Audit of the Detector Dog Program

INTERNAL AUDIT SECTOR

NOVEMBER 3, 2017
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EXECUTIVE SUMMARY

What We Examined

The Audit of the Detector Dog Program (the Program) is being conducted as part of Correctional Service Canada (CSC) Internal Audit Sector’s 2016-2019 Risk-Based Audit Plan.

The objectives of this audit were to provide assurance that:

- a management framework was in place to support the Program; and
- CSC was complying with relevant legislation and policies related to the Program.

The Audit of the Detector Dog Program was national in scope and included visits to all five regions.

The audit examined whether CSC policies, guidelines and manuals were clear and supported the Detector Dog Program; CSC had defined and communicated strategic objectives and performance measures related to the Program; key roles and responsibilities were defined, documented and understood; training requirements were identified, completed and met the needs of the Organization; monitoring and reporting processes were in place and improved the Program, and assets allocated to the Program were being monitored and utilized economically, efficiently and as intended. Additionally, the audit looked at whether CSC was complying with various legislative and CSC policy requirements related to the Program, including the kennels and vehicles, training kits, searches and documentation.

Why it’s Important

The Program plays an important role in assisting the Service to prevent the presence of illegal substances within its institutions. This is accomplished through the use of a detector dog team which consists of a Correctional Officer (identified as the Dog Handler) and a specially trained dog. CSC detector dogs are trained to identify and indicate the presence of an odour associated with specific illegal drugs, firearms and ammunitions through a change in body language. Detector dogs are also utilized to detect the presence of contraband on people and items entering CSC’s institutions. As of December 2016, CSC had 88 active detector dog teams. For the 2016-2017 fiscal year, CSC budgeted just over ten million dollars for the Program. These funds are to cover the total cost of the Program and include salaries, training, kennelling, veterinary services and dog supplies including food.

The Program is a tool in assisting CSC in meeting its organizational priority of “safety and security of the public, victims, staff and offenders in institutions and the community.”

What We Found

With respect to the first objective, the audit team found that some elements of a management framework were in place for the Program as: CSC policies and applicable guidelines were in compliance with legislative requirements; a governance structure was in place, training requirements for dog handlers have been established, and financial assets allocated to the Program were being used for their intended purpose.

The audit found that the management framework requires further improvements in order to better support the Program and has identified specific aspects that require consideration by management to ensure the Program is effectively supported and the risks to the Organization are addressed:

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• additional clarification and guidance, specifically providing management with more information about the Program, is needed to better support and manage the detector dog handlers and the Program;
• a vision, mission and program objectives are required to ensure the effective utilization of assets allocated to the Program and that the Program is achieving its intended results;
• training needs of new and existing handlers need to be met;
• the roles and expectations of those involved in the Program need to be further defined; and
• dog handlers need to be utilized more efficiently throughout the institution, while utilizing the available information to focus on the areas of the institution that require greatest attention.

The second objective of this audit focused on CSC’s compliance with legislation, CSC policies and guidelines. The audit team found that handlers were utilizing the CSC vans provided as expected, and the handlers’ home kennels were generally meeting the needs of the handlers. Additionally, when searches were being completed they were done in a professional, safe and controlled manner.

There are areas where improvements could be made. These include:
• outlining the requirements of documentation to be completed and how it should be entered to ensuring it is being completed to improve the value of the information;
• ensuring training kits are being stored properly and the contents are regularly verified to ensure items have not gone missing; and
• addressing safety concerns that exist related to the dog handlers’ vans to prevent injury to the detector dog.

Management Response

Management agrees with the audit findings and recommendations as presented in the Audit Report. Management has prepared a detailed Management Action Plan to address the issues raised in the audit and associated recommendations.

The Management Action Plan is scheduled for full implementation by September 30, 2018, (including verification strategies and release of the updated Commissioner’s Directive 566-13).
ACRONYMS & ABBREVIATIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCRA</td>
<td>Corrections and Conditional Release Act</td>
</tr>
<tr>
<td>CCRR</td>
<td>Corrections and Conditional Release Regulations</td>
</tr>
<tr>
<td>CBSA</td>
<td>Canada Border Services Agency</td>
</tr>
<tr>
<td>CSC</td>
<td>Correctional Service Canada</td>
</tr>
<tr>
<td>The Program</td>
<td>Detector Dog Program</td>
</tr>
<tr>
<td>The Guidelines</td>
<td>Detector Dog Program Guidelines</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>NHQ</td>
<td>National Headquarters</td>
</tr>
<tr>
<td>RHQ</td>
<td>Regional Headquarters</td>
</tr>
<tr>
<td>TRA</td>
<td>Threat Risk Assessment</td>
</tr>
</tbody>
</table>
1.0 INTRODUCTION

1.1 Background

The Audit of the Detector Dog Program was conducted as part of Correctional Service Canada’s (CSC) Internal Audit Sector’s 2016-2019 Risk-Based Audit Plan. This audit links to CSC’s corporate priority of “safety and security of the public, victims, staff and offenders in institutions and the community” and the corporate risk that “CSC will not be able to maintain required levels of operational safety and security in institutions and in the community”.

The Detector Dog Program (the Program) is one tool available to assist with the detection of contraband and should be a key component of CSC’s overall plan to reduce the amount of contraband within its institutions. Commissioner’s Directive 585 – National Drug Strategy, indicates that a “safe drug-free institutional environment is a fundamental condition for the success of the reintegration of inmates into society as law-abiding citizens”.

In 2000, CSC began exploring new drug interdiction strategies which resulted in a pilot project that brought detector dog teams into CSC’s institutions. A Detector Dog Team consists of a Correctional Officer (identified as the Dog Handler) and a specially trained dog. At that time, the Program consisted of 12 detector dog teams and increased to 88 as of December 2016. CSC detector dogs are trained to identify and indicate the presence of an odour associated with specific illegal drugs, firearms and ammunitions. When a detector dog detects those specific odours it will exhibit a behavioural change and, when possible, also indicate the location of the source of the odour.

Currently, all CSC institutions, except for Grierson Institution, CSC Healing Lodges and Community Correctional Centres have been allocated detector dog resources; however, due to vacancies and handlers waiting to be assigned a new dog, not all institutions currently have active detector dog teams in place. Detector dog teams regularly search both inmates and their visitors and perform regular searches for illicit substances in cells, yards, common areas, workshops and other areas of high risk throughout the institution.

Since 2001, CSC and the Canada Border Services Agency (CBSA) have had a Memorandum of Understanding (MOU) in place which has allowed CSC to utilize the trainers and facilities at the CBSA’s training facility to train CSC’s handlers and detector dogs. The CBSA is responsible for providing CSC’s dog handlers with their initial training and certification and for conducting a yearly evaluation of CSC’s detector dog teams to ensure they continue to meet the established criteria to maintain their detector dog team status.

For the 2015-2016 fiscal year, the Program recorded expenditures of just over ten million dollars for salary, staff training, employee travel, detector dog supplies, and veterinary costs. However, not all expenditures associated with the Program are included in that amount, as they are captured under a separate budget. Some of those expenditures include the purchase of the Handler’s vehicle, ongoing vehicle maintenance and the Handler’s fuel costs.

The chart and diagram below provide a breakdown of the overall cost of the Program, as well as a breakdown of the non-salary related operating costs incurred by CSC. Figure 1 illustrates the amount spent at NHQ as well as in the regions to run the Program. The total expenses include salaries, benefits, and overtime associated with the Program as well as the operating expenses. Operating expenses presented in Figure 1 include training, travel, dog food, boarding, etc.

At a national level, operating costs include the initial as well as any refresher training dog handler’s receive as well as the costs associated with the annual re-certification training. At the regional level, the costs include dog food, veterinary care and other associated costs which are further identified within Figure 2.
Figure 1 - Detector Dog Program Costs per Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Detector Dog Program Total Expenses 2015-2016</th>
<th>Average Number of Active Handlers 2015-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHQ</td>
<td>$994,875</td>
<td>-</td>
</tr>
<tr>
<td>Atlantic</td>
<td>$1,153,060</td>
<td>11</td>
</tr>
<tr>
<td>Quebec</td>
<td>$2,356,466</td>
<td>22</td>
</tr>
<tr>
<td>Ontario</td>
<td>$2,784,615</td>
<td>26</td>
</tr>
<tr>
<td>Prairies</td>
<td>$1,712,706</td>
<td>20</td>
</tr>
<tr>
<td>Pacific</td>
<td>$1,158,139</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$10,159,861</strong></td>
<td><strong>90</strong></td>
</tr>
</tbody>
</table>

Figure 2 - Regional Breakdown of Program Operating Expenses

<table>
<thead>
<tr>
<th>Operating Expense Category</th>
<th>Operating Expenses 2015-2016</th>
<th>Percent of Program’s Total Operating Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNAUDITED</td>
<td></td>
</tr>
<tr>
<td>Veterinary services/Medication</td>
<td>$88,522</td>
<td>22%</td>
</tr>
<tr>
<td>Food and other related expenses</td>
<td>$84,459</td>
<td>21%</td>
</tr>
<tr>
<td>Dog supplies</td>
<td>$71,680</td>
<td>18%</td>
</tr>
<tr>
<td>Boarding</td>
<td>$53,373</td>
<td>13%</td>
</tr>
<tr>
<td>Other operating expenses</td>
<td>$36,608</td>
<td>9%</td>
</tr>
<tr>
<td>Clothing/Handler supplies</td>
<td>$27,499</td>
<td>7%</td>
</tr>
<tr>
<td>Kennel and associated expenses</td>
<td>$20,257</td>
<td>5%</td>
</tr>
<tr>
<td>Vehicle</td>
<td>$17,140</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td><strong>$399,538</strong></td>
<td></td>
</tr>
</tbody>
</table>

The costs above represent the regional operating costs of the Program excluding salaries and NHQ associated expenses.

1.2 Legislative and Policy Framework

Legislation
Detector dog searches are considered to be a non-intrusive search tool. Such tools are identified through various sections of the Correctional and Conditional Release Act (CCRA) and the Correctional and Conditional Release Regulations (CCRR).

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3 Data obtained from CSC Corporate Services, 2016-06-03.
Section 46 of the CCRA defines a non-intrusive search as:

(a) a search of a non-intrusive nature of the clothed body by technical means, in the prescribed manner, and;

(b) a search of

(i) personal possessions, including clothing, that the person may be carrying, and

(ii) any coat or jacket that the person has been requested to remove, in accordance with any applicable regulations made under paragraph 96(l).

Section 47 of the CCRA discusses the use of non-intrusive searches of inmates and Sections 58-61 address cell searches, visitors and vehicles. Finally Section 66 of the CCRA addresses the non-intrusive searches of staff members.

CSC Directives, Strategies and Guidelines

Various commissioner’s directives and guidelines contain requirements and processes applicable to the Program, some of which include:

Commissioner’s Directive 566-13 – Detector Dog Program

The purpose of this Commissioner’s Directive is to: establish procedures for the operation and monitoring of the Program within institutions and when assisting partner agencies, as well as prevent the introduction, possession and exchange of contraband into CSC facilities with the assistance of a certified Detector Dog Team.

National Headquarters (NHQ) is to establish standards for the operational aspects of the Program. Dog handlers are not to be deployed at alternative posts, except in emergency situations and detector dogs are to be available for all inmate events pre-designated by the Institutional Head. Any inmate who causes pain to the dog or interferes with the duties of the dog can be charged with disciplinary offences under section 40(r) of the CCRA.4 As well, training aids, such as the controlled substances used by the dog handlers to reinforce the detector dogs scent profile, are to be approved and supplied by Health Canada.


The Strategy explains that CSC, in achieving its mission, will not tolerate drug or alcohol use or trafficking in federal institutions. A safe, drug-free institutional environment is a fundamental condition for the success of the reintegration of inmates into society as law-abiding citizens.

Detector dogs can be used to assist staff in identifying the possible presence of drugs on inmates, staff and visitors.

Detector Dog Program Guidelines (the Guidelines)

The Guidelines explain the requirements pertaining to the detector dog team’s training and certification, the management of the detector dogs, including their care and maintenance, kennels and vehicles, as well as requirements concerning training aid kit storage, handling and usage. The Guidelines also provide a high-level overview of how the detector dogs function.

Other applicable commissioner’s directives and associated guidelines include:

- Commissioner’s Directive 566-1 – Control of Entry to and Exit from Institutions;
- Commissioner’s Directive 566-8 – Searching of Staff and Visitors; and
- Guidelines 566-8-1 – Use of Non-Intrusive Search Tools.

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4 Section 40(r) states that “[a]n inmate commits a disciplinary offence who wilfully disobeys a written rule governing the conduct of inmates”.
1.3 CSC Organization

National Headquarters (NHQ)
NHQ is responsible for the overall management of the Program, including establishing operating standards and ensuring that procedures are in place to measure interdiction activities. The Program resides under the Preventive Security and Intelligence Division of the Correctional Operations and Programs Sector. Additional responsibilities for NHQ include: ensuring conformity among the regional security intelligence units, providing support to the regions in the area of security intelligence and allocating intelligence resources.

Regional Headquarters (RHQ)
Within each region, a Regional Project Officer has been assigned to the detector dog portfolio. This position acts as the Program liaison between NHQ and their region’s institutions.

Institutions
The Institutional Head is to ensure that all staff using non-intrusive search tools are trained and certified as required. As well, they are to ensure that storage facilities for training aid kits meet all security requirements as identified within the Guidelines and that the use of detector dog teams is incorporated into the Institution’s Search Plan.

There are a number of additional positions at each institution who have responsibilities associated with the Program. In addition to being the handler for the detector dog, the Detector Dog Handler is to ensure that training aids are controlled and that they are in compliance with all training requirements. Furthermore, dog handlers are to provide complete care, maintenance and motivation of the detector dog, in addition to providing care and maintenance of the equipment provided to the Detector Dog Team.

At most sites, the Correctional Managers, Operations/Coordinator Correctional Operations (referred to as a Correctional Manager, Operations for the remainder of this report), are the Dog Handler’s direct supervisors. They are responsible for conducting inventory verifications of the items in the Dog Handler’s training kits and for ensuring a Post Order identifies the appropriate procedures related to this non-intrusive search tool.

In addition to the dog handlers’ manager, there are additional correctional managers who are involved with the Program. During inmate visits, if the detector dog indicates that there is an illicit substance present that they have been trained to detect, a Correctional Manager, who is often the Duty Correctional Manager, will complete a Threat Risk Assessment (TRA). The Manager responsible varies from shift to shift as the role of the Duty Correctional Manager is filled by different managers throughout the day. The TRA will be used to determine whether the person trying to enter the institution poses a risk to the security of the institution.

1.4 Risk Assessment

The Audit of the Detector Dog Program was identified as a high audit priority and an area of risk to CSC in the 2016-2019 Risk-Based Audit Plan. A preliminary risk assessment was completed by the audit team using the results of interviews and knowledge previously obtained through other audits related to the subject of detector dogs. Policy documents, audits completed by other jurisdictions and other available information related to detector dogs were also considered.

Overall, the assessment identified that the main risks to CSC relate to: the Organization not being able to determine whether the Program was meeting its intended objectives; training aids not being stored and handled properly; a lack of analysis being done with the available information to measure the results of the Program; CSC property and assets being used inappropriately; and CSC not obtaining the best value for the resources allocated to the Program. Within each of these main risks, additional risks were identified and included: a disconnect between Management and the Detector Dog Team regarding the capabilities and expectations of the detector dogs; and detector dogs not being utilized in the areas of highest risk.

These risks were considered in developing the audit objectives and criteria.
2.0 OBJECTIVES AND SCOPE

2.1 Audit Objectives

The objectives of this audit were to provide assurance that:

- a management framework was in place and supports the effective management of the Detector Dog Program; and
- CSC was complying with relevant legislation and policies related to the Detector Dog Program.

Specific criteria are included in Annex A.

2.2 Audit Scope

The Audit of the Detector Dog Program was national in scope and included visits to all five regions where interviews, observations and compliance testing were undertaken. In addition, interviews were held with staff at Regional Headquarters (RHQ), NHQ and CBSA staff at Rigaud. Fulfillment of the MOU between CSC and the CBSA was examined in terms of the annual re-certification process as well as the training provided by the CBSA. The financial component of the MOU was not examined as part of this audit as it was in the process of being reviewed.

The audit excluded the process that takes place following a positive indication by the detector dog, as this was audited as part of the Audit of Contraband Control.
3.0 Audit Findings and Recommendations

3.1 Management Framework

The first objective was to determine whether a management framework was in place and supported the effective management of the Program.

The management framework for the Program was examined from six perspectives: CSC’s policy framework, governance, roles and responsibilities, training, monitoring and reporting, and the utilization of resources.

The following sections highlight areas where 1) expectations were met and 2) where management attention is required. Annex A provides the overall assessment for all audit criteria.

3.1.1 Policy Framework

We expected to find that CSC commissioner’s directives and guidelines were clear, effectively supported the Program and complied with applicable legislation.

Overall, this criterion was assessed as being partially met. The audit team found that the relevant commissioner’s directive and guidelines were in line with both the CCRA and the CCRR. There remain, however, some aspects of the relevant commissioner’s directive and guideline which require further clarification.

Aspects of the Commissioner’s Directive and the Guidelines related to the Program could be further expanded in specific instances.

Commissioner’s Directive 566-13 – Detector Dog Program contains a high level overview of some of the procedures that are to be followed for the Program, while the Guidelines provide specific detailed overview of the Program including specifications for institutional and home kennels, required documentation, and the care and maintenance of the detector dog.

While the Commissioner’s Directive and the Guidelines were found to be generally clear and easy to understand, some of the identified areas where improvements and clarification to the policy framework could be made include:

- **Training Requirements** – The Guidelines specify the amount of progressive training dog handlers are required to complete on a weekly/monthly basis, and describe the principles and the purpose of the training to be completed. As further discussed in Section 3.1.4, the audit team found that the Guidelines were not providing a sufficient explanation of what was considered valid training, nor how it should be ultimately recorded to demonstrate their compliance with the requirements of the progressive training.
- **Documentation** – The Guidelines specify which documents dog handlers are required to complete, but only provided limited guidance on how to complete these various documents. This issue, which resulted in documents being completed inconsistently, impacts the Service’s ability to complete any meaningful analysis of the Program related data. This is further explained in Section 3.2.4.
- **Training Kits** – As described in Section 3.2.2, the audit found significant issues with the handling and safeguarding of dog handlers training kits. Each handler is provided by Health Canada a specific amount of various controlled substances which they are to use for progressive training of their dog. While the audit found that the Guidelines provided a high level overview of how to use and safeguard the training kits, a relevant number of compliance issues were identified by the audit team suggesting that additional formal direction is required.
3.1.2 Governance

We expected to find that CSC had defined and communicated strategic objectives, performance measures and had a support system in place for the Program.

The audit team has identified a number of areas that did not fully meet the audit expectations for this criterion. **Overall, this criterion was assessed as not met.**

*Performance measures, program objectives or strategic objectives have not been established for the Program.*

The audit team found that the Program lacked performance measures, program objectives and strategic objectives. This has resulted in a lack of cohesion with individuals involved in this Program across the country and has further caused a lack of understanding at the local level of how the detector dogs are to be effectively utilized. Performance measures, which could include minimum service standards, would be beneficial to establish performance expectations for each institution and to provide overall direction to the dog handlers and the institution’s management team regarding the expectations of the Program.

In January 2017, CSC publicly introduced a new contraband control strategy as a result of the Commissioner’s Roundtable on Contraband Control. The Roundtable was tasked with developing a dynamic and comprehensive strategy with clear results. This strategy is to create staff awareness to the role everyone plays in detecting and eliminating contraband. Additionally, the Roundtable reviewed the roles and responsibilities of those involved in contraband control and as a result, the Deputy Warden is to now play a coordinating role with respect to contraband control, search and seizure, and related performance measurements.

The Roundtable was to develop search-related standardized work objectives for the detector dog handlers. In the past, the dog handlers had standardized work objectives; however as part of the Roundtable, it was proposed that one of the objectives be updated to require they “actively participate in the completion of quality and timely searches, including required documentation, contributing to the detection and elimination of contraband / illicit materials in institutions, and in keeping with relevant CSC policies and legislation.”

*Although a support system and a governance structure were in place for the Program, opportunities for improvement to its effectiveness exists.*

Although each of the three levels of the Organization (NHQ, RHQ and the institutions) have roles in the Program, there is no formal reporting relationship between these levels. While a direct reporting relationship existed at the institution with the dog handlers reporting directly to a Correctional Manager and ultimately up to the Warden, only a functional relationship existed to the respective project officers at both the regional and national levels. Although the Program is national in nature, decisions related to the approach to the Program and utilization of the handlers rested at the institutional level and was found to vary significantly across the country.

A number of weaknesses with the current governance structure were also identified by the audit team. These included; a lack of consistent sharing of knowledge and practices across the country related to the Program, a lack of clarity of who to contact to obtain assistance related to the Program, and the inability of the regional level to oversee and provide advice related to the Program.

The issues identified related to the current governance structure also had a direct impact on how dog handlers sought advice and support when needed. While a support system exists, with individuals residing at the regional level, national level and at CBSA, the dog handlers were not consistent on whom they would contact for assistance. Between individuals, this approach varied significantly as some would contact other dog handlers for support, while others would go to the regional project officers. In other instances, individuals would speak directly with the National Program Manager or even contact CBSA staff on their own. To address some of these concerns, in February 2016, CSC’s Commissioner’s Management Team approved a plan to introduce three National Subject Matter Experts to provide overall support to the Program.

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5 For the purpose of this audit, a support system was defined as the ability for those with questions about the Program to find information and guidance when required.
Many members of the institutional management team do not have a clear understanding of the Program and how the tool should be used.

Through interviews with institutional management, including institutional heads, assistant wardens and correctional managers, the audit team found that for many the Program was not well understood. The audit team also found that no educational component had been delivered to provide management with information on how the detector dogs work, or how best to utilize the detector dogs within the institution. For example, the audit team found instances where a detector dog had shown an interest in a visitor, however, as the dog did not ‘sit’ the Correctional Manager dismissed the concern raised by the Dog Handler without examining the situation further as the Correctional Manager was unaware that the dogs provide other indications to the presence of drugs than just a ‘hard sit’. In general, not all correctional managers were aware of the difference between an interest and an indication exhibited by the detector dog and, therefore, the approach and subsequent actions taken were inconsistent.

Correctional managers raised concerns to the audit team that there were a number of aspects of detector dog utilization that they did not have sufficient knowledge of, thus in some instances, impacting their willingness to use the information provided by the Dog Handler to make decisions. One area of ongoing uncertainty related to the amount of time a dog can perform active searches prior to receiving a rest period. Without a basic understanding of how the dog performs a search, and what the various indications mean, the Correctional Manager needs to solely rely on the Dog Handler and is unable to make their own analysis to ensure the use of the tool is done as efficiently as possible.

3.1.3 Roles and Responsibilities

We expected to find that roles and responsibilities were defined, communicated and understood.

The audit found that this criterion was partially met.

Although the roles and responsibilities of the dog handlers were clearly defined, improvements could be made in ensuring that roles and responsibilities are better understood for other relevant staff.

The correctional managers responsible for the supervision of the detector dog handlers do not always understand the Program itself or their specific responsibilities as the Dog Handler's Manager.

The Commissioner's Directives and the Guidelines have identified, at a high level, the relevant roles and responsibilities of key positions involved in the Program; however, we found that within Commissioner's Directive 566-13 - Detector Dog Program the roles and responsibilities of the Dog Handler’s Manager had not been identified.

A review of the Guidelines revealed that there were limited expectations in place related to the tasks the Dog Handler’s Manager is to perform and the audit team found that there was no specific section outlining all of the expectations and responsibilities for the dog handler’s managers. For example, although the Guidelines include specific requirements for the managers of the dog handlers to regularly verify the handler’s training kits and to periodically review training records, as will be discussed further in Section 3.1.4, many of these managers were not fulfilling these requirements. An additional area where the managers of the detector dog handlers expressed concerns was in relation to the progressive training that detector dog handlers have to complete. Many of these managers were unfamiliar with how progressive training was to be conducted and were therefore unable to determine if it was meeting the requirements of the Guidelines.

As with other management at CSC’s institutions, many of these managers have not received any formal direction or been provided with awareness sessions on the Program and were therefore left on their own to determine how to fulfill their responsibilities as the Manager of the detector dog teams. For some managers this has resulted in an overall lack of oversight for the detector dog teams as it is difficult to properly manage an area for which one has limited knowledge. The overall oversight of the detector dog teams will be discussed in further detail in Section 3.1.6.

3.1.4 Training

We expected to find that training requirements had been identified, met the needs of the Organization and training was taking place as required.
The audit found that this criterion was partially met as the audit team found that the training requirements for the Program have been identified through both the National Training Standards and further detailed within the Guidelines. There were, however, areas related to training which require further attention.

Not all detector dog handlers were meeting their progressive training requirements.
The purpose of progressive training is to ensure a high level of performance by the detector dog teams, where the Teams work on their identified strengths and weaknesses, while improving their skills individually and as a team. Some of the key principles of progressive training are to ensure that detector dog handlers:

- participate in scheduled training days;
- conduct training as often as possible during scheduled training days or during downtime;
- concentrate training in areas of distraction and obedience for which the dog is not as skilled;
- maintain, but do not dedicate all your training on the dog’s strong points; and
- increase difficulty of training hides using different concealment techniques, masking the odours and providing distraction.

To fulfill the principles of progressive training, at a minimum, detector dog handlers are required to complete four hours a week, or two eight hour days a month. The Dog Handler’s completion of these requirements is to be entered on the designated training log. Failure to complete a sufficient amount of progressive training could result in the degradation of the detector dog and handlers’ skills and thus could impact their overall effectiveness.

Through both a review of the records provided and interviews with the detector dog handlers, the audit team found that there were interpretational differences amongst handlers regarding whether all the training they were completing was progressive training. The audit team found that, for some handlers, they did not consider the training they were completing to be progressive training if they were not training outside of their home institution and/or with other handlers.

The audit team found that, based on the information recorded in the individual training logs, none of the 26 dog handlers included in the audit were meeting this training requirement. Some of the training challenges identified by handlers included not being provided with sufficient time for training and lack of resources to cover travel expenses. The audit team also found that the training logs themselves were not always completed consistently and in the vast majority of cases, did not demonstrate that eight hours of progressive training had occurred during a two-week period. Additionally, the information included within many of the handlers’ logs, was often incomplete as the length of training was not always included, and in many cases the results of the training were often vague and contained little detail on the results. The audit team observed that some dog handlers provided a great deal of information in their logs such as the weather, air conditions and details on their dogs’ behaviour and response while they were searching for hidden training aids. Having this detailed information is important as it can be used by the Handler to demonstrate the response their dog has in certain conditions and to certain odours. This could also be used to support the Dog Handler, should someone question their dog’s response as they would be able to show evidence that their dog has displayed a certain behaviour in the past to a known substance.

CSC’s detector dogs and their handlers were not being re-certified annually as required by CSC’s National Training Standards.

CSC’s National Training Standards identify core training that is to be completed for various positions within the Organization and the minimum level of training an employee is required to receive. Per the National Training Standards, each detector dog team is to be re-certified annually (within 12 months of last qualification) to ensure they continue to meet the established standards. A review of CSC’s Human Resource Management System revealed that dog handlers were not always completing their re-certification within 12 months of their previous re-certification.

The CBSA is responsible for organizing and administering the re-certifications as part of the MOU with CSC and states that the re-certifications are valid for 18 months. As a result, there is a disconnect between CSC’s requirements and those of the re-certifying organization. Although CSC’s handlers were
often not in compliance with the National Training Standards, they all had valid certifications based on the CBSA’s 18-month requirement.

Should a Detector Dog Team not have a valid certification, there is a risk of legal consequences for CSC if a detector dog indication/interest is used to approve a more intrusive search where contraband is found, as it could be argued that the search was performed using an invalid tool.

*Improvements could be made to the training dog handlers receive while participating in the training provided by the CBSA.*

As part of the MOU signed between CSC and the CBSA, in addition to the yearly re-certification, the CBSA is responsible for providing the initial education component to CSC’s dog handlers and any required refresher training and replacement dog training. This training occurs at the CBSA training facility located in Rigaud, Quebec.

Overall, dog handlers, were satisfied with the training they received at Rigaud as it covered the skills and techniques that are required to be a dog handler, and it also taught them how to deal with obstacles they may encounter in their role. However, they did identify some areas where improvements could be made that would make the transition into the Detector Dog Handler role easier.

One area of weakness identified by the dog handlers was gaining access to CSC institutions while training. Dog handlers expressed concern that the majority of the time spent doing active training occurred either at the training facility or other CBSA locations, including border crossings and airports. They expressed concerns that as they were not given enough exposure to CSC’s facilities and the detector dog was not learning how to search a cell the detector dog had not become acclimatized to the small, crowded conditions which can be a challenge in a federal correctional facility. In addition, spending more time in a CSC facility during their training, with their instructor, would allow the dog handlers to receive input and suggestions on how to better conduct the searches in their environment, and overcome any obstacles prior to the completion of their training and their arrival at their home institution.

Detector dog handlers further explained that the training provided at the CBSA does not provide sufficient exposure to conducting searches of people in the manner which would take place within a CSC institution. As the dog handlers spend their time training actively in CBSA facilities such as airports, concerns were raised that the procedures to search people in these locations are different from that which would occur at CSC. Although handlers indicated they are able to take what they learned and adapt it to their environment, they would like additional tools and tips prior to returning to an institutional environment.

Detector dog handlers also expressed concern that the training they received did not provide enough guidance and expectations on the documentation they need to complete. As will be discussed further in Section 3.2.4, this has resulted in significant inconsistencies with how the documentation is being filled out and how this impacts the benefits to be gained from the information within the documents.

### 3.1.5 Monitoring and Reporting

We expected to find that monitoring and reporting processes related to the Program were in place and were being used for improvement.

*The audit team found that, specifically, the information related to handlers’ searches and items seized was being reported to the regional and national levels.*

However, there were a number of areas related to monitoring and reporting which did not fully meet the criterion. As such, this criterion was assessed as partially met.

*There were inconsistencies in the monitoring and analysis of reported information at a regional and national level.*

On a monthly basis, CSC’s dog handlers are required to complete and send to the Regional Project Officer a Utilization Record to show where they have performed searches during the previous month, as well as to report anything found as part of those searches. Overall, while the audit team found that these documents were being completed, as will be discussed further in Section 3.2.4, concerns were noted with the overall quality of what was recorded.
The audit team found that the level of analysis related to the Program was inconsistent from region to region. In some regions, the Regional Project Officer takes the information the dog handlers provide to complete an overview of the information entered in the utilization records and simply forward it to NHQ, while in other regions, the project officers were analyzing the information and preparing a regional summary of the information for both regional and site management prior to sharing with NHQ.

At the national level, there is limited analysis of the available information related to the Program taking place. The National Program Manager had started to complete some analysis on the number of seizures, combined with the number of searches, as well as urinalysis results along with other data, in an attempt to obtain an overall picture of the usage of the detector dogs and their corresponding results.

As discussed further in the report, the audit found inconsistencies on how relevant documentation was being completed, thus impacting the ability to fully analyze the available information and no national direction was found on what information should be monitored and how it should be recorded in order to ensure consistency of data to allow for meaningful analysis of results.

**Formal analysis and sharing of information related to the Program was not consistently taking place at the institutional level.**

The audit team found that just over half of the institutions visited did not have mechanisms in place to analyze the data and information obtained through the dog handlers logs. Furthermore, at many sites there was no formal opportunity for dog handlers to share their search results, as this was done on an ad-hoc basis.

The audit team found that the communication between the security intelligence officers and the dog handlers varied significantly between the sites and it was found that the professional relationship between these two impacted the frequency of communication between them. At sites where there was a strong relationship, the two positions communicated frequently with more timely and thorough information to assist in targeting any contraband concerns. Additionally, many sites held various strategic committees discussing contraband concerns; however, the dog handlers have not been consistently incorporated into them at all institutions visited. By ensuring that dog handlers participate in these committees, it would ensure that relevant information could be shared and that sites would have a more holistic view of the contraband issues and concerns at the site.

Without sharing, reviewing and analyzing the information the dog handlers are collecting, and where searches have taken place, there could be missed opportunities in terms of intelligence gathering, and also in the identification of gaps in the search and contraband detection processes.

### 3.1.6 Utilization of Resources

We expected to find that assets allocated to the Program were being monitored and utilized economically, efficiently and as intended.

**The audit team found that, overall expenses recorded for the Program were related to those expenses allowed for within the Program.**

**This criterion was assessed as partially met,** as, there are a number of related issues which warrant further consideration by management.

**Improvements are needed to the oversight and monitoring of the dog handlers to ensure the resources allocated to the Program are being used as intended.**

Throughout the audit, the audit team found that the amount of oversight provided to the dog handlers varied based on their individual manager. Through interviews with the managers, just under half indicated that they allow the dog handlers to self-govern/do not micromanage them and were not involved in dictating how the dog handlers fill their day. The other half of the managers indicated they took on a more direct supervisory role.

As discussed in previous sections, the roles and expectations of the managers of the dog handlers are not fully defined, and many of these managers do not fully understand the Program. This appeared, in some cases, to be the reason for the general lack of oversight the dog handlers were receiving at the institutional level.
The audit found that very few of these managers undertook an active oversight role. For example, few indicated that they had attended any dog handler progressive training sessions or the yearly recertifications of their dog handlers. By attending training sessions, managers would be better able to confirm that the training was taking place, would have more knowledge of the Program and would have the abilities required to be more involved. Furthermore, the audit team found that while some managers may review the various documents prepared by the dog handlers, others simply forwarded it to the region.

Stronger involvement by the managers of dog handlers would provide more assurance that dog handlers are utilizing their time efficiently, ensuring full utilization of the detector dogs and that they are focussing their searching efforts on the areas of greatest risk.

The dog handlers’ schedules currently in place did not allow for full coverage at the institution.

Throughout the audit we found that the dog handlers were a dedicated group of correctional officers who were passionate about their role and took great pride in the responsibilities they had been given. While observing the dog handlers, we found that most of the handlers were active and busy throughout the time they were being observed.

The audit team raised concerns that the dog handlers’ schedules in place did not provide coverage for all times where a detector dog could be beneficial, such as the searching of inmate visitors, inmate socials and the arrival of new offenders. For example, the audit team found that, based on the approved schedules for dog handlers, only 5 out of 12 (42%) of the institutions visited provided full coverage of a detector dog for all offender visiting hours.

An analysis was also completed to determine the dog handler coverage at the institutions throughout the day. The time period of between 07:00 and 22:00 was selected as it is during these times that inmates were most likely to be active throughout the institution, and more opportunities could present for inmates to come into contact with contraband. For the four week period examined for the 12 institutions, the audit team found that a dog handler was scheduled on average 60% of the time during the specific hours. The audit team recognizes that depending on the number of handlers allocated to a site, it is not always possible to have full coverage at all sites during all these periods; however, a baseline was required to allow for a consistent analysis.

It was also found that there was often overlap in the dog handlers’ schedules which resulted in multiple dog handlers being present at one time and none being present at other times. Unless a site had evening visits scheduled, evening coverage was often non-existent even though certain inmate areas can only be searched when inmates are not present, typically in the evenings. Another identified area of concern resulted around the number of dog handler vacancies currently in place, whether it be an unstaffed position, an individual on long-term leave or a dog handler awaiting to be assigned a replacement dog.

In some instances, it was found that the schedules were not being adjusted to deal with any long-term vacancy, including maternity/paternity leaves, which may last for an extended period as required by the Scheduling and Deployment Standards group at NHQ. Without these schedule modifications there is a risk that large gaps in coverage be identified by either the inmates or their visitors, thereby increasing the risk that contraband can be brought into the institution or moved within the institution, thus resulting in safety concerns for both the inmates and the institutional staff.

Dog handlers were not fully utilized on a consistent basis at all institutions.

During visits to institutions the audit team recognized the professionalism of the dog handlers in completing their tasks. It was however noted, that at some sites, as there were multiple dog handlers on shift there were many instances where the detector dogs were not being actively utilized. Both the audit team, management and the dog handlers noted that improvements could be made to the overall utilization. Of the dog handlers interviewed, 71% (17 out of 24) felt that they were not being utilized to their full capacity at their institution, while 67% (12 out of 18) of the dog handlers’ managers and assistant wardens operations interviewed felt the handlers could improve the utilization of their time. These interviewees also indicated that in many instances the local schedules allocated too many dog handlers on shift at one-time, thus impacting their ability to effectively use their detector dogs to undertake searches.
The audit team did note that in some instances, although institutions have been clustered, where the minimum institution now officially forms part of the co-located medium facility, the dog handlers at some of these sites still worked as independent units in their respective security level, thus minimizing the ability to ensure better coverage and utilization of their detector dogs. There was also a noted variance between regions on their abilities and willingness to share detector dogs across sites. In some regions, the audit team found that dog handlers would often be called upon to assist at a different site because the other site’s own dog handler was not available. While this was occurring in some areas and regions, due to challenges with geographical distances and financial constraints, this was not occurring on a consistent basis.

Conclusion

With respect to the first objective, the audit team found that some elements of a management framework were in place for the Program as: CSC policies and applicable guidelines were in compliance with legislative requirements; a governance structure was in place, training requirements for dog handlers have been established, and financial assets allocated to the Program were being used for their intended purpose.

As noted, the management framework requires further improvements in order to better support the Program. We found a number of areas that require consideration by management to ensure the Program is effectively supported and the risks to the Organization are addressed:

- additional clarification and guidance, specifically providing management with more information about the Program, is needed to better support and manage the detector dog handlers and the Program;
- a vision, mission and program objectives are required to ensure the effective utilization of assets allocated to the Program and that the Program is achieving its intended results;
- training needs of new and existing handlers need to be met;
- the roles and expectations of those involved in the Program need to be further defined; and
- dog handlers need to be utilized more efficiently throughout the institution, while utilizing the available information to focus on the areas of the institution that require greatest attention.
3.2 Compliance with Legislation

The second objective was to determine whether CSC was complying with relevant legislation and policies related to the Program.

The following sections highlight areas where expectations were met and where management attention is required. Many of the compliance concerns identified within this section relate to framework concerns identified within Section 3.1.

Annex A provides results for all audit criteria.

3.2.1 Kennels and Vehicles

We expected to find that detector dog handlers’ vans and kennels met the needs of the Program and ensured the safety of the detector dog while complying with the requirements of the applicable policies.

The following areas met the audit criterion:

- detector dog handlers were generally following policy requirements in relation to driving CSC’s vans; and
- most dog handlers had a home kennel in place that met their needs and the safety needs of their detector dogs, and most handlers were using the kennels provided as required within the Detector Dog Program Guidelines.

While this criterion was assessed as being met, the audit noted some aspects where further attention was required.

At many sites, institutional kennels have been constructed in a manner which does not meet the Guidelines.

The Guidelines specify a number of requirements related to the institutional kennels, including: the dog must be protected from access to inmates and visitors; an additional fence is required to be installed around the kennel if any individual can come within two meters of the kennel; and the kennel must be visible to regular officers, located in an area where monitoring can occur via Closed Circuit Television System (CCTV) and ideally in a location that is in view of the Dog Handler’s office.

The audit team found that kennels had been installed at 10 of the 12 institutions visited, although many of the kennel requirements listed within the Guidelines were not always met. At one of the institutions where a kennel had not been installed, they were in the process of installing one. Although most of the institutions visited had kennels in place, only 43% (9 out of 21) of the handlers indicated that they were regularly using the kennel at their institution. When handlers were asked why they were not using the institutional kennel, two main reasons were given which related to the detector dog’s safety: not having direct sight lines to the kennel, which the audit team also observed, and concerns that something could be thrown into the kennel which would harm the dog. In addition to safety concerns, some handlers indicated that it was their personal preference to not use the outdoor kennel.

For those dog handlers who were not using the institutional kennels, they either kept their dogs in their offices in a travel kennel, or kept their dogs in the institutional van. For the dog handlers who keep their dogs in their vans, Internal Audit’s primary concerns are the additional cost that may be incurred by the institution to run the Dog Handler’s vehicle to ensure the detector dog is not harmed due to the temperature fluctuations that can occur when the vehicle is not running, the environmental impact that having CSC’s vehicles running for long periods of time, and the possibility that the vehicle could be stolen with the detector dog inside.

Safety concerns were identified related to the vans the handlers are using to transport their detector dogs.

As part of the Program, new dog handlers are provided with CSC issued vans to transport their detector dogs to and from their home as well as to related appointments and exercise locations. These vans are to
be equipped with an insert which acts as a kennel to ensure the detector dog is properly secured while in the vehicle. When an existing handler receives a new van, the previously installed insert is often removed from the old van and retrofitted to fit into the new van. Each site is responsible for the preparation and installation of all required equipment for the handlers’ vans, which can result in a wide variety of approaches and configurations.

The audit team observed a total of 21 handler vans and found that all inserts were securely anchored/attached to the van; however, safety concerns were noted by the handlers and the audit team in 38% (8 out of 21) of the vans observed. One of the concerns identified was with the straps used to secure the kennels to the van. The fear is that should the Dog Handler be in an accident, the straps and bolts used may break, causing the kennel to be thrown towards the Dog Handler. The audit team also found that in some of the vans, the installed insert was extremely high which obscured the rear view mirror of the Dog Handler. In one case, a Handler had backed into something because they were unable to see out the back of the van. A few handlers indicated that their institution installed backup cameras; however this was not the case at all sites.

Other concerns raised related to the lack of an escape door, should the Dog Handler not be able to open the side doors of the van to safely evacuate the detector dog. Another concern had to do with the retrofitting and adjustments to old inserts which were causing sharp edges to be present. This can seriously harm the dog in the event they rub against them. The last safety concern identified was with the temperature control systems that are installed in the handlers’ vehicles. The system is supposed to regulate the temperature of the vehicle when the detector dog is left unattended inside the van, and will turn the vehicle on to either warm up the van or cool it down to a pre-set temperature. All vehicles observed had a temperature control system in place; however, 33% (7 out of 21) of handlers reported that the system was not functioning properly, and another four indicated that they did not trust the temperature control system.

At the time of the audit, NHQ informed the audit team that they had been made aware of a compatibility issue with the temperature control system as a result of the change in the van model used. For those handlers with this compatibility issue, NHQ has offered to pay for a conversion kit to address the issue; however, we were informed that only one dog handler had requested the kit. The overall concern expressed by the dog handlers was that should the temperature control system fail there is a high probability that a dog could be seriously injured or killed should the system not function as intended.

3.2.2 Training Kits

We expected to find that the detector dog handlers’ training kits were being stored and maintained according to applicable policies.

The audit team found significant areas of concern related to this objective and has assessed this criterion as not met.

*There are minimal controls in place over the detector dog handlers’ training kits and the relevant sections of the Guidelines are not being respected.*

Each of CSC’s dog handlers are provided with an individual training kit by Health Canada. The kits contain controlled substances, such as cocaine, heroin, etc., that handlers use to maintain and improve their dog’s ability to detect the scents for which they have been trained to identify. Although Health Canada is responsible for providing the training kits, the dog handlers are responsible for breaking down the content received into smaller quantities for training purposes. Given the controlled substances which are part of the training kit and the high cost associated with the contents of the kits, it is critical that controls be established and followed.

**Training Kit Storage**

The Guidelines also require that training aids be stored according to Health Canada’s Directive on Physical Security Requirements for Controlled Substances (Licensed Dealers Security Requirements for the Storage of Controlled Substances). Through audit observations and discussions with dog handlers who were aware of the requirements, a number of areas of non-compliance with the Health Canada Directive were identified. The audit team observed that 86% (18 out of 21) of the handlers’ vans had a training aid safe installed. Although safes were present, concerns were identified related to their overall security. As with the inserts, it is the institution’s responsibility to arrange for the installation of the safes.

There is a concern amongst the audit team that should Health Canada identify security weaknesses, particularly with the handlers’ offices which are located outside the fenced institution, Health Canada could refuse to provide additional training kits to CSC for not being compliant with their Directive. In this instance, it could greatly impact the Handler’s ability to train and maintain their dog’s skills and scent profile.

**Training Kit Verification**

As part of the Guidelines, the Dog Handler and their direct Manager are required to complete and document on a quarterly basis an inventory of the training aids in the training kits. In reviewing the documents provided at each of the sites visited, the audit team found that for ten of the 25 handlers’ documents reviewed, representing 12 institutions, the kit weights had not been verified by their manager since the kits were originally received. Of the 12 sites visited, only four sites produced clear evidence to demonstrate that the dog handlers’ kits were being verified on a regular basis.

Within the Guidelines, there was no additional direction for the direct manager on how they are to verify the content of the kit. However, within the record keeping section of the Guidelines, there was reference to a CSC form where the managers were to record the verification they have completed. It was found that the managers were relatively unaware that there was a requirement that the kit be verified, nor were they aware of the importance of an ongoing verification of the kit to ensure it was fully accounted for. Although no manager raised concerns regarding the substances contained within a dog handler’s kit, concerns were raised that even if they were to complete a regular verification of the individual training aids, they would be unable to identify if the substances they are weighing were the original substances that were supposed to be in the kits.

In addition to verifying whether managers were checking the content of the dog handlers’ training kits, the audit team weighed three controlled substances from the kits to determine whether the weights recorded matched the expected weights. Through the testing, we found that items weighed were within five percent of the expected weight 69% of the time, and within 10% of the expected weight 82% of the time. For one of the substances tested, the amount distributed by Health Canada was significantly less compared to the other two substances; therefore a difference in its weight had a larger impact on the overall variance.

While completing this test, there were a number of challenges the audit team encountered as each handler had their own process for storing and packaging their training aids. When handlers receive their training kits, they are expected to break them down into smaller quantities to allow their dog to have exposure to different amounts of the scent. When handlers break down their kits into a hide, and re-
package the substances, they are not consistent in the process they follow. We observed that some handlers recorded the weight of each bag they wrapped around the substance, while others added a number of wrappings to the item without recording the original weight. Having this information directly on the packaging of the substance allows the weight to be verified without having to completely unwrap the substance; without properly recorded information, the audit team had to complete the testing using approximate bag weights. Through discussions with handlers, we were informed that they received limited guidance on how they were to breakdown their training kits and as was evidenced by the different approaches taken, there is a lack of consistency in how training kits are prepared.

We also found that some handlers maintained an inventory list that included the weight of each hide as well as the number of hides they had prepared. This information makes it easier to verify the Dog Handler’s inventory quickly as it is less likely that a small hide could be misplaced without being identified. When handlers re-package their kits, there is a possibility that small amounts of the substance could be lost; thus it is important that management regularly verify the weights of the kits as this would allow slight changes to be recorded and accounted for. The audit team noted that handlers typically receive a new kit every five years; therefore, items within the kit may get lost without being noticed until the kit is sent back to Health Canada.

**Recording the removal and return of training aids to handler’s safes**

The Guidelines require that the Controlled Substance Log (CSC 1250-05), which is to be used to record the removal of each training item from the safe as well as its eventual return, should be completed and should be kept up-to-date.

Overall, the audit team found that although dog handlers were completing the required document logs, they were not always complete or up-to-date, as each dog handler had created their own process for storing and keeping track of the items within their kits. This resulted in some handlers having stronger controls compared to other handlers. Of the Controlled SubstanceLogs tested for 22 detector dog handlers, the audit team found fully complete and accurate logs seven times, partially completed logs 11 times and four instances where the logs were not complete in a way that allowed the audit team to assess validity.

Without having detailed information in the Controlled Substance Log, there is no record of what substances may have been removed from the Dog Handler’s safe. If an item was to go missing, it may not be identified in a timely manner which, and if misplaced within the institution, could have a significant impact on the safety and security.

### 3.2.3 Searches

#### 3.2.3.1 Compliance with Legislation and Policies

We expected to find that the detector dog searches which are taking place were in compliance with applicable legislation and policies.

The following areas met the audit expectations for the criterion:

- dog handlers demonstrated control over their dog in all inmate and non-inmate searches;
- no significant concerns were identified related to the searches completed by dog handlers; and
- all searches observed were conducted in a professional manner.

Overall, this criterion was assessed as fully met.

#### 3.2.3.2 Searches are Safe

We expected to find that the areas where the detector dogs performed searches were safe in order to allow the detector dog the ability to complete its assigned responsibilities.
The following areas met the audit expectations for the criterion:

- there were no significant safety concerns noted with the areas the detector dogs performed their searches, which included inmates, inmates’ cells/Private Family Visit Units (PFVs) and other inmate areas, inmates’ effects, inmates’ mail and non-inmate searches.

Overall, this criterion was assessed as met; however, the related area requires further attention:

**Handlers faced impediments when completing searches that could impact their search results.**

Through both observations and interviews, the audit team identified a few impediments that had an impact on the searches taking place. While observing the searches of individuals coming into the institution, the audit team found that there was generally enough space provided to conduct the search. However, it was found that there was not enough room in the search area for the Dog Handler and detector dog to move freely when additional individuals were present, thereby impacting the detector dog’s ability to properly perform the search.

Another concern identified by the audit team was that some search locations were uncontrolled and staff could move freely through the search area while a search was being performed. As movement within a search area can affect airflow and also distract a detector dog, this could hamper the dog’s ability to detect odours which may impact the overall search. The dog handlers indicated that they attempted to educate staff about the impact that movement could have on detector dogs during a search.

Dog handlers also faced challenges when searching areas where inmates are present as the inmates sometimes try to distract the dogs. We found that some sites were better equipped to remove the inmates from the area when a search was taking place; however, this was not the case at all institutions.

With respect to the time it takes to perform a search, depending on the search area and the institution, handlers felt they were given enough time to perform the searches they were asked to complete. However, 32% (5 out of 22) expressed concerns, that at times, they were not given enough time to properly search the area due to the type of search and/or having to perform a search based on the institutional routine. Institutions typically run on a very structured and rigid schedule, and any disruption to the routine can affect the institution’s daily routine. Therefore, sites and the dog handlers try to not disrupt the institutional routine as much as possible, but this can limit the amount of time available to perform a search and also limits the areas where handlers can gain access during the day.

If the dog handlers are not provided enough time to properly perform a search in an area, they may miss presenting an area to their dog or may not be able to conduct a full manual search when required.

### 3.2.4 Documentation

We expected to find that documentation related to the Program was being completed in a consistent and accurate manner to ensure both the effective use of the detector dogs and that secure controls over controlled substances were in place.

The audit found that all dog handlers were typically completing the required documents; however, the information contained within was inconsistent, as described below. As such, **this criterion was deemed to be partially met.**

**The information entered onto the various documents/logs by the Detector Dog Handler was not being recorded in a consistent manner.**

The Guidelines specify the various documents which dog handlers are required to complete, including Utilization Logs, Search Logs, Training Logs and Controlled Substance Logs. While the audit found that dog handlers were mostly aware of the requirements, it was found that the information contained within the logs, as well as the methods used to complete the logs, varied significantly between individual dog handlers. Concerns were noted with each of these logs and are described below:
• **Utilization Logs** – On a monthly basis, all dog handlers are required to submit a monthly Utilization Log to their applicable region which details the locations and items they searched during the month. Through a review of the handlers’ logs, as well as through interviews, we found that handlers had their own method of recording the number of performed searches, as well as the seizures they made. We also found that the quality of the information within the Log was inconsistent i.e., information in one column contradicted information when compared to another column. Additionally, depending on what was being searched, (for example, an inmate’s effects), some handlers would count each box searched, while other handlers would count this as one search. Some regions have attempted to standardize the information reported; however, discrepancies were still identified. Without consistent information, it makes it difficult to accurately analyze each site’s utilization of detector dogs, and also limits CSC’s ability to analyze the Program as a whole.

• **Search Logs** – Not all handlers were using the prescribed Search Logs. Of those handlers that were completing Search Logs, the type of information included was often inconsistent. These Logs are a tool which provides a means for handlers to demonstrate their day-to-day activities performed and search results achieved.

• **Training Logs** – A dog handler’s Training Log should contain key information on the training the Handler has completed as well as the results of the training. The Guidelines establish the information the handlers are to record in their Training Logs. However, through a review of the available Logs, we found that the amount of information included often varied by handler; specifically, with the details on the behaviours the handlers observed on their dogs, as well as the length of time the training took place. Training Logs are critical to showing training has taken place and the results of the training.

• **Controlled Substance Logs** – The Controlled Substance Log is a document that is used to record the removal and return of the Dog Handler’s controlled substances from their safe. While reviewing the Controlled Substance Logs, the audit team found that not all the handlers were using the official Log and some were not maintaining a Controlled Substance Log at all. Therefore, they were unable to demonstrate proper controls over the substances. Additionally, the audit found that the level of detailed information included within these logs was inconsistent. For example, as the Controlled Substance Log serves as the only official record of the items being removed from the safe, it is critical for the information to be accurately recorded. The Log also allows the Dog Handler the opportunity to complete a quick verification check at the end of the day to ensure that all the items have been accounted for and returned. Without this record, handlers would not know if a substance was missing. For testing results related to the controls in place for the controlled substances in the Dog Handler’s possession, see Section 3.2.2 of the report.

With the exception of the limited information contained within the Guidelines, the direction provided at a regional level and through discussion with dog handlers, the audit team found there was no formal training or guidance was provided to CSC’s dog handlers on how to complete the Program’s required paperwork. This has resulted in an inconsistent approach, thus reducing the overall value of the information presented.

**Conclusion**

For the second objective, handlers were utilizing the CSC vans provided as expected, and the handlers’ home kennels were generally meeting the needs of the handlers. Additionally, when searches were being completed they were done in a professional, safe and controlled manner.

There are areas where improvements could be made related to van safety, training kits, and documentation. These include:

- outlining the requirements of documentation to be completed and how it should be entered to ensuring it is being completed to improve the value of the information;
- ensuring training kits are being stored properly and the contents are regularly verified to ensure items have not gone missing; and
- addressing safety concerns that exist related to the dog handlers’ vans to prevent injury to the detector dog.

### Recommendation 1

The Assistant Commissioner, Correctional Operations and Program should ensure that a vision, clear objectives and standardized performance measures for the Program, as well as, clarification on how the Program fits within CSC’s broad contraband control process, are established and communicated to all stakeholders.

### Management Response

We accept this recommendation. The challenges regarding this recommendation are related to establishing communication strategies and changing existing processes at sites. We are asking key employees to change their vision, habits and processes. Preventive Security and Intelligence will play a convincing role and educational strategies will be implemented.

### Recommendation 2

The Assistant Commissioner, Correctional Operations and Programs should ensure that the roles and responsibilities of those individuals involved in the Program are expressly defined and communicated. Particular focus should also be made to educating the dog handlers’ direct supervisors, including the expectations in terms of oversight.

### Management Response

We accept this recommendation. There will be limited challenges associated with the clarification of roles and responsibilities regarding key players. This response may add responsibilities but this will also streamline processes; making the management of the Program easier.

### Recommendation 3

The Assistant Commissioner, Correctional Operations and Programs should continue to work with the CBSA to ensure that the initial training provided to CSC’s detector dog handlers occurs more frequently in a correctional environment to better meet the needs of the new detector dog handlers.

### Management Response

We partially accept this recommendation. The challenge is linked with the dynamic environment in which training occurs. The reality of both CSC and CBSA environments makes it difficult to ensure that these types of training will constantly occur more frequently. However, we can ensure that an appropriate balance will be achieved with regards to training for the CSC detector dog teams and the organisational requirements of both CSC and CBSA.

The reason why this recommendation is accepted in part is that we believe that the needs of new handlers are not only linked with more training within correctional environments. We do not believe that one or two extra days in a correctional facility would enable our detector dog teams to be more efficient and perform better. However, we believe that we would better meet the needs of a new handler through a better integration and support system.
Recommendation 4

The Assistant Commissioner, Correctional Operations and Programs should clarify for institutions what would be considered optimal use of the detector dog handlers. The Regional Deputy Commissioners should review the schedules of the detector dog handlers and ensure that they result in optimal coverage for the institution.

Management Response

We agree with this recommendation. We will identify characteristics and key elements to be evaluated in order to define the optimal use of detector dog teams.

Regional Deputy Commissioner Response: We support the management response to this recommendation, and will most effectively be able to move forward with action following receipt of direction and guidance from National Headquarters. The establishment of a definition of ‘optimal’ use will require a review of priorities created as a component of Recommendation 1; recognizing that any identified priorities are subject to change over time.

There will be required a need to ensure that institutions are directly involved in the review of the activities generated by those priorities. Understanding that the Detector Dog Program is one of the tools available to perform searches at the site, it is anticipated that a review of necessary activities may lead to the creation of a vision of ‘optimal’ use from a scheduling perspective locally.

Recommendation 5

The Assistant Commissioner, Correctional Operations and Programs should provide further guidance to institutional management on the expectations regarding the storage and handling of dog handlers’ training kits. The Regional Deputy Commissioners should direct their Institutional Heads to ensure that training kits are being properly stored and regularly verified.

Management Response

We agree with this recommendation. Clear responsibilities will be included in the Commissioner’s Directive and the Guidelines regarding the purchase and installation of the drug safes. Verification processes will ensure that the drug kits are verified regularly. There could be financial implications as some drug safes may need to be replaced in order to meet the standards.

Regional Deputy Commissioner Response: We agree with this recommendation and support the Management Response. Through the establishment of clear responsibilities in the Commissioner’s Directive and with the sharing of guidelines, our Regional Headquarters and our sites will be consistently able to, with confidence: properly manage the purchase and installation of drug safes; and regularly verify drug kits as required.
Recommendation 6

The Assistant Commissioner, Correctional Operations and Programs should specify the definition of the required information that dog handlers must record on the various logs to ensure consistency. The Regional Deputy Commissioners should ensure that institutions are accurately and consistently providing the required information so that it can be used to monitor the overall effectiveness of the Detector Dog Program.

Management Response

We agree with this recommendation. Procedures will be created in order to enable handlers to understand the requirements and understand why the documents are needed from an organisational perspective. These requirements will also be included in discussions with management teams and the educational pieces.

Regional Deputy Commissioner Response: We agree with the recommendation and support the creation of a guide that will enable handlers to continue to contribute to our institutional, Regional and National results in a positive manner. There is significant value in providing consistent messaging around the need to produce quality documentation that will be, in part, utilized to monitor the effectiveness of the Detector Dog Program.
4.0 CONCLUSION

With respect to the first objective on the effectiveness of the management framework in relation to the Detector Dog Program, we found that the framework requires additional improvements to ensure the effectiveness of the Program. The audit noted a number of areas that require further consideration by management to ensure that the Program functions as it was originally intended and achieves the desired results.

The second objective of this audit focused on CSC’s compliance with legislation and policy, and noted a number of areas were in compliance. However, there are a few areas where improvements can be made. Recommendations have been issued in the report based on areas where improvements are required.
## 5.0 Management Response

Management agrees with the audit findings and recommendations as presented in the Audit report. Management has prepared a detailed Management Action Plan to address the issues raised in the audit and associated recommendations.

The Management Action Plan is scheduled for full implementation by September 30, 2018, (including verification strategies and release of the updated Commissioner’s Directive 566-13).
6.0 ABOUT THE AUDIT

6.1 Approach and Methodology

Audit evidence was gathered through a number of methods such as: the review of documentation; detailed testing, and interviews with staff at NHQ and in the regions.

Interviews: Over 130 interviews were conducted during the planning and examination phases of this audit, both in person and via teleconference. Those interviewed at the institutions included: institutional heads, assistant wardens operations, correctional managers, security intelligence officers, and detector dog handlers. Regional staff interviewed included regional project officers and regional administrator security. Additionally, interviews were conducted with a number of staff at NHQ who were involved in the Program.

Review of Documentation: Relevant documentation, such as legislation, commissioner’s directives, guidelines, and financial data, as well as various handlers’ logs, training records, reports and search plans were reviewed.

Testing: File reviews were conducted on site to determine whether detector dog handlers were completing the required documentation, also that the information contained within the files was accurate and finally that the dog handlers were adhering to policies and guidelines. The documents that were reviewed included: Detector Dog Monthly Utilization Logs, Search Logs, Controlled Substance Verification Logs and Progressive Training Records.

Sampling Strategy: Samples were selected based on the amount of documents that would need to be reviewed to provide an overall conclusion on the area being audited. For audit tests that required date specific tests, a judgemental sample was selected.

Observations: Over 160 observations of detector dog searches were completed throughout the audit. These observations were performed to assess whether detector dog teams were used effectively, and whether the searches they conducted were in compliance with legislation, policies and guidelines. The audit team also observed detector dog vehicles, institutional kennels and training aid storage facilities while at the selected institutions to determine whether they met the requirements outlined in the Guidelines. Additionally, the audit team observed detector dog training. Lastly, visits took place at the homes of detector dog handlers to observe the kennels which have been constructed to house the detector dogs.

Site Selection: Site selection was based on a number of elements including: number of detector dog teams, number of detector dog seizures, the number of positive urinalysis tests, security classification, number of inmates and the number of previous site visits. Annex B provides details of the sites visited.

6.2 Past Audits Related to the Detector Dog Program

Past CSC internal audits and external assurance work were used to assist in scoping the audit work.

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The Evaluation found a positive relationship between the increase in spending on the Program and an increase in the number of seizures from 2008 to 2014 with the largest increase in seizures occurring from 2008/09 to 2009/10.

From 2009/10 to 2013/14 there was a 30% increase in the rate of drug seizures and a 77% increase in the rate of spending. The large increase in spending was associated with the increase in the number of detector dogs.

The Evaluation also found that the rate of drug-related incidents had decreased; indicating the efforts to eliminate drugs from institutions may be helping to reduce incidents and keeping institutions safe and secure. It also found that the rate of positive urinalysis results had decreased over a six-year period which may suggest that the efforts to eliminate drugs from institutions, including the use of detector dog teams, have been working.
6.3 Statement of Conformance

In my professional judgment as Chief Audit Executive, sufficient and appropriate audit procedures have been conducted and evidence gathered to support the accuracy of the opinion provided and contained in this report. The opinion is based on a comparison of the conditions, as they existed at the time, against pre-established audit criteria that were agreed on with management. The opinion is applicable only to the area examined.

The audit conforms to the Internal Auditing Standards for Government of Canada, as supported by the results of the quality assurance and improvement program. The evidence gathered was sufficient to provide senior management with proof of the opinion derived from the internal audit.
GLOSSARY

**Duty Correctional Manager**: A Correctional Manager who is responsible for ensuring the overall security and safety of the institution, while also ensuring all posts within the institution are staffed by qualified officers.

**Interest**: Interest shown by the dog is different from an indication. The ability to read the difference is the responsibility of the Handler. The Handler will become aware of the dog’s tendencies as they continue to work together. When conducting a search, the dog may show an interest in something but will not give a confirmation with the conditioned reflex. This can be a result of various circumstances; however, it is on the advice of the Handler that they or the examining officer conducts a cursory examination in the area of interest. The dog can make a general interest and be returned to focus on continuing the examination; however, at times, the interest shown should be investigated.

**Indication**: An indication is when the dog reacts to the trained odour in the appropriately trained reflex. This may be as subtle as a head turn, increasing in nature to behavioural change, excitability, to a full and complete confirmation of passive pointing and sitting at the source. In certain situations, especially in high or well-concealed hides, only a trace odour may be detected and the dog may only show the Handler a behavioural change or head turn. The dog would then try to follow the odour to the source, but it may be impossible to locate the actual location. In these cases, the responsibility is with the Handler to systematically examine the area, understand the air currents, and be able to understand their dog.

**Training Aid/Hide**: A training aid/hide is a legally possessed controlled substance or item that is hidden within an area in which training is taking place. The item/substance is used to train a detector dog in the scent profiles for which they have been certified on.

**Training Kit**: A training kit is a supply of controlled substances approved and provided by Health Canada.
## ANNEX A: AUDIT CRITERIA

The following table outlines the audit criteria developed to meet the stated audit objective and audit scope:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Audit Criteria</th>
<th>Met/ Met with Exceptions/ Partially Met/ Not Met</th>
</tr>
</thead>
</table>
| 1. Provide assurance that a management framework is in place and supports the effective management of the Program. | 1.1 – Policy Framework  
CSC commissioner’s directives, guidelines and manuals are clear, effectively support the Program and comply with applicable legislation. | Partially Met                                  |
|                                                                           | 1.2 – Governance  
CSC has defined and communicated strategic objectives, performance measures and has a support system in place for the Program. | Not Met                                        |
|                                                                           | 1.3 – Roles and Responsibilities  
Roles and responsibilities are defined, documented, communicated and understood. | Partially Met                                  |
|                                                                           | 1.4 – Training  
Training requirements have been identified, meet the needs of the Organization and training is taking place as required. | Partially Met                                  |
|                                                                           | 1.5 – Monitoring and Reporting  
Monitoring and reporting processes related to the Program are in place and are being used to improve the Program. | Partially Met                                  |
|                                                                           | 1.6 – Utilization of Resources  
Assets allocated to the Program are being monitored and utilized economically, efficiently and as intended. | Partially Met                                  |
| 2. Provide assurance that CSC is complying with relevant legislation and policies related to the Program. | 2.1 – Kennels and Vehicles  
Detector Dog Handler vehicles and kennels meet the needs of the Program and ensure the safety of the detector dog while complying with the requirements of the applicable policies. | Met                                           |
|                                                                           | 2.2 – Training Kits  
Detector Dog Handlers’ Training Kits are being stored and maintained according to applicable policies. | Not Met                                        |
<table>
<thead>
<tr>
<th>2.3 – Searches</th>
<th>Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3.1 The detector dog searches taking place are in compliance with applicable legislation and policies.</td>
<td>Met</td>
</tr>
<tr>
<td>2.3.2 The areas where the detector dogs are to search are safe and allow the detector dog to complete its responsibilities.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>2.4 – Documentation</th>
<th>Partially Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation related to the Program is being completed in a consistent and accurate manner to ensure the effective use of the detector dogs and strong controls over controlled substances are in place.</td>
<td></td>
</tr>
</tbody>
</table>
## Annex B: Site Selection

<table>
<thead>
<tr>
<th>Region</th>
<th>Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atlantic</td>
<td>• Dorchester Penitentiary</td>
</tr>
<tr>
<td></td>
<td>• Springhill Institution</td>
</tr>
<tr>
<td>Quebec</td>
<td>• Archambault Institution</td>
</tr>
<tr>
<td></td>
<td>• Drummond Institution</td>
</tr>
<tr>
<td></td>
<td>• Detector Dog Handler Home Visits</td>
</tr>
<tr>
<td>Ontario</td>
<td>• Collins Bay Institution</td>
</tr>
<tr>
<td></td>
<td>• Millhaven Institution</td>
</tr>
<tr>
<td></td>
<td>• Warkworth Institution</td>
</tr>
<tr>
<td></td>
<td>• Detector Dog Handler Home Visits</td>
</tr>
<tr>
<td>Prairies</td>
<td>• Bowden Institution</td>
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<tr>
<td></td>
<td>• Edmonton Institution</td>
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<tr>
<td></td>
<td>• Edmonton Institution for Women</td>
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<tr>
<td>Pacific</td>
<td>• Matsqui Institution</td>
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<tr>
<td></td>
<td>• Mission Institution</td>
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<tr>
<td>Rigaud</td>
<td>• CBSA Training Facility</td>
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</table>