

IN THE MATTER OF THE DEATH OF A FEMALE WHILE BEING APPREHENDED BY MEMBERS OF THE BURNABY RCMP IN THE CITY OF BURNABY, BRITISH COLUMBIA ON MARCH 6, 2024

DECISION OF THE CHIEF CIVILIAN DIRECTOR OF THE INDEPENDENT INVESTIGATIONS OFFICE

Interim Chief Civilian Director: Sandra J. Hentzen

IIO File Number: 2024-054

Date of Release: September 5, 2024

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Introduction

On the morning of March 7, 2024, the RCMP received a call about a female (the Affected Person or 'AP') attempting to sell drugs at a high school. RCMP officers determined that the AP was the same female that they had arrested the night before and that she was recently released from their custody. The AP was once again arrested and taken to RCMP cells, where she died approximately seven hours later.

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 five civilian witnesses;
- statements of two witness police officers;
- AP's statement taken in interview room at detachment;
- CCTV video from RCMP cell block;
- CCTV video from high school;
- 911 calls;
- Prisoner logs from RCMP cell block;
- police Computer-Aided Dispatch ('CAD');
- RCMP radio transmissions;
- RCMP policies;
- Police Records Information Management Environment ('PRIME') records;
- AED device download; and
- autopsy report.

The IIO does not compel officers who are the subject of an investigation to submit their notes, reports and data. In this case, no officer was designated a subject officer by the IIO investigative team.

Narrative

On March 6, 2024 at 7:50 p.m., Civilian Witness 1 ('CW1') called 911 to report that the Affected Person ('AP') was in a restaurant bothering patrons. CW1 said that the AP was yelling, panhandling, and appeared to be intoxicated. CW1 also asked that officers do a 'well-being check' on the AP, as she was not dressed appropriately for the weather conditions.

Witness Officer 1 ('WO1') and Witness Officer 2 ('WO2') attended and arrested the AP for causing a disturbance. At 8:40 pm, officers arrived with the AP to cells. Officers did

not charge the AP with any offence but held her in custody because she was intoxicated and unable to care for herself. The AP was provided with a forensic suit because she had urinated on herself.

CCTV from the jail cell captured the AP's activity and movements during the evening of March 6, 2024 and early morning hours of March 7, 2024. The AP was restless for the first several hours of her incarceration. She then began to settle down at 2:20 a.m., and fell asleep for approximately four hours, before waking again around 6:00 a.m.

IIO investigators interviewed Witness Officer 3 ('WO3') who dealt with the AP on the morning of March 7, 2024 prior to her release. WO3 said that the AP was yelling and screaming from her cell for the police to "let her go". WO3 explained to the AP that in order to be released, she needed to be calm.

Witness Officer 4 ('WO4') was on-duty in cells and also spoke to the AP that morning. The AP told WO4 that she wanted to go home and also that she wanted to look for drugs.

For approximately one hour, the AP displayed behavior that indicated to WO3 that she was fit to be released. The AP was then allowed to leave cells at 8:25 a.m. on March 7, 2024, approximately twelve hours after her initial arrest. The AP chose not to re-dress in her original clothes and instead wore the forensic suit that had been provided to her as she left custody.

The RCMP received a call from the public about the AP's behaviour shortly after she left cells. At 8:58 a.m., Civilian Witness 2 ('CW2') called 911 to report the AP was intoxicated and was at a local high school. CW2 said that the AP was asking students whether they had drugs. It was also reported that she was "trying to fight someone" and raised her fists at students.

WO4 attended and arrested the AP for a second time, transporting her back to cells. In the car on the way back to cells, the AP begged WO4 to take her home instead. When WO4 refused, the AP requested that she be taken to hospital instead of being taken to cells. WO4 did not take her to the hospital, believing that the AP did not require medical assistance, and only wanted to go to the hospital to avoid going to jail. WO4 did not inform WO3 (jail supervisor) about his conversations with the AP.

The AP was booked into cells at 9:30 a.m. and stayed awake in her cell until 1:24 p.m. when she was interviewed by WO4. When WO4 removed the AP from her cell, he noticed there was feces on the floor of her cell.

The AP requested in her interview that WO4 take her to hospital. WO4 asked whether she was 'dope sick', and she said yes. WO4 said that he noticed she was ill but did not

think it was severe enough to take her to the hospital as she was not throwing up or experiencing diarrhea. WO4 did not inform WO3 (the jail supervisor) about his conversations with the AP. The interview conducted by WO4 was captured on video. During the interview, the AP would go from putting her head on the table in a drowsy state to sitting upright conversing and sometimes getting agitated with WO4. She was responsive to WO4's questions.

At 2:07 p.m., the AP was brought out of the interview room and photographed. WO3 took the photographs and said he did not have concerns for the AP's health at that time. The AP was then placed back into her cell at 2:08 p.m. and she laid down. At 3:18 p.m., the AP made her last visible movement on the CCTV video.

The AP's jail cell was monitored by a civilian jail guard (Civilian Witness 3 or 'CW3'). It is RCMP policy to ensure that prisoners are physically checked on at a minimum of every fifteen minutes to assess a prisoner's ability to be roused, and their health. This is generally performed from outside the cell. CW3 did in-person checks on the AP at 3:31 p.m. for approximately three seconds, 3:45 p.m. for approximately 11 seconds, and at 4:00 p.m. for approximately 10 seconds.

CW3 was interviewed by IIO investigators. CW3 explained that when he does his checks, CW3 looks for a prisoner's chest rising and falling to indicate that they are breathing. CW3 said that sometimes the video does not provide the same view of the prisoner as when he is doing his in-person checks, and therefore does not capture all prisoner's movements. The prisoner logbook showed that CW3 believed the AP to be breathing on all three of his checks between 3:31 p.m. to 4:00 p.m.

CW3 conducted a fourth check at 4:15 p.m. and noticed an issue with the AP. CW3 was not able to get a response from the AP when he kicked the door of her cell, attempting to wake her. CW3 immediately notified WO3. At 4:17 p.m., CW3 and WO3 opened the cell door and began administering life saving measures, including Narcan and administering an AED. Paramedics attended and lifesaving measures were continued for 45 minutes until it was determined by a doctor that no further attempts to save the AP's life would be successful. The AP was pronounced deceased at 4:55 p.m.

An autopsy was performed and the cause of death was determined to be drug toxicity. No drugs were found in the AP's cell or in the police vehicle that she was transported in, nor was she observed to consume drugs while in police custody.

Legal Issues and Conclusion

The Independent Investigations Office of British Columbia has been given the task of investigating 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 the majority of 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 died. 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.

To constitute an offence by inaction or negligence, the evidence would have to show that the inaction or neglect of police officers was a marked departure from the reasonable standard of care that would be expected in these circumstances. The IIO does not currently have jurisdiction to investigate the actions of civilian jail guards, but legislation is in place that will change that in the future.

In this case, police interactions with the AP were largely captured on video, including throughout the booking-in process and in police cells. While the AP was in her cell, monitoring was carried out by CW3, who is a civilian jail guard.

Forty-five minutes elapsed where the AP showed no movement on the CCTV video. There were three physical visual checks performed by CW3 during this time period, as CW3 walked around the cells. This was recorded and corroborated by video and prisoner logbook evidence. Nothing was viewed as amiss during these checks. CW3 explained that in-person visual checks are generally better for gleaning health information such as whether someone is breathing, rather than what is captured on video. The visual checks that were performed were only 3-11 seconds in length. With the benefit of knowledge and hindsight, one wonders whether the checks could have been more fulsome.

The AP asked WO4 twice to go to the hospital, and she had soiled and urinated herself during her stay in custody. There was no indication that there was communication regarding her requests to go to hospital with WO3, who was in charge of the cell block that evening, or CW3, who was in charge of monitoring the prisoners. Moreover, WO3 was not able to recognize that the AP was experiencing a reaction to drug toxicity, and not simply symptoms of withdrawal. Again, with the benefit of hindsight, one wonders whether this information would have resulted in a more careful monitoring of the AP and/or provision of medical treatment.

The IIO mandate requires me to focus on whether there is criminal culpability for an officer's actions. In this case, brief checks were done by a civilian jail guard who believed that the AP was alive and well during the 45 minutes captured on video where the AP does not move. Similarly, the officers that were interacting with the AP that evening did not believe the AP required medical attention. Although the overall situation does not meet a criminal standard to refer this matter to Crown Counsel, I will be referring it to the RCMP and the Civilian Review and Complaints Commission in order to assess whether policy or training changes are necessary to prevent similar situations from happening in the future.

This case continues to raise concerns about how intoxicated prisoners are housed generally in British Columbia. Officers and jail guards are not trained medical personnel, and jail cells are not the best place for such prisoners. Other options are utilized within the province, including sobering centres and having health professionals on site to deal with intoxicated persons. The care of intoxicated persons should not fall solely to police, as it is a health care issue.

Accordingly, as the Interim 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.

Sandra J. Hentzen

Interim Chief Civilian Director

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