantity of the illegal substances listed in the exemption in any amount, including 2.5 grams and less, cannot be:

- Trafficked
- Produced
- Imported or exported
- In your possession for purposes other than personal use.
- Taken across a domestic or international border, even if for personal use

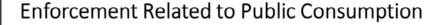
Possession above 2.5 grams remains subject to the *CDSA*. If members seize an amount of illegal substances over 2.5 grams, they shall not return any portion of that substance. The entire amount is subject to seizure.

Trafficking remains an offence in the *CDSA*. Trafficking includes giving away, supplied to anyone, sold, administered, transferred, transported, sent or delivered. So if one adult gives another adult, any quantity of an illegal substance listed in the exemption, it would be considered a trafficking offence.

[Not for narration]

### References

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



- Enforcement related to public consumption of illegal substances listed in the exemption will now fall under the bylaws of the municipality and policies of private establishments, e.g., a bar, restaurant or shopping mall, as well as the *Trespass Act* (2018).
- Owners/Operators can request police assistance in removing individuals from their premises if requested to leave due to illegal substance possession or substance use.
- New and existing local government bylaws concerning public consumption will be enforceable, and the regulatory offence of intoxication in public, which includes intoxication by illegal substances, will remain.

(Trespass Act, 2018)

### [Narration]

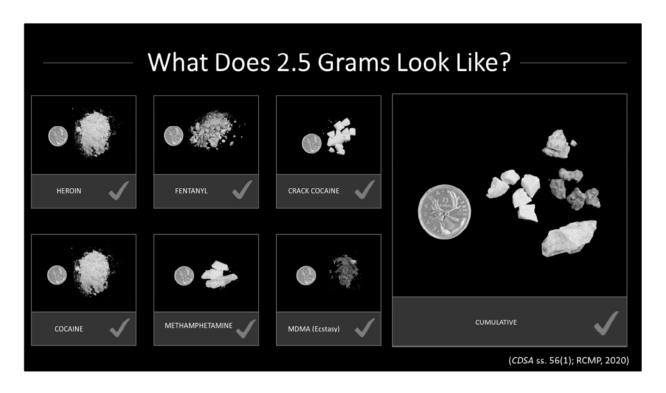
Until the exemption is implemented on January 31, 2023, public consumption is prohibited because the possession of the illegal substance is prohibited. By decriminalizing the possession of up to 2.5 grams of illegal substances listed in the exemption, there will no longer be a CDSA enforcement option for public consumption of those substances.

Enforcement related to public consumption of illegal substances listed in the exemption, will now fall under the bylaws of the municipality and policies of private establishments. You still have the discretion to remove people from these types of premises under the *Trespass Act*, if open substance use is occurring, and the property owner wants them removed.

You will notice that a bar or licensed establishment is not listed as exceptions in the exemption. This means you cannot arrest, search or seize illegal substances listed in the exemption under subsection 4(1) of the CDSA from an adult who possessed them for personal use inside a bar.

You will also notice that playgrounds, parks, campsites, concerts, swimming pools, and skating rinks are also not listed in the scope of the exemption. Although you may not have

the arrest, search and seizure authorities under subsection 4(1) CDSA at these locations, it is important to remember that trafficking remains an offence, and depending on the circumstances, other avenues of enforcement may be available, which include the *Trespass Act*, Municipal bylaws, *Liquor Control and Licensing Act*, and other *Criminal Code* offences.



Here are some examples of what 2.5 grams of heroin, fentanyl, crack cocaine, cocaine, methamphetamine, and MDMA look like without packaging in relation to the size of a quarter.

Cumulative means they can possess one of the substances listed in the exemption or a combination of those substances that does not exceed 2.5 grams, not including the weight of the packaging.

There are a number of challenges in identifying these substances because they come in various purities and colors and can range from liquid to a crystalized form. The only way to know exactly what the drug is would be to send a sample to Health Canada for analysis. Police officers will NOT be sending samples to Health Canada for analysis in cases where they come across an adult in possession of illegal substances listed in the exemption.

Health Canada and the provincial government know that some of the substances may be mixed with non-decriminalized substances. For example, fentanyl is often mixed with benzodiazepines, such as valium and Xanax, which are not listed in the exemption. In the

absence of a Health Canada analysis, you will not be able to determine the purity/toxicity of the illegal substance or what other substances are mixed in.

In most cases, you will need to ask the adult what they believe the illegal substance to be. If it is predominately believed to be fentanyl, for example, then you would treat the illegal substance as fentanyl.



Generally, illegal substances are packaged at the dose or point level which represents 100 milligrams or point 1 (0.1) of a gram. This means that 2.5 grams of illegal substances could be contained within 25 separate packages or 25 separate capsules.

In these photos you see:

- heroin packaged in one small Ziploc-type baggie,
- fentanyl packaged in tied plastic baggies, and
- MDMA in flaps of paper.

The last image is of a cumulative amount in a variety of packaging.



Due to the weight of the packaging material, 2.5 grams of illegal substances will weigh more than 2.5 grams. In this example, 2.5 grams of cocaine in tied plastic baggies, weighs 2.6 grams. The last image is 25 small Ziploc-type baggies each with .1 of a gram. The packaging weight brings the total weight up to 4.7 grams.

We know that illegal substances are toxic and police agencies have policies and procedures in place to handle these substances. You will have to act in good faith to determine the weights of these substances. It is not practical, nor safe, to take illegal substances out of the packaging. In this case, you would ask the adult how much they possess and take the weight of the packaging into consideration.

A 2020 study of illegal substance seizures by the RCMP indicated the average weight was 1.18 grams. Therefore, it will be more common to come across illegal substances that weigh less than 2.5 grams, including the packaging weight.



Police officers' adherence or lack of adherence to the exemption may be factors considered when responding to allegations of misconduct by police.

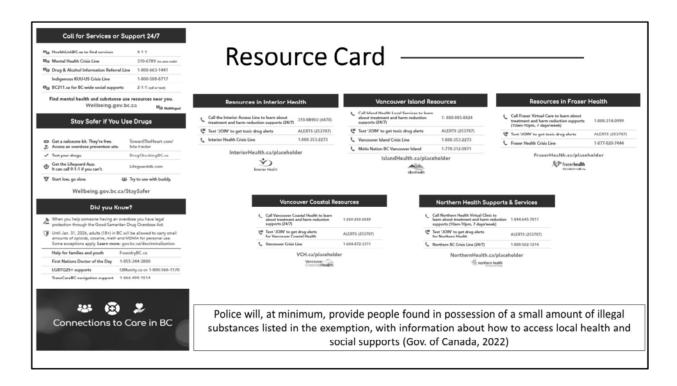
Police officers will be required to adhere to the exemption while continuing to provide lawful enforcement of drug laws, when appropriate. In these circumstances police officers' inherent discretion, good faith acts, and the reasonable expectations of the public that the policy objectives of the exemption will be met, will be important contextual factors in assessing any allegations of misconduct.

When you arrest an adult and find them in possession of 2.5 grams of illegal substances, that are listed in the exemption, you will return those illegal substances to them upon release.

The exemption requires that police officers do not seize illegal substances, listed in the exemption in quantities of 2.5 grams or less, when possessed by an adult who is compliant with the scope and conditions of the exemption.

In situations where illegal substances listed in the exemption are returned to the adult, it is

best practices to take notes, document the PRIME file and offer a resource card with information about how to access local health and social supports.



Regional Health Authorities will be providing police agencies with resource cards. These cards will be the size of a business card and fold out into sections. They will include local community resources, 24/7 resources, information about using illegal substances in a safer manner, and some additional supporting information.

You are NOT required to approach individuals to offer resource cards. The cards will only be distributed when there is a police interaction in progress, for example another violation or a reason for police contact, or the person makes a request to pursue a service, resource, program or treatment.

For example, when an adult is arrested for a criminal offence and is found in possession of 2.5 grams or less of cocaine for personal use, you will return the cocaine upon release and offer them a resource card. It is recommended that you document the return of the cocaine and offering of the resource card and whether or not they required any assistance from you in connecting them with those resources.

Follow your agencies policy and procedures related to the handing out of resource cards.



- No new amendments to PRIME. However, it is recommended that officers document any resources or referrals offered.
- When police seize, find, or acquire illegal substances listed in the exemption weighing 2.5 grams or under from an adult, they are not required to complete the Health Canada Seizure and Disposition Report (Form CS FRM 013).
- When an adult is booked into cells and is found in possession of illegal substances listed in the exemption weighing 2.5 grams or less, the substances will be recorded on the booking form and treated as property.

The exemption does not create any new amendments in PRIME and there are NO study fields or templates that need to completed. However, it is recommended that whenever a PRIME file is being generated in relation to a person in possession of certain illegal substances that weigh 2.5 grams and under, that you document that a resource card was offered and whether it was accepted or not. Any other steps taken to connect a person to health resources should also be documented. By documenting this in PRIME or your notebook, it will provide a record that the interaction took place.

Police agencies will not be completing the Health Canada Seizure and Disposition report when illegal substances listed in the exemption that weigh 2.5 grams or less are returned to an adult.

When an adult is booked into jail or cells and found in possession of illegal substances listed in the exemption, weighing 2.5 grams or less, the substances will be recorded on the booking form and treated as property. Illegal substances, such as fentanyl, should be placed in a sealed plastic bag and clearly labelled. Follow your agencies policies and procedures related to the handling and recording of illegal substances.

For those adults who will be held in custody for a court appearance, their illegal substances will be treated as property and transported by the sheriffs to the courthouse with their other personal effects.

Not for Narration: (insert reference)

Here is a basic flowchart that can be followed when you arrest a person for an offence and find them in possession of illegal substances.

The first thing is to determine their age. If they are youth, then follow the *Youth Criminal Justice Act*.

If the person is an adult, the first thing to do when you find illegal substances incidental to arrest, is ask yourself if they violated the scope or conditions of the exemption. For example, did the adult possess the illegal substances on K-12 school premises? If so, consider proceeding with a drug possession charge under subsection 4(1) CDSA.

If the adult was not in violation of the scope or conditions of the exemption, the next question would be to ask if the illegal substances are listed in the exemption. For example, are the illegal substances opioids, cocaine, methamphetamine or MDMA? If you are unsure, ask the adult.

s.15; s.19

Let's take what we have learned and apply it to three different scenarios.



You are conducting routine patrols in a residential neighbourhood. While walking through a community park, you observe an adult sitting quietly on a park bench smoking from a glass pipe. The adult has the glass pipe and a lighter in their hands and there is a small plastic bag of suspected methamphetamine located next to them on the bench. From your observation, the methamphetamine does not appear to weigh more than 2.5 grams.

Do you have reasonable grounds to believe this adult is committing an offence under subsection 4(1) of the CDSA? Why?

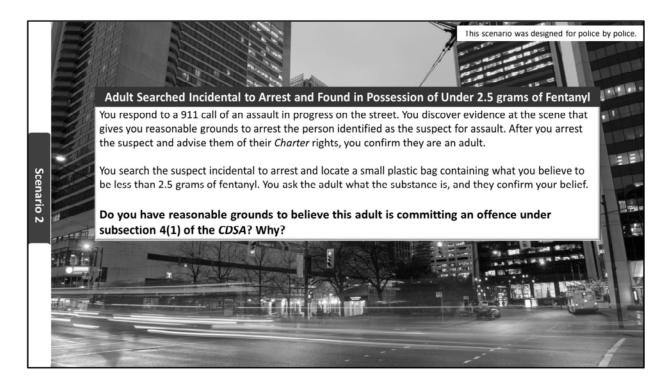
[pause]



s.15

Different communities may have differing opinions about public consumption. Some

communities may have developed bylaws so please refer to your agency's policies related to public possession and consumption.



You respond to a 911 call of an assault in progress on the street. You discover evidence at the scene that gives you reasonable grounds to arrest the person identified as the suspect for assault. After you arrest the suspect and advise them of their Charter rights, you confirm they are an adult.

You search the suspect incidental to arrest and locate a small plastic bag containing what you believe to be less than 2.5 grams of fentanyl. You ask the adult what the substance is, and they confirm your belief.

Do you have reasonable grounds to believe this adult is committing an offence under subsection 4(1) of the CDSA? Why?

[pause]

s.15

[Narration]

s.15

s.15

A resource card should be offered to the adult upon their release. It is recommended that whenever a PRIME file is being generated in relation to the non-seizure of illegal substances, that you document that a resource card was offered and whether it was accepted or not. Any other steps taken to connect a person to health resources should also be documented.



You stop a vehicle for a *Motor Vehicle Act* infraction. The driver, and lone occupant, is an adult with a valid driver's licence, valid vehicle insurance and has no signs of impairment. You observe what you believe to be less than 2.5 grams of crack cocaine in little baggies and a crack pipe in the front centre console of the vehicle.

Do you have reasonable grounds to believe the driver is committing an offence under subsection 4(1) of the CDSA? Why?

[pause]

s.15

Regardless of how you chose to proceed, it is recommended that whenever a PRIME file is being generated in relation to the non-seizure of illegal substances, that you document that a resource card was provided and whether it was accepted or not. Any other steps taken to connect a person to health resources should also be documented.



In addition to this webinar, the following resources are also available:

- Decriminalization Flowchart
- · Infographics from the RCMP, VPD and Health Canada
- For additional information from the provincial government regarding the exemption please email Decrim@gov.bc.ca

You may also scan the QR code to access the Ministry of Mental Health and Addictions website for additional information.

There will be an eLearning course related to *Decriminalization in British Columbia* available in 2023.

## References

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### [No narration required]

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### [No narration required]



Thank you for engaging in this presentation. I hope it has enhanced your understanding of the changes that will be implemented starting on January 31, 2023.

Take care and stay safe.

Date Prepared: December 7, 2022

# MINISTRY OF PUBLIC SAFETY AND SOLICITOR GENERAL POLICING AND SECURITY INFORMATION BRIEFING NOTE

**PURPOSE:** For **INFORMATION** for Glen Lewis,

Associate Assistant Deputy Minister and Director of Police Services.

**ISSUE:** Launch of the recorded presentation, *Decriminalization in British Columbia* – *Shifting to a Health Approach to Substance Use*, and completion of phase one police training materials to support law enforcement readiness in response to British Columbia's decriminalization framework.

### **SUMMARY:**

- In August 2022, members of the Decriminalization Law Enforcement Implementation Working Group (LEWG) endorsed a proposed training plan for police, set to be implemented in three phases.
- Phase one, which includes a recorded presentation along with job aid materials, has been finalized and will be made available to all police officers via the Canadian Police Knowledge Network (CPKN) on December 14, 2022.

### **BACKGROUND:**

- To meet federal requirements from Health Canada, Policing and Security Branch (PSB) and the Ministry of Mental Health and Addictions (MMHA) developed a training framework in collaboration with policing stakeholders to equip police with the knowledge, skills, and abilities on how to apply the exemption and provide an understanding of the referral process and pathways to care, when these supports are requested by people who use drugs. Health Canada continues to be fully briefed on the progress made by BC, including the work with respect to police training.
- The training plan was set to be implemented in three phases with the webinar launching in November 2022. As the webinar was prepared, policing stakeholders requested additional time for an in-depth review of the content by subject matter experts. Vancouver Police Department also provided curriculum design expertise and multimedia work in-kind to the project.
- Although seeking this input and feedback shifted the initial timeline, PSB and MMHA
  are satisfied that the efforts from the RCMP Pacific Region Training Centre and
  Vancouver Police Department will increase learner engagement and help ensure
  operational readiness as the subject matter experts were able to identify key impacts
  of the exemption on the role of police.
- The webinar does not include interactivity components and is being referred to as a
  recorded presentation by police training providers. This phase of training will be
  launched via the Canadian Police Knowledge Network (CPKN) on December 14,
  2022, along with other resources to support police (e.g. job aids, infographics,

Cliff: 636624

Date Prepared: December 7, 2022

FAQs).

- The recorded presentation is approximately 45-minutes in length and will help police
  officers understand what decriminalization is, their role in implementation of
  decriminalization, and provide information on the key features of the exemption.
  Detailed learning objectives are outlined in the Course Training Standard.
- As the exemption is set to come into effect on January 31, 2023, it is strongly
  recommended that the recorded presentation is viewed by this date. The recorded
  presentation will also be provided to the Justice Institute of British Columbia Police
  Academy to integrate into the municipal police recruit training program as
  appropriate. PSB will track completion rates through CPKN.
- Given the impacts to the initial launch date, PSB and MMHA consulted with police training providers and have agreed that a microlearning video will not be required in January 2023. This component of the training framework was intended to build on communications from the webinar and provide awareness of systemic changes prior to the exemption coming into effect. PSB and MMHA have opted to support organizational specific communication processes to promote uptake and ensure that most police officers will view the recorded presentation.
- PSB continues to manage the second phase of police training materials (the
  development of an online training course) informed by feedback and questions from
  pre-implementation training activities, anticipated to be launched by April 2023.

### **INDIGENOUS PEOPLES CONSIDERATIONS:**

- As indicated in the Indigenous Consultation Approach and Plan submitted to Health Canada, the Province will uphold the spirit and principles of reconciliation under the BC Declaration on the Rights of Indigenous Peoples Act, and continue to consult with Indigenous governments, communities, partners and experts when working towards the implementation of the exemption.
- Although there is no Indigenous-specific content in the recorded presentation, a
  member of the BC First Nations Justice Council is represented on the LEWG and
  has supported the proposed training framework. PSB will continue to engage with
  Indigenous partners during the development of training.

### OTHER MINISTRIES IMPACTED/CONSULTED:

Ministry of Mental Health and Addictions

### PREPARED BY:

Wendy Sutherland Senior Program Manager Policing and Security Branch 778 572-3413 APPROVED December 12, 2022 BY:

Matthew Brown
Executive Director
Policing and Security Branch
778 698-8432

Cliff: 636624

Date Prepared: December 7, 2022

### APPROVED December 13, 2022 BY:

Glen Lewis Associate Assistant Deputy Minister and Director of Police Services Policing and Security Branch 250 216-2430

### ATTACHMENT(S):

- Attachment 1: Letters to Chief Constables, Chief Officers
- Attachment 2: Course Training Standard for ADM signature



December 15, 2022 Ref: 636626

Chief Constables of Independent Municipal Police Departments
Chief Officer Dave Jones, SCBCTA Police Services
Chief Officer Deborah Doss-Cody, Stl'atl'imx Tribal Police Services
Acting Deputy Commissioner John Brewer, Commanding Officer, RCMP "E" Division
Superintendent Deborah Bourne, Officer in Charge, RCMP Pacific Region Training Centre
Superintendent Jennifer Keyes, Director, Police Academy at Justice Institute of British Columbia

Dear Chief Constables and Chief Officers:

# Re: Launch of the recorded presentation, Decriminalization in British Columbia – Shifting to a Health Approach to Substance Use

I am pleased to announce the completion of phase one of police training materials and the launch of the recorded presentation, *Decriminalization in British Columbia – Shifting to a Health Approach to Substance Use*, to support law enforcement readiness in response to British Columbia's decriminalization framework.

Over the past several months, Policing and Security Branch (PSB) and the Ministry of Mental Health and Addictions (MMHA) have worked closely with the RCMP Pacific Region Training Centre and the Vancouver Police Department to finalize materials that will help police officers understand what decriminalization is, their role in implementation of decriminalization, and provide information on the key features of the exemption. The resulting product of this hard work is a 45-minute recorded presentation that will be available to all police agencies at no cost via the Canadian Police Knowledge Network (CPKN).

The recorded presentation is intended to provide a high-level overview of the exemption to help ensure agencies are aware of any implications and can amend existing and/or prepare new policies and procedures. As the section 56(1) exemption is set to come into effect on January 31, 2023, it is strongly recommended that the recorded presentation is viewed by this date. The recorded presentation will also be provided to the Justice Institute of British Columbia Police Academy to integrate into the municipal police recruit training program as appropriate.

.../2

### Page 2

In addition to the presentation, MMHA has prepared key messaging and frequently asked questions, which will be hosted on the CPKN portal. We trust that these job aids will help answer operational questions as PSB continues to manage the second phase of police training materials (the development of an online training course) which will be informed by feedback and questions from pre-implementation training activities. It is anticipated that the second phase will be launched by April 2023.

In the coming weeks, police agencies will also receive copies of regional resource cards, specific to their health authorities. These cards were developed in partnership with health system partners, police leadership, and other partners, and include information on local health and substance use services. As a condition of the section 56(1) exemption, the purpose of these cards is for law enforcement to provide information on local services to people at risk of illicit drug toxicity, in place of criminal penalties. The resource card will only be distributed when there is a police interaction in progress (i.e., another violation or a reason for police contact) or if an individual makes a request to pursue a service, resource, program or treatment.

If you have any comments or questions regarding the section 56(1) exemption or the decriminalization training framework, please contact Wendy Sutherland, Senior Program Manager, or email <a href="mailto:decrim@gov.bc.ca">decrim@gov.bc.ca</a>.

Regards,

Glen Lewis

A/Assistant Deputy Minister and Director of Police Services Policing and Security Branch

Telephone: 250 387-1100



# BC MINISTRY OF PUBLIC SAFETY AND SOLICITOR GENERAL POLICING AND SECURITY BRANCH (PSB)

Course Training Standard (CTS)

### Course Name:

### Decriminalization in BC: Shifting to a Health Approach to Substance Use

Police Training Webinar

### **Final Approval Signatures:**

Glen Lewis

Assistant Deputy Minister and
Director of Police Services
Policing and Security Branch
Ministry of Public Safety and Solicitor General

Deputy Chief Constable Fiona Wilson, Vancouver Police Department Vice-President BC Association of Chiefs of Police

**Darryl Sturtevant** 

Assistant Deputy Minister Substance Use Policy Branch

Ministry of Mental Health and Addictions

Superintendent Deborah Bourne

Officer in Charge

Pacific Region Training Centre (PRTC)

Royal Canadian Mounted Police

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REVISION HISTORY	
Course Title: Decriminalization in BC: Shifting to a Health Approach	h to
Substance Use	
Date of Course Design: October 2022 to November 2022	
Date of Course Launch: December 14, 2022	
Date of Revision:	
Date of Nevision.	
Name of Person Responsible	
Name of Person Responsible	
Name of Person Responsible for Change(s):	
Name of Person Responsible for Change(s):	
Name of Person Responsible for Change(s):  Summary of Change(s):  Date of Revision:	
Name of Person Responsible for Change(s):  Summary of Change(s):	

### **COURSE DETAILS**

**Course Overview:** This course was developed in collaboration with subject matter

experts from the Ministry of Mental Health and Addictions (MMHA), the Ministry of Public Safety and Solicitor General (PSSG), the RCMP, and Vancouver Police Department. Watching

the webinar will help police officers understand what decriminalization is, their role in implementation of

decriminalization, and provide information on the key features of

the exemption.

**Course Goal:** The webinar will provide a high-level overview of the exemption,

to help ensure agencies are aware of any implications and can amend existing and/or prepare new policies and procedures.

**Instructional Strategy:** The material will be presented in a webinar format with recorded

videos from the Ministry of Mental Health and Addictions, and the BC Association of Chiefs of Police. Narration is provided by

the Vancouver Police Department.

**Course Design Methodology:** The webinar content was developed utilizing information and

expertise from the Law Enforcement Implementation Working Group, including subject matter experts from the RCMP and Vancouver Police Department, and forms part of the phase 1: pre-implementation training framework for police officers in BC.

**Supporting Documents:** Supporting documents include:

• **Iterative FAQ Resource** – Questions and responses to technical/detailed aspects of applying the exemption.

Will be updated on an ongoing basis

Decriminalization Myths/Facts

Job Aids (visuals and infographics)- will be updated

regularly

Estimated Time for

Completion:

The webinar is pre-recorded and is approximately 45 mins in length.

Prerequisites:

There are no pre-requisites to the webinar. The webinar does

form part of the pre and post implementation training framework for police on the section 56 exemption.

Page 3 of 6

Other Provincially-Approved Courses:

None

Target Audience: It is recommended that all police officers in British Columbia view

the webinar. The webinar will also be provided to the Justice Institute of British Columbia Police Academy to integrate into the

municipal police recruit training program as appropriate.

**Timeline for Completion:** As the exemption is set to come into effect on January 31, 2023,

it is strongly recommended that the webinar is viewed by this

date.

Refresher Training:

There are no requirements to take this training on an ongoing

basis.

Compliance Reporting: To support the monitoring and evaluation framework established

by the Ministry of Mental Health and Addictions, data will be

requested regarding completion rates.

### LEARNING OBJECTIVES AND EVALUATION

By the end of the webinar, police learners will be able to:

- 1. Examine British Columbia's integrated approach to decriminalization.
  - Review legislation and guidelines that were implemented to reduce drug possession charges.
  - Define decriminalization.
- 2. Explain how decriminalization is being accomplished in British Columbia through a subsection 56(1) CDSA exemption.
  - Identify the key features of decriminalization in British Columbia.
  - Outline the scope of the exemption.
  - Identify the conditions of the exemption.
- 3. Apply a workflow chart related to drug possession to a variety of scenarios.
  - Examine the workflow related to drug possession.

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### CONTRIBUTORS

Subject-matter experts from the Law Enforcement Implementation Working group contributed to the webinar. By naming some of the many who contributed to this project, we sincerely thank you all.

### **Subject Matter Experts:**

Ghalib Bhayani, Chief Superintendent RCMP

Shane Holmquist, Sergeant RCMP

Fiona Wilson, Deputy Chief Constable, Vancouver Police Department

Mike Serr, Chief Constable, Abbotsford Police Department

Betty Froese, Manager, Learning and Development Unit, Vancouver Police Department

**Curriculum Development**: Vancouver Police Department, RCMP Pacific Region Training Centre.

Audio Visual Production: MMHA

Programming: MMHA/PSSG

# **MINUTES**

### **Mental Health Policing Working Group**

Thursday, January 5, 2023 MS Teams, 3:00pm – 4:00pm

#### Attendees:

Devon Windsor (Chair, PSSG), Sally Lin (PSSG), Balraj Kahlon (PSSG), Wendy Sutherland (PSSG), Ali Bajwa (PSSG), Marc Verkuyl (PSSG), Tricia Poilievre (MMHA), Elise Buckley (MMHA), Chris Van Veen (MMHA), Brittany Morgan (HLTH)

### Regrets:

Juanita Jara (MMHA), Gerrit van der Leer (HTLH), Danielle Parish (MMHA), Irina Eldridge (MMHA), Holly Clow (MMHA), Raj Maharaj (HLTH), Christie Wall (MMHA), Nimmi Takkar (PSSG), Kendall Hammond (HLTH)

### **PPSM Project Update**

Update on PPSM – Devon Windsor

o s.12

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- Gradually transitioning to broader engagements about potentially creating new legislation to replace the *Police Act*
- Hoping to increase the size of the PLM group, with new members ideally joining in April
- Safer Communities Action Plan was announced on Nov. 20th
- RCMP core policing funding announced on Nov. 23rd
- Project Tracker check-in
  - Not useful for now, given low usage

### **Progress Updates**

### All:

- Mandate Letters
  - Discussed overlapping mandates and changes to letters
  - PACT removed from MMHA mandate letter
  - The Safer Communities Action Plan was added to MMHA, PSSG, and AG mandate letters

### PSSG:

- Mental Health and Policing in BC Data Project Sally Lin
  - In October, PSB and BC Stats started discussing the opportunity to collaborate on a data project related to policing

- Eight people in the external group, seven people in the internal advisory group.
- Met with staff from PRIME to learn about the data systems to help formulate research question
- s.12
- Police Training for decriminalization Wendy Sutherland
  - Training for officers is taking a two-phased approach
  - Approximately 800 municipal officers have done the training but unsure about RCMP completion rates because cannot track
  - Helpful comments from officers provided through the mandatory post-training survey
- Collaborative programs, Situation Tables -- Ali Bajwa
  - Preparation for fiscal year-end
  - o s.13; s.17
  - Engaging with Saanich PD to implement ST
  - Engaging in Vancouver for ST, lots of interest from DTES communities
  - Ongoing work on intervention circles, First Nations-led situations tables

### MMHA:

- Decriminalization Chris van Veen
  - January 31<sup>st,</sup> is the go-live date for decriminalization
  - Lots of communications, key messages, and Q&A work being done in preparation for decriminalization
  - Completed regional town halls with First Nations, which were well received
  - o Monitoring and evaluation, setting up data sharing with police
- Crisis Response Tricia Poilievre and Elise Buckley
  - CAR program announced, \$3 million in funding
  - Developing the application process for funding
  - Engagement with health authorities, reaching out to police partners and organizations representing people with lived experience
  - Civilian-led crisis response PACT: 10 care teams announced and working on how to create the program criteria and application process for communities to apply for the funding

### MOH

- In Plain Sight progress Brittany Morgan
  - Planning for a task team meeting in mid-January

Next meeting: February 2nd, 2023, 3 - 4 pm

# Police Training Stats - Decriminalization in BC: Shifting to a Health Approach to Substance Use January 27, 2023

### **Independent Municipal Police Departments**

Agency	Number of Completion	Total Authorized Strength *	Percent completion
Abbotsford Police Department	99	213	46%
Central Saanich Police Service	20	23	87%
Delta Police Department	168	194	87%
Justice Institute of British Columbia (JIBC)	36		
Metro Vancouver Transit Police	176	183	96%
Nelson Police Service		18	0%
New Westminster Police Department	91	113	81%
Oak Bay Police Department	15	23	65%
Port Moody Police Department	45	52	87%
Saanich Police Department	44	166	27%
Stl'atl'imx Tribal Police		14	0%
Surrey Police Service	197	315	63%
Vancouver Police Department	795	1348	59%
Victoria Police Department	83	249	33%
West Vancouver Police Department	38	81	47%
Total Munis	1807	2992	60%

### RCMP by district

Districts	# Completed course	Total members	Compliance %
E HQ	884	1,367	64.6% 73.6% 68.8% 69.9% 60.1% 67.2%
Island	484	657	71.50%
LMD	1,594	2,314	64.70%
North	440	629	67.60%
Southeast	520	864	53.80%
TOTAL	3,922	5,823	63.80%

# Police Training Stats - Decriminalization in BC: Shifting to a Health Approach to Substance Use January 27, 2023

### High-level summary

Total Municipal	1807	2922
Total RCMP	3922	5823
Total All agencies	5729	8745

66% of all frontline officers trained as of January 30, 2023

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s.12; s.13