



**IN THE MATTER OF THE DEATH OF A MAN
AFTER BEING ARRESTED BY MEMBERS OF THE RCMP
IN LANGLEY, BRITISH COLUMBIA
ON AUGUST 1, 2024**

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

Chief Civilian Director:

Jessica Berglund

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INTRODUCTION

On the evening of August 1, 2024, RCMP members responded to a dispatch saying that a dropped 911 call had been received from a residence in Langley. They were met by the Affected Person (“AP”) at the entrance to a basement suite, and he refused them entry. The officers arrested the AP for obstruction, and he resisted. Police called paramedics to assist, as they felt the AP was displaying symptoms of “excited delirium.” The AP then became unresponsive and was transported to hospital by ambulance. He passed away in hospital on August 18, 2024.

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 seven civilian witnesses, four first responders and four witness police officers;
- police Computer-Aided Dispatch (“CAD”) and Police Records Information Management Environment (“PRIME”) records;
- audio recordings of 911 calls and police radio transmissions;
- video and audio recordings of incident;
- scene and exhibit photographs;
- medical records; and
- autopsy and toxicology reports.

NARRATIVE

At 8:28 p.m. on August 1, 2024, a 911 call was received by Abbotsford emergency services. The caller said he had dialled by accident. Transferred to the police call-taker, the caller repeated that he did not need the police. The caller’s phone number was found to be associated with the Affected Person (“AP”).

At 11:11 p.m., there was a second 911 call from the AP’s phone. The caller said “hello” and the call was then disconnected. At least four call-backs were made but went to voicemail. The origin of the calls was mapped to the AP’s home in Langley.

Abbotsford police contacted Langley RCMP, and Langley Dispatch called the number, but each time, the call was disconnected once the dispatcher announced that it was the police calling.

Witness Officer 1 (“WO1”) told IIO investigators that on August 1, 2024, he was on duty in a supervisory capacity. When Dispatch requested officers go to the AP’s residence for a wellness check, WO1 said, he went to assist Witness Officer 2 (“WO2”), who had responded to the call. The two officers went to the rear of the building, where a flight of seven concrete steps led down to the door of the AP’s basement suite.

WO1 said that, when advised why police were there, the AP denied having made a 911 call. WO1 radioed Dispatch and asked them to call the AP’s cell phone, which rang in the AP’s pocket. WO1 told the IIO that the AP said everything was fine, and that there was no one else in the suite. WO1 was concerned, though, and had the impression that the AP was under the influence of some substance. WO1 said that when the officers told the AP that they needed to come inside to make sure no one needed assistance, the AP became confrontational. He told the officers he did not believe they were police, even though both officers were in full police uniform. WO1 said he tried repeatedly to explain to the AP that they were duty-bound, after dropped 911 calls, to make sure no one in the residence was hurt or otherwise in distress. The AP continued to refuse them entry. WO1 described continuing odd behaviour on the AP’s part, and said that he felt something was “not right” with the AP. After an extended and fruitless negotiation with the AP, WO1 told him he was under arrest for obstruction, and ordered him to put his hands behind his back to be handcuffed.

WO1 said that the AP responded by screaming and struggling. WO1 recalled the AP shouting, “They’re killing me! Help me! They’re shooting! Oh God! Oh God!” WO1 said that these shouts from the AP continued throughout the struggle as it continued onto the concrete steps, where the AP fell with his arms under himself. Hearing the commotion, Civilian Witness 1 (“CW1”) approached, telling the AP to let the police “do their job,” but was told to stand back for his own safety. WO1 said that at one point, WO2 asked if he should use a Conducted Energy Weapon (“CEW” or “Taser”) against the AP, and WO1 told him, “Absolutely not.”

Witness Officer 3 (“WO3”) arrived and attempted unsuccessfully to assist by controlling one of the AP’s arms. WO1 delivered several pain-compliance punches or slaps to the side of the AP’s head, but they were not effective in having the AP release his arms. WO1 then obtained control using a pressure point between the AP’s jaw and ear, and the officers were finally able to apply the handcuffs.

WO1 stated that no CEW, firearm, baton or pepper spray was used or displayed at any point, no vascular neck restraint or carotid control hold was used by any officer, and to the best of his knowledge, no officer delivered any kicks or knee strikes.

The AP was carried up the steps and laid on his side on a grassy area. WO1 said that the AP continued screaming but said he did not hear the AP say he could not breathe. WO1 said the AP was held by the other two officers in the recovery position, on his left side.

WO1 entered the AP's suite and verified that no one was there, or that anyone had been harmed. Asked by investigators, WO1 said he did not see any sign of drug use.

WO1 said that as he came out of the house, he saw that the AP had inched closer to the edge of the concrete sidewalk at the top of the steps and had started banging the left side of his head against it. WO1 instructed the other officers to pull him back fully onto the grass.

Witness Officer 4 ("WO4") arrived to assist, and WO1 directed him to relieve WO2 at the AP's head. WO1 told the IIO investigators that he instructed both WO2 and WO4 to monitor the AP's breathing and pulse. WO1 said he did not check the AP's condition himself but trusted the other officers to do so.

As an ambulance was arriving, WO1 said, he heard WO4 say, "I can't feel his pulse." The attending paramedics told police to remove the handcuffs, which they did. WO1 said that only the initial paramedics, and then Advanced Life Support technicians and firefighters, provided life-saving measures to the AP. WO1 said he did not recall the officers being asked to assist.

Interviewed by the IIO, WO2 gave a similar account of the officers' attendance at the residence and their interaction with the AP at his door. WO2 recalled noticing indications in the AP's presentation that suggested he was under the influence of substances. WO2 said that the AP was "all over the place" in his responses to the officers.

WO2 described the AP forcefully resisting his arrest but said that the AP did not attempt to assault the officers at any point. WO2 said that he and WO1 found themselves unable to handcuff the AP, due to the strength he was exerting in resistance, and said that the AP continued to shout and scream throughout these attempts. The officers were finally able to apply the handcuffs, WO2 said, when WO3 arrived to assist.

WO2 said he could not recall the use by any officer of any force against the AP apart from physical restraint and handcuffing. He said the AP continued to kick and scream after

being handcuffed, and the officers placed him on his side in the recovery position. WO2 recalled that the officers rotated their monitoring positions around the AP while they waited for paramedics, and said he checked the AP's breathing and pulse, especially after the AP stopped screaming and became quieter.

WO3 told investigators that she was initially unable to pull the AP's left arm from under him and saw WO1 hit the left side of the AP's head "two or three times," after which the three officers were able to apply handcuffs. WO3 said she did not see any other officer strike the AP. She said that at about the same time she became aware that the ambulance had arrived, she heard either WO2 or WO4 say, "Shallow breathing, shallow breathing." She said the paramedics came to the AP, found no pulse and started CPR. After a while, they had restored a pulse, and the AP was transported to the hospital.

WO4 told the IIO that when he arrived at the scene, it had already quieted down. He said he saw the AP on the grass in handcuffs, not shouting or screaming but "mumbling." WO4 said that WO2 and WO3 were holding the AP in the recovery position. He said they were not using their body weight to pin him down; they were holding him in place with their hands, using "minimal" force. At one point after WO4 was directed to take WO2's position, he noticed that the AP's breathing was becoming irregular. He said that either WO2 or WO3 then alerted the other officers that the AP did not have a pulse. WO4 said paramedics arrived and commenced resuscitation efforts.

A civilian witness recorded three video clips during the incident, from behind nearby bushes. The AP is first seen being held down by WO1 and WO2 near the top of the steps. He is yelling almost continually, asserting "I can't breathe." At times, he can also be heard to shout, "They're shooting me!" WO1 can be heard speaking calmly to him, telling him that if he can shout, he can breathe. WO3 arrives and is directed by WO1 to pull the AP's right arm out from under him, but she appears unable to do so. WO1 directs four short blows, apparently to the area of the AP's left shoulder, after which the officers are able to complete the AP's handcuffing and sit him up.

WO1 calls for paramedics to attend, and is heard to say to the other officers, "Get him on his side so he can breathe. I don't want him going into asphyxiation." As the AP is moved onto the grass, he is shouting, "Help! You shot me! You shot me! You shot me!" Over the following minutes, as the officers hold him, he repeatedly shouts, "Ow!" and "You shot me!" The officers, in their turn, repeatedly urge the AP to "calm down," and WO1 reminds them not to put too much pressure on the AP. The video recording shows the AP's voice becoming quieter and fading into silence.

A second civilian cell phone video clip shows the arrival of the first paramedics. At one point, a paramedic is heard to ask one of the police officers to take over chest compressions, but none of them does so. Shortly after this, WO1 is asked to go and bring oxygen, but does not respond until the request is re-worded: “Can you walk up to the front and tell Fire to bring more oxygen?” WO1 then walks away, presumably to pass on the message, and a firefighter brings oxygen tanks.

The AP died in hospital on August 18, 2024. His postmortem report noted that the urine drug screen was positive for cocaine, and stated that the primary cause of death was anoxic brain injury following “cardiac arrest, likely related to cocaine/stimulant use.” There were no significant physical injuries. The toxicology test was positive for fentanyl. The pathologist specifically ruled out obstruction of the AP’s airway or physical compression as having caused or contributed to his death.

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, the 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.

The involved officers were responding to a series of dropped 911 calls from a residence, and the law is clear that in such circumstances, police are required by their duty to preserve life to ensure that there is no one in the residence who is injured or otherwise in need of assistance or protection. The officers were acting lawfully in requiring the AP to permit them entry, and when he prevented that entry, he was committing the offence of obstruction of a peace officer in the execution of his duty. The officers, then, were acting lawfully in arresting the AP, and in using reasonably necessary force to do so.

It is reasonable to conclude, considering the AP's behaviour and the medical evidence, that he was suffering from some form of drug-induced psychosis, which unfortunately caused him to engage in the extended physical struggle that followed. There is no evidence that any officer used more force than was reasonably necessary to subdue the AP and take him into custody.

As mentioned above, it appears that the officers' level of cooperation with the attending paramedics was lacking, but it should be noted that they had just experienced an extended struggle on the ground with a screaming man, and would now have been dealing with the physical and emotional after-effects. It cannot be said that they significantly impeded the provision of medical aid to the AP.

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

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