

Policy Name:	ASSAULT		
Policy #:	OP 4.34.3	Last Updated:	2022-04-07
Issued By:	INVESTIGATIVE SERVICES BUREAU	Approved By:	SURREY POLICE BOARD
		Review Frequency:	AS REQUIRED

RELATED POLICIES

- OP 3.1 *Arrest and Detention*
- OP 4.13 *Crime Scene Management*
- OP 4.17 *Intimate Partner Violence*
- OP 4.22 *Family Law Act and Civil Court Orders*
- OP 4.28 *Hospital Emergencies*
- OP 4.34.9 *Sexual Assault Investigations*
- OP 4.34.12 *Weapons and Firearms*
- OP 4.49.6 *Walk-Through Warrants*
- OP 4.52.1 *Vulnerable People – Trauma-Informed Practices*

1. PURPOSE

- 1.1. To provide Surrey Police Service (SPS) Members with direction regarding the processes for undertaking and managing assault investigations.
- 1.2. To recognize trauma and use trauma-informed approaches during assault investigations.

2. SCOPE

- 2.1. This policy applies to all SPS Members.

3. POLICY

- 3.1. SPS considers complaints of assault to be a priority. Arrest and criminal prosecution of offenders is the objective for all investigations where allegations of physical, sexual or other forms of abuse are substantiated.
- 3.2. Incidents of Intimate Partner Violence are potential life-threatening situations for police, the suspect and victim. Intimate Partner Violence calls and complaints to police, including breach of release or protection orders, shall be treated as a high priority, regardless of requests to cancel prior to police arrival (See OP 4.17 *Intimate Partner Violence*).
- 3.3. Members attending incidents or complaints of an assault must conduct an evidence-based risk assessment to determine the threat level for the victim and create a safety plan based on those risks.
- 3.4. The safety of victims and public safety are important considerations. Accordingly, Member interventions and actions must always consider both the safety of the victim, family members and the public.
- 3.5. Members should arrest the primary aggressor (see section 4.14 below) when allegations or evidence of physical or sexual assault or other criminal charges are supported, and appropriate charges recommended to Crown Counsel.
- 3.6. Police attendance at an assault complaint may be the only chance for effective intervention when a victim is elderly and abuse has been long term, or when cultural, religious, community or family values, sexual orientation or disability (physical or mental) make it difficult or impossible to seek assistance to stop the violence. In such situations, respectful and dignified treatment of the victims and an understanding of the dynamics of Intimate Partner Violence are critical. Members must be sensitive and accommodating when dealing with victims/witnesses who have special needs due to isolation, mobility restrictions, and language or communication abilities. It may be necessary to alter investigative procedures for victims with special needs.

4. PROCEDURE

Priority Response

- 4.1. When the Operational Communications Centre (OCC) receives information of an in-progress assault occurring or will likely occur, the OCC will obtain as much information as possible including:
 - i. location of the suspect and victim;
 - ii. potential access to weapons and firearms;
 - iii. injuries;
 - iv. location of potential witnesses; and

- v. other people present in the premises.
- 4.2. Where practicable, a two Member police unit, or at least two Members, will be dispatched to respond to an in-progress incident of assault. A responding Member must conduct a risk assessment to determine if waiting for a second member to arrive would increase the potential for injury or death of the victim.
- 4.3. The on-duty Supervisor is responsible to assess and balance the need to respond urgently with adequate resources.

Member's Responsibility

- 4.4. Where Members have reasonable grounds to suspect that the ongoing safety of individual(s) within a premises is in immediate jeopardy, Members may forcibly enter a premises, if necessary, to ensure the safety of all parties. Except in exigent circumstances, Members should consult a Supervisor before using force to enter a private premises without a Feeney Warrant or Court Order.
- 4.5. If a criminal offence has occurred and a suspect has left the premises or area prior to police arrival, Members must assess the likelihood of the suspect's return and take steps to ensure victim safety. Members must make immediate efforts to locate and arrest the suspect where grounds exist. Members must complete a Report to Crown Counsel with a request for an arrest warrant as soon as practicable. In cases where the suspect has fled and there is concern for the safety of the victim, witnesses, or the public, Members must use the Walk-Through Warrant Process to ensure that a warrant of arrest for the suspect is issued immediately and entered on CPIC (see OP 4.49.6 *Walk-Through Warrant*).
- 4.6. Members must be sensitive to cultural differences, potential power imbalances, marginalized and traumatized victims when approaching these potentially volatile situations. Examples include but are not limited to:
- i. mental health or physical disability;
 - ii. family values or pressures;
 - iii. religious beliefs;
 - iv. gender inequalities;
 - v. unwillingness to report;
 - vi. lack of financial independence;
 - vii. language barriers;
 - viii. cultural and social isolation;
 - ix. sexual or emotional abuse;
 - x. lack of support services;
 - xi. children at risk;
 - xii. immigration status; and
 - xiii. Indigenous background.

4.7. If practicable, attending Members shall attempt to determine whether civil or criminal protection orders and/or restraining orders are in effect by querying CPIC, PRIME and the BC Protection Order Registry **S. 15** prior to arrival on scene.

4.8. Members attending an incident of assault must:

- i. make critical observations of the scene on their arrival;
- ii. ensure the safety of victims and witnesses;
- iii. attend to the victim's medical needs and call BC Ambulance Service if the victim is injured;
- iv. arrest the suspect if the Member has reasonable grounds to believe an assault or other serious criminal offence has occurred;
- v. gather and secure evidence;
- vi. ensure photographs of the victim's injuries and the crime scene have been obtained;
- vii. interview and obtain audio or audio-video recorded statements from the individuals involved and witnesses;
- viii. conduct an area canvass for video; and
- ix. complete a detailed PRIME-BC General Occurrence Report regardless of an arrest being made (see related policy – OP 4.13 *Crime Scene Management*).

4.9. To ensure physical evidence relating to the victim's injuries is properly documented, Members must request written consent from the victim for third parties (including doctors) to disclose medical information records to SPS.

4.10. Members must conduct a Risk Assessment to determine the level of threat for the victim and create a Safety Plan, including:

- i. is the identity of the suspect known, relationship history, status of relationship, escalation of abuse, children, threats, forced sex, choking or strangulation, biting, stalking, social control, marginalization, and cultural implications;
- ii. the complainant's perceptions of risk, perception of personal safety and future violence;
- iii. suspect's history, including: previous domestic/criminal violence history, court orders and any violation of court orders, alcohol and illegal drugs and substances abuse, history of mental illness, employment instability, suicidal ideation; and
- iv. access to weapons and/or firearms, and whether previously used and/or threatened.

4.11. When Members have concerns, based on their preliminary investigation that there are high safety risks and/or serious injuries as the result of an assault, Members shall contact their Supervisor and the Supervisor shall consult the NCO in charge of a Special Investigations Team. If the incident occurs on a weekend or during evening hours, the on-call Special Investigations Team NCO shall be contacted by the Duty Officer for guidance, potential assignment, and the assistance of a Victim Support Worker.

- 4.12. Members will assess the reasonable grounds prior to making an arrest and/or recommending charges. All sources of evidence shall be considered: victim and suspect statements; witness statements; 9-1-1 calls; physical evidence; history of abuse; and escalation of violence.
- 4.13. Members must identify and may arrest and recommend charges against the primary aggressor. When both parties have been injured, Members must document their reasons for determining the primary aggressor which may include:
- i. relationship history and pattern of violent behaviour and/or abuse;
 - ii. the nature and extent of physical injuries and/or emotional trauma;
 - iii. defensive wounds; and
 - iv. circumstances, physical ability, and skills to commit the assault.
- 4.14. Arresting both the primary aggressor and the victim is not recommended. If this is necessary in the circumstances, approval must be obtained from a Member's Supervisor.
- 4.15. If bail conditions are recommended, Members must consider risk factors to ensure the safety of the victim.
- 4.16. If the victim has sustained injuries, and has received medical attention or treatment, Members must notify the victim where and when to attend so that photographic evidence of the assault can be documented. If the Lower Mainland District Integrated Forensic Identification Services is not available, Members must ensure photographs are captured and saved on file in accordance with evidence handling procedures.

Children Involved

- 4.17. When children are involved, and parental custody of children is an issue, Members may confirm custody orders by contacting the provincial Protection Order Registry **S. 15** [REDACTED].
- 4.18. If a Member determines that a child is in need of protection under sections 13 and 14 of the *Child, Family and Community Service Act* or a criminal offence against a child is suspected, the Member must notify the Ministry of Children and Family Development (MCFD) to request their attendance.
- 4.19. If a MCFD Child Welfare Worker attends a scene to ensure that a child is safe, the Child Welfare Worker may return the child to the victim parent at a safe location or take the Child to a safe place identified by the victim parent or take the child to another safe place.
- 4.20. If a situation affecting a child is of an immediate serious nature and a MCFD Child Welfare Worker is not readily available, Members can "take charge" of the child under s. 27 of the *Child, Family and Community Service Act* (parental consent is not required) and then deliver the child to the MCFD Child Welfare Worker as soon as practicable (see OP 4.22 *Family Law Act and Civil Court Orders*).

Firearms and Weapons

- 4.21. Members must assess the situation regarding a suspect's access to firearms or other offensive weapons. Members must determine if the suspect owns or has access to firearms and check the Canadian Firearms Registry. If a criminal offence has occurred and firearms are present, Members may seize the firearms under s. 117.04 of the *Criminal Code* (with or without warrant, including firearms-related certificates, licenses, permits and authorizations) and do so regardless of whether the suspect has used/threatened to use them.
- 4.22. Members must determine whether the circumstances provide authority under s. 487 of the *Criminal Code* to search for firearms and/or offensive weapons to support a criminal charge, or whether seizure under s. 117.04 of the *Criminal Code* to safely secure firearms is appropriate.
- 4.23. When there is insufficient evidence to warrant charges or Crown Counsel does not approve charges, Members must consider a Preventative Prohibition Order under s. 111 *Criminal Code* (see OP 4.34.12 *Weapons and Firearms*).

Disclosure of Patient's Records

- 4.24. Except in limited circumstances such as discretionary disclosures under the *Freedom of Information and Protection of Privacy Act* and mandatory disclosures under the *Gunshot and Stab Wound Disclosure Act* or by execution of a search warrant or production order, hospitals will not disclose Personal Information of a Patient without the Patient's consent.
- 4.25. Despite section 4.24 above, hospitals administered by the Fraser Health Authority (FHA) have discretionary authority under FHA policy to disclose personal information about patients, hospital personnel and other persons under the *Freedom of Information and Protection of Privacy Act* (see OP 4.28 *Hospital Emergencies*). For assistance with hospital-police disclosures and cooperation, consult the SPS General Counsel, Legal Services **S. 22(1)**.

APPENDIX A: DEFINITIONS

“CPIC” means the Canadian Police Information Centre computer system, a national Police Service administered by the Royal Canadian Mounted Police (RCMP).

“Duty Officer” means the Frontline Policing Inspector.

“Intimate Partner Violence” or “Domestic Violence” means physical or sexual assault, or threat of violence, against a current or former intimate partner, spouse, regardless of being legally married or living together at the time of the assault or threat. It also includes criminal harassment, threats, or mischief, where there is a reasonable basis to conclude that the act was done to cause, or did in fact cause, fear, trauma, suffering or loss to the intimate partner. These terms apply to all intimate relationships, same sex relationships, men in heterosexual relationships, and those in LGBTQ2S+ relationships.

“MCFD” means the Ministry of Children and Family Development.

“Member” means a sworn Police Officer appointed by the Surrey Police Board.

“NCO” means non-commissioned officer and includes the rank of Sergeant and Staff Sergeant or person acting in that role.

“OCC” means the Operational Communications Centre.

“Patient” means a person who receives care or services from British Columbia Emergency Health Services.

“Personal Information” means any information about an identifiable individual.

“PRIME-BC” means the Police Records Information Management Environment, British Columbia's police records management system.

“SPS” means Surrey Police Service.

“Supervisor” means a Team Leader, Manager, Sergeant, Staff Sergeant, Inspector, Superintendent, Deputy Chief Constable, Chief Constable, and any other person acting in a Supervisory capacity who is accountable for a particular area or shift on behalf of SPS.

APPENDIX B: REFERENCES

Criminal Code, R.S.C. 1985, c. C-46

Child, Family and Community Service Act, R.S.B.C. 1996, c. 46

Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c. 165

Gunshot and Stab Wound Disclosure Act, S.B.C. 2010, c. 7

Regina v. Godoy, [1999] 1 S.C.R. 311 (Supreme Court of Canada)