

IN THE MATTER OF THE DEATH OF A MAN WHILE IN THE CUSTODY OF THE VANCOUVER POLICE DEPARTMENT IN VANCOUVER, BRITISH COLUMBIA ON JUNE 30, 2023

DECISION OF THE CHIEF CIVILIAN DIRECTOR OF THE INDEPENDENT INVESTIGATIONS OFFICE

Chief Civilian Director: Jessica Berglund

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INTRODUCTION

On June 30, 2023, the Affected Person ("AP") was taken into custody by Vancouver police. In the cells booking area at the Vancouver Police Department jail, the AP displayed violent resistance, and jail staff struggled to place him into a restraint chair. During this process, the AP went into medical distress and was attended to by medical personnel. He was subsequently declared deceased.

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 two civilian witnesses, two first responders, two jail nurses and five witness officers;
- police Computer-Aided Dispatch ("CAD") and Police Records Information Management Environment ("PRIME") records;
- audio recordings of a 911 call and police radio transmissions;
- video recordings from business premises, a civilian witness cell phone and VPD cells;
- arrest scene examination and photographs;
- BC Emergency Health Services patient care reports;
- pathologist's and toxicology reports; and
- responses to follow-up questions posed by IIO investigators to the pathologist.

The IIO does not require officers who are subject to investigation to provide evidence. In this case, the actions of 12 officers were investigated, and none of those officers has given any account.

NARRATIVE

Civilian Witness 1 ("CW1") told the IIO that on the evening of June 30, 2023, she was walking with a family member on Davie Street in Vancouver. CW1 said that a man (the AP) bumped into her and grabbed a bag she was holding. She said that the AP then stumbled across the street into the forecourt of a nearby gas station. CW1 said that a passing police car turned and followed the AP, and an officer pursued the AP on foot into

the gas station building. Later, she and her companion saw police bring the AP out of the building and place him into a police vehicle. She said that they reported to the officers what the AP had done.

The interior of the gas station building was covered by security cameras, and the following account of the interaction between the AP and responding officers is based on a review of video recordings from that system and from a civilian cell phone, which also recorded audio of the encounter.

On the video, the AP is seen running into a coffee franchise in the building and leaping across the counter, falling heavily onto the floor behind the counter. The officer following the AP walks around the counter and approaches him. Lying on the floor, the AP appears initially to be cooperative and offers his left wrist to be handcuffed. The officer speaks calmly to the AP, telling him he will be taken to hospital to be assessed. The AP then becomes combative, twisting around on the floor and kicking at the officer's face. The officer remains calm, trying without initial success to get the AP's arms secured behind his back. When two further officers arrive to assist, police are able to restrain the struggling AP sufficiently to complete the handcuffing procedure, during which one officer delivers a single distraction strike to the AP's back. Because the AP continues to writhe and kick, a fourth officer applies a hobble to secure the AP's ankles, and the officers subsequently carry the AP out to a waiting police wagon, still twisting and kicking.

The AP was told he was under arrest for assaulting a police officer, theft and mischief. The driver of the wagon later told IIO investigators that while in transit to the jail, the AP was "kicking and screaming" in the back of the wagon.

At the jail, the AP was carried by three guards, without incident, from the wagon into the booking area. He was laid face-down on the floor and was held in place by the guards as he started to struggle again. The cord hobble was removed from his ankles and replaced with a metal shackle, with the AP straining hard against the restraints. Witness Officer 1 ("WO1"), a jail supervisor, told the IIO that at this point he felt concern about the pallor of the AP's face, and summoned a jail nurse to attend. The nurse checked the AP's blood oxygen concentration and found it was low, so the decision was made to place the AP upright, secured into a restraint chair, for his own safety and that of the staff.

The AP was lifted onto the chair and several guards attempted to secure him to it, restraining him in a seated position, bent forward at the waist. This took several minutes, and it is unclear why the procedure was so time-consuming. Before the guards completed it, the AP became unresponsive.

The process was watched by WO1 and two jail nurses. About five minutes into the procedure, WO1 drew the attention of the nurses to the AP's condition and declared a medical emergency. The AP was now unresponsive and was removed from the chair and laid on the floor to enable medical personnel to attempt resuscitation. The AP was transported to hospital where life-saving attempts continued, but he was subsequently pronounced deceased.

The AP's postmortem report noted multiple blunt force injuries to his body as well as multiple contusions and abrasions. The toxicology report indicated the presence of methylphenidate at a level "overlapping with fatalities." The "most likely" cause of death was stated as:

A complex set of physiological sequelae of the following events, signs and symptoms: acute onset of symptoms, delirium, combative or violent behaviour, use of physical restraint, sudden cardiac death, lack of response to cardiopulmonary resuscitation (CPR), and history of endogenous mental disease.

The death is most likely due to a cardiac arrhythmia brought on by complex physiological effects of a hyperadrenergic state (an increase in neurotransmitters secreted by the adrenal glands) and a drop in blood potassium levels that occurs following the cessation of cardiovascular exercise. Additionally, the decedent's use of methylphenidate, a stimulant used to treat attention deficit and hyperactivity disorder (ADHD), may have contributed to the physiological effects on the heart. In previous iterations of postmortem reports, this death would have been called Excited Delirium Syndrome (EDS), but this terminology is since outdated and replaced by a more contemporary, accurate set of physiological entities.

Therefore, the conclusion of the cause of death is reached after review of the decedent's medical history, perimortem medical records, autopsy findings, and toxicological results. Conclusion: the cause of death is combined effects of physical restraint, blunt force injuries with hypovolemia, and methylphenidate toxicity.

In response to follow-up questions from IIO investigators, the pathologist stated that the blunt force injuries mentioned in the postmortem report could have occurred prior to the AP's contact with police.

Investigators established that the AP had been released from a correctional institution on June 22, 2023, eight days before his arrest by Vancouver police. Upon his release, he had been provided with a two-week supply of methylphenidate, a central nervous system stimulant often used in the treatment of Attention Deficit-Hyperactivity Disorder ("ADHD").

ANALYSIS

The Independent Investigations Office of British Columbia is mandated to investigate any incident that occurs in the province in which an Affected Person has died or suffered serious physical harm and there appears to be a connection to the actions (or sometimes inaction) of police. The aim is to provide assurance to the public that when the investigation is complete, they can trust the IIO's conclusions, because the investigation was conducted by an independent, unbiased, civilian-led agency.

In most cases, those conclusions are presented in a public report such as this one, which completes the IIO's mandate by explaining to the public what happened in the incident and how the Affected Person came to suffer harm. Such reports are generally intended to enhance public confidence in the police and in the justice system as a whole through a transparent and impartial evaluation of the incident and the police role in it.

In a smaller number of cases, the evidence gathered may give the Chief Civilian Director ("CCD") reasonable grounds to believe that an officer has committed an offence in connection with the incident. In such a case, the *Police Act* gives the CCD authority to refer the file to Crown counsel for consideration of charges.

In a case such as this one, involving the use of force by officers, IIO investigators collect evidence with respect to potential justifications for that use of force. The CCD then analyzes this evidence using legal tests such as necessity, proportionality and reasonableness to reach conclusions as to whether officers' actions were lawful, or whether an officer may have committed the offence of assault.

Various degrees of force or restraint were used against the AP by several officers, some of them police officers and some VPD jail guards, who fall under IIO investigative jurisdiction because of their appointment as Special Municipal Constables.

The police officers who arrested the AP in response to his theft from CW1 were acting lawfully in the execution of their duty and had reasonable grounds for his arrest on several bases. Objective video evidence establishes that no unjustified or excessive force was used against him, the officers using only the level of force necessary to overcome the AP's resistance. While it appears likely that at least some of the blunt force injuries the AP was found to have sustained occurred during these struggles, the evidence does not establish that they were the result of any inappropriate act by any officer.

With respect to the force applied to the AP during his continued restraint at the jail, this was necessitated by the AP's continued strong resistance, which risked injuring the jail staff and himself. As set out above, the autopsy report is strongly suggestive that while

consumption of methylphenidate may have been a significant contributory factor, restraint combined with the AP's exertions against that restraint also played a role in his death. In the circumstances, however, the force used by the jail guards was not unnecessary or excessive, and they responded appropriately when it became apparent that the AP was in medical distress.

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

Jessica Berglund

Chief Civilian Director

September 5, 2025

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