

OM - ch. 41.3. Human Deaths

Directive Amended: 2013-12-20

For information regarding this policy, contact National Criminal Operations, Contract and Aboriginal Policing at GroupWise address [OPS POLICY HQ](#).

1. Policy
2. Investigation
3. Notification of Death
4. Deceased Possessing Criminal Record
5. Organ Transplant Donations
6. Autopsy
7. Decomposed Bodies and Skeleton
8. Death Aboard Aircraft
9. Inquest
10. Assist Foreign Countries

1. POLICY

1. 1. All reportable deaths occurring within RCMP jurisdiction must be treated as suspicious and thoroughly investigated.
1. 2. All scenes must be assessed for potentially biohazardous material, including the presence of a dangerous suspect.
1. 3. The RCMP has primary control of the scene until released to another agency. Investigations are a cooperative effort between the RCMP, medical examiner, coroner, pathologist, other law-enforcement services and other municipal/provincial/territorial/federal agencies. See div. supplements.

2. INVESTIGATION

2. 1. First Member at Scene

2. 1. 1. Do not enter a scene that you suspect has been exposed to chemical, biological, radiological, nuclear (CBRN) agents. Protect yourself and the public from further danger or exposure, secure the scene and request assistance. For CBRN procedures, see Part 14.
2. 1. 2. If there is no indication of CBRN contamination, secure the scene for investigation.
2. 1. 3. You are responsible for taking control, preserving the scene and evidence, and directing assisting agencies, e.g. ambulance and fire personnel. Consider the possibility that these agency personnel may have overheard comments and may be witnesses.
2. 1. 4. Restrict access and document the names and actions of all persons entering and exiting the scene.

- 2. 1. 5. Obtain the names of persons who entered the scene before your arrival. Document their activity at the first available opportunity.
- 2. 1. 6. Do not draw conclusions or end your investigation until sufficient evidence is gathered to assist in determining the cause of death.
- 2. 1. 7. The initial assessment of the scene should include observations and inquiries to determine:
 - 2. 1. 7. 1. Does the death appear natural or unnatural?
 - 2. 1. 7. 2. Is the location of the body logical or true place of death?
 - 2. 1. 7. 3. Are the injuries consistent with position of body, e.g. face up, prone?
 - 2. 1. 7. 4. Is age a causal factor, e.g. assessment of age?
 - 2. 1. 7. 5. Is there evidence of intrusion versus secure premises?
 - 2. 1. 7. 6. Is there evidence of violence or disarray, e.g. blood trail or spatter, other human tissue or fluid including hair and semen, weapons, obvious injury, disturbed clothing?
 - 2. 1. 7. 7. What is the ambient temperature, i.e. compare body temperature to the environment?
 - 2. 1. 7. 8. Is there insect or vermin activity?
 - 2. 1. 7. 9. Is there any evidence of medication or drugs, e.g. special places to look are medicine cabinet, purses, refrigerator, and waste basket?
 - 2. 1. 7. 10. What were the recent activities?
 - 2. 1. 7. 11. What was the lifestyle, health, habit, interest, work, associates of deceased, etc.?
- 2. 1. 8. Consider the following:
 - 2. 1. 8. 1. What may appear to be an accidental or explainable death may be a homicide. The coroner/medical examiner is the only authority who may determine a cause of death and may want to attend the scene. Tell your supervisor and the coroner/medical examiner of the details.
 - 2. 1. 8. 2. Symptoms of severe hypothermia can resemble death, and death can only be confirmed after the body has been warmed to normal temperature and resuscitation efforts have failed.
 - 2. 1. 8. 3. The death of a child caused by Shaken Baby Syndrome is not readily detected during an external examination. The cause of such a death may be determined through pathological examination.
 - 2. 1. 8. 3. 1. Consider that most shaken baby cases result in retinal hemorrhages. Ensure that an ophthalmologist is consulted. Normally, the Major Crime Unit will be aware of the preferred specialist in your jurisdiction. Other injuries often associated with Shaken Baby Syndrome are grab sites (bruises around shoulders or chest) or fractures of skull, ribs or legs. Neck injuries are rarely observed.
 - 2. 1. 8. 3. 2. Also be aware of evidence at the scene which may have been a factor that precipitated the baby being shaken, e.g. vomit, diarrhea.
 - 2. 1. 8. 3. 3. If Shaken Baby Syndrome is suspected, ensure a multiagency approach is undertaken, e.g. include social workers, hospital staff.

- 2. 1. 8. 4. Sudden Infant Death Syndrome (SIDS) is defined as a natural death which is sudden and unexpected but remains unexplained. Possible causes of death have been ruled out by an examination of the scene, a thorough investigation, an autopsy, and a medical review.
- 2. 1. 9. If the death appears suspicious:
- 2. 1. 9. 1. Notify your supervisor and request the attendance of support services, e.g. General Investigation Sec. (GIS), Major Crimes Unit, Forensic Identification Sec. (FIS).
- 2. 1. 9. 2. While waiting for support services to arrive, make detailed notes of your scene assessment.

2. 2. Investigator

- 2. 2. 1. Investigate suspicious deaths and homicides using the principles of major case management. See ch. 25.3.
- 2. 2. 2. Notify the provincial/territorial coroner or medical examiner of all reportable deaths occurring within RCMP jurisdiction in accordance with provincial/territorial requirements.
- 2. 2. 3. Note that crime scene evidence involving human material (DNA, hair and fibre, blood spatters) can reveal the identification of the victim or offender, cause of death or type of weapon. Leave the recovery and preservation of the physical evidence for the direction of the exhibit manager or FIS.

EXCEPTION: Any evidence that is subject to contamination by weather or other exigent circumstances should be preserved and protected immediately, and the actions documented accordingly.
- 2. 2. 4. Take extreme care during recovery and preservation of physical evidence. Refer to the *Investigator's Guide to Forensic Evidence*.
- 2. 2. 5. Immediately notify your supervisor if a death occurred as a result of police action, or while the person was held in RCMP custody, under arrest or control of police whether in hospital, ambulance, other transport, or police facility.
- 2. 2. 6. If the deceased was a non-Canadian, notify the appropriate consulate/embassy.

2. 3. Supervisor/Unit Commander/Detachment Commander

- 2. 3. 1. Except in extenuating circumstances, ensure an NCO/delegate attends the scene of all human deaths.
- 2. 3. 2. Notify division headquarters if a death occurred as outlined in sec. 2.2.5.
- 2. 3. 3. For OSR occurrence reporting requirements (established homicides or not), and mandatory submissions of homicide surveys (form 138-1), comply with the procedures outlined in IM 1.1.F.

2. 4. Division Criminal Operations Br.

- 2. 4. 1. If the death occurred as outlined in sec. 2.2.5., immediately send a briefing note to National Headquarters, ATTN: National Operations Centre and the OIC National Criminal Operations, Contract and Aboriginal Policing.

3. NOTIFICATION OF DEATH

- 3. 1. As soon as possible, arrange for notification of next of kin.

3. 2. Provide information on the availability of resources and services to assist the next of kin. If Victim Services or a chaplain are available to attend, comply with directives outlined in ch. 37.6.
3. 3. Do not release the name of the deceased to the news media until the next of kin has been notified and agrees to the release. Do not release the cause of death to the news media until it has been determined by an autopsy and the next of kin agrees to the release. See ch. 27.2.
3. 4. Allow sufficient time for the first next of kin notified to inform other family members.
3. 5. If the deceased was a member of National Defence, notify the CO of the nearest Canadian Forces Base.

4. DECEASED POSSESSING CRIMINAL RECORD

4. 1. If a deceased is known to have a criminal record, report the date, place of death and FPS number, to National Headquarters, ATTN: Information and Identification Services Dir., on form C-163.
 4. 1. 1. If possible, take the fingerprints. Use discretion when obtaining the fingerprints. When possible, avoid embarrassment to the deceased's family.
 4. 1. 2. If the FPS number is available, take one fingerprint on form C-163.
 4. 1. 3. If the FPS number is not established, take a complete set of fingerprints on form C-216T.
 4. 1. 4. When cadaver fingerprints are received by Canadian Criminal Real Time Identification Services, the FPS file is annotated with a death notification. The FPS file will be purged when the deceased person would have reached the age of 80. The deceased individual's fingerprints will remain searchable in the National Repository of Criminal Records until its purge date.
 4. 1. 5. If fingerprints cannot be obtained, state the reason on form C-163.

5. ORGAN TRANSPLANT DONATIONS

5. 1. If death was caused by a criminal act or suspicious circumstances, do not allow the removal of organs or tissues until it can be established that they will not be required for analysis. See div. supplements.

6. AUTOPSY

6. 1. In order to obtain and secure evidence, provide assistance to the pathologist and obtain information which may assist in the investigation.
6. 2. Attend all autopsies when there is evidence or suspicion of foul play or homicide.
6. 3. Consider attending autopsies when the death is believed to be self-inflicted, the result of an accident or of unknown cause.
6. 4. If the deceased has not been positively identified, submit fingerprints to National Headquarters, ATTN: Information and Identification Services Dir.
 6. 4. 1. If necessary, have photographs, odontograms (dental records) and X rays taken.
 6. 4. 2. Enter and check on CPIC.

7. DECOMPOSED BODIES AND SKELETON

7. 1. If a skeleton is believed to be of ancient origin, cooperate with authorized anthropologists, local aboriginal leaders or archaeologists in protecting and respecting the site. See div. supplements.

8. DEATH ABOARD AIRCRAFT**8. 1. General**

8. 1. 1. It is possible that a death occurring on an international flight may be the result of a contagious or infectious disease, therefore, specific precautions must be taken.
8. 1. 2. The *Quarantine Regulations* sec. 19(1) and 19(2) require the person in charge of an aircraft arriving in Canada from a destination outside Canada, to immediately notify the quarantine officer at the airport of the death of any person on board.

8. 2. Member

8. 2. 1. When notified that a death occurred on an international flight bound for Canada, ensure that a quarantine officer from Health Canada or Canada Border Services Agency has been contacted to meet the flight upon arrival. The passengers, crew and victim on board the aircraft may disembark only upon approval of the quarantine officer.

NOTE: If a death occurred on a domestic flight, investigate as a sudden death. Determine if the victim had connected from an international flight, and if so, follow the *Quarantine Regulations*.

8. 2. 2. Provide assistance to the quarantine officer as requested.
8. 2. 3. When entering a biohazardous area, wear protective clothing provided by the quarantine officer.

9. INQUEST**9. 1. Division**

9. 1. 1. Forward a copy of all recommendations resulting from an inquiry or inquest relative to deaths occurring in police custody or resulting from police action and the division response to each recommendation to National Headquarters, ATTN: OIC National Criminal Operations, Contract and Aboriginal Policing. See ch. 19.5. for in-custody deaths.

10. ASSIST FOREIGN COUNTRIES**10. 1. Detachment/Unit Commander**

10. 1. 1. Give priority to a request from National Headquarters to notify the next of kin of a person who died in a foreign country.
10. 1. 2. When you have notified the next of kin, immediately notify National Headquarters, ATTN: OIC International Liaison Br., National Central Bureau, Interpol.
10. 1. 3. If the identity of the deceased is unknown and you believe that he/she may be from outside Canada, notify National Headquarters, ATTN: OIC International Liaison Br., National Central Bureau, Interpol. Supply a complete description of the

remaining clothing, fingerprints, odontograph, and head-and-shoulders photographs. See II.6.F.