



**IN THE MATTER OF AN INVESTIGATION  
BY MEMBERS OF THE RCMP INTO AN INCIDENT  
LEADING TO THE DEATH OF A MALE  
IN THE TOWNSHIP OF LANGLEY, BRITISH COLUMBIA  
ON OCTOBER 23, 2019**

**DECISION OF THE CHIEF CIVILIAN DIRECTOR  
OF THE INDEPENDENT INVESTIGATIONS OFFICE**

Chief Civilian Director: Ronald J. MacDonald, Q.C.

IIO File Number: 2019-198

Date of Release: December 14, 2020

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## **Introduction**

In the early morning hours of October 23, 2019 police emergency received a dropped call from the Affected Person's ('AP') cellphone. Attempts were made to find the caller, and a police officer ('SO1') was dispatched to conduct area patrols. SO1 found AP a short time later and called for Emergency Health Services (EHS). AP appeared to be high on drugs and was fighting with police officers ('SO2' and 'SO3'). Approximately nine minutes later, AP fell unconscious. Despite many attempts to revive AP with naloxone and life saving measures, he died of an overdose.

Because there had been police involvement in the incident, the Independent Investigations Office (IIO) was notified and commenced an investigation. The narrative that follows is based on evidence collected and analyzed during the investigation, including the following:

- statements of three first responders and three civilian witnesses;
- statements of five witness officers;
- statement of one subject officer;
- police Computer-Aided Dispatch ("CAD") and Police Records Information Management Environment ("PRIME") records;
- audio recordings of 911 and dispatch channel calls; and
- review of autopsy records.

The IIO does not compel officers who are the subject of an investigation to submit their notes, reports and data. In this case, two SOs did not provide any evidence to the IIO.

## **Narrative**

On October 23, 2019 at 3:05 a.m., police emergency received a dropped call from AP's cell phone. A call-taking staff member called the number back twice and it went to voicemail. They then pinged the cell phone to determine the approximate location of AP. SO1 was dispatched to conduct area patrols to search for AP.

SO1 was provided with a history of AP's previous calls to police en route, which included mental health and substance use elements. SO1 located AP fourteen minutes later, at 3:19 a.m. SO requested assistance from other police officers and also requested that Emergency Health Services ('EHS') be on standby. Subject Officer 2 ('SO2') arrived a minute later and advised dispatch that AP was "super high on something" and that AP was fighting with police. A third officer (SO3) arrived at 3:25 a.m. and it was confirmed to dispatch that AP was in custody a minute at 3:26 a.m.

SO3 provided a written statement to the IIO through his legal counsel. While not required to do so, this statement provided additional information about the incident that was not otherwise available. He said that when he arrived, he saw that SO1 and SO2 had AP on the ground face down. SO1 was on AP's legs and SO2 had AP's right arm. The two officers were having difficulty getting AP into handcuffs, as AP was holding his left arm underneath his body. SO3 assisted and pulled AP's left arm out from under his body. As he was trying to pull AP's left arm out, he heard SO2 tell AP to "stop resisting" and saw him initiate three "distraction blows" to AP's abdomen area.

A civilian witness ('CW1') saw the end of AP's interaction with police and did not see any force applied by the officers apart from trying to control him on the ground. Another civilian witness ('CW2') described the officers as trying to calm AP down. Two minutes after AP was in custody, SO2 advised dispatch that AP appeared to be unconscious. Police administered naloxone immediately, providing AP with three doses within four minutes. Cardiopulmonary resuscitation ('CPR') was started by police, and taken over by firefighters and paramedics upon their respective arrivals. CPR continued until AP was declared deceased at 4:11 a.m.

Toxicology and autopsy results determined that AP died of a drug overdose (cocaine toxicity) and that he did not sustain any injuries that contributed to his death.

## **Legal Issues and Conclusion**

The purpose of any IIO investigation is to determine whether there are reasonable grounds to believe that an officer, through an action or inaction, may have committed any offence in relation to the incident that led to the death of AP. More specifically, the issues to be considered in this case are whether an officer may have been negligent with respect to their initial police response or used excessive force during the apprehension of AP.

Given the nature of the initial complaint, the police had a duty to use reasonable efforts to attempt to locate an individual who may have been in medical distress and in need of help. It took only fourteen minutes from the time of the initial call to the time that SO1 located AP. By the time SO1 arrived, AP was already in a drug induced state. The efforts of SO1 to locate and assist AP were timely and reasonable in the circumstances.

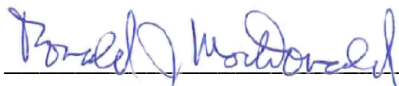
Once having located AP, the evidence makes it clear he was in need of medical assistance from the EHS personnel who had been called. His resistance to police suggests he was attempting to avoid accompanying anyone for such a purpose. As a result, the police were authorized to place him in custody for his own protection.

There was evidence that some force was used to control AP once the SOs located him. Radio transmissions stated that AP was fighting with police and civilian witnesses saw

police holding AP down. SO3 noted that SO2 delivered three blows to AP's abdomen while attempting to get AP into handcuffs. Those "distraction blows" are sometimes used by police as they are felt to assist in gaining control of a subject. In this case there is evidence of AP actively resisting the efforts of police for a least a few minutes. In such a case a moderate amount of force is justified to allow the police to gain control of a person.

While AP sustained rib fractures and minor abrasions on his wrist, hands and head, this level of injury is consistent with the evidence of a struggle of a few minutes with police. What is not present is evidence of more significant injury from the struggle, in particular to vulnerable areas of AP, such as his head. This suggests that police used an appropriate amount of force only. Importantly, none of these injuries contributed in any way to AP's death. In these circumstances there is no evidence to suggest that officers used more force than what was necessary in their attempt to control AP to ensure he received medical attention. On the evidence, AP was treated properly by police and provided with medical attention as soon as possible.

Accordingly, as the Chief Civilian Director of the IIO, I do not consider that an officer may have committed an offence under any enactment and therefore the matter will not be referred to Crown counsel for consideration of charges.



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**Ronald J. MacDonald, Q.C.**  
**Chief Civilian Director**

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December 14, 2020

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