



**IN THE MATTER OF THE DEATH OF A MAN  
FOLLOWING AN INTERACTION WITH A MEMBER OF THE RCMP  
IN QUESNEL, BRITISH COLUMBIA  
ON OCTOBER 27, 2025**

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

Chief Civilian Director: Jessica Berglund

IIO File Number: 2025-249

Date of Release: May 13, 2026

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## INTRODUCTION

In the early morning hours of October 27, 2025, the Subject Officer (“SO”), a Quesnel RCMP member, responded to a call complaining that the Affected Person (“AP”) was present outside a homeless shelter in breach of a condition that he not be at that address. The SO was unsuccessful in his attempts to have the AP leave the area, and shelter staff ultimately indicated that he could stay where he was, on the sidewalk outside. Over the next several hours, the AP was checked on several times, both by the SO and by shelter staff and clients. Just before 8:30 a.m., the AP was found to be unresponsive and an ambulance was called. Despite life-saving efforts by medical personnel, the AP 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 eight civilian witnesses, two paramedics and one witness police officer;s
- police Computer-Aided Dispatch (“CAD”) and Police Records Information Management Environment (“PRIME”) records;
- audio recordings of police radio transmissions;
- log notes from the shelter outside of which the incident occurred;
- security camera video recordings from the shelter;
- recording from the SO’s body-worn camera;
- historical weather data;
- medical evidence and autopsy report.

The IIO does not require officers whose actions are the subject of an investigation to provide evidence. The IIO investigators reviewed a PRIME entry that was completed by the SO before the AP died and prior to any knowledge on the part of the SO that his later involvement with the AP would become subject to an IIO investigation. The IIO primary investigator advised the SO that they had reviewed these notes. No further evidence was provided to IIO investigators by the SO.

## NARRATIVE

At 1:11 a.m. on October 27, 2025, Quesnel RCMP responded to a report that the Affected Person (“AP”) was outside a homeless shelter in breach of a court-ordered condition that he not be at that location. It was also reported that the AP had defecated in his clothes.

Civilian Witness 1 (“CW1”), a staff member on night shift at the shelter, wrote in the logbook that shelter clients were complaining that the AP was putting their health at risk by spreading excrement on the ground. CW1 stated she had tried to convince the AP to let her call an ambulance for him, but he had refused to engage with her, despite being “alert and responsive.” CW1 noted that the AP “technically isn’t even supposed to be here,” and that she had called police to come and take the AP “somewhere safer where everyone isn’t so mad at him.”

Witness Officer 1 (“WO1”) later told IIO investigators that he had arrested the AP for mischief at the shelter about two weeks earlier, and added that despite the “no go” condition on which the AP had been placed, some staff members still allowed him to be there. WO1 said that the AP would often decline when offered a call for an ambulance.

In response to the call from CW1, the Subject Officer (“SO”) arrived outside the shelter at 1:26 a.m., remaining there until about 1:49 a.m. The SO wrote a note in PRIME briefly describing his dealings with the AP, and he was equipped with a Body-Worn Camera (“BWC”), so the interaction was also audio- and video-recorded.

In his PRIME report, the SO wrote:

*[The SO] attempted to help [the AP] up, but [the AP] could not stand on his own. [The SO] asked [the AP] if he would like to see EHS and he stated he wanted to go to Subway. [The AP] was asked multiple times if he would like to see EHS and he declined every time. [Shelter] staff stated he is okay to stay on the sidewalk. No further action required.*

In the BWC recording, an unidentified man can be heard telling the SO that the AP needs to go to a local short-stay treatment centre, and the SO replies that police had tried that, but “they would not take him.” The SO tells the AP that he has to go and sit across the street, away from the shelter, and tries to help the AP to his feet. As soon as the SO lets go, though, the AP sinks back down onto the sidewalk. The BWC recording then ends.

The shelter video recording shows CW1 interacting with the AP at about 1:05 a.m. and trying to get him to stand up, but the AP appears unable to stand unassisted. A little later, the SO is seen arriving, and also helps the AP to his feet, holding him up for about 30 seconds. As shown in the BWC video, the AP then goes back to the ground, and the SO leaves him and walks to the shelter entrance to speak with staff.

About 10 minutes later, the SO exits the shelter, talks with the AP, and makes several unsuccessful attempts to help the AP up. At 1:47 a.m., the SO walks back to his police vehicle but remains parked, observing the AP and at one point talking with an unidentified man nearby. At 2:16 a.m., the SO pulls his vehicle alongside the AP and appears to speak with him through the open window (there is no audio track on the shelter video recording capturing the interaction).

At about 2:19 a.m., the shelter video shows the SO approaching the AP again, and his actions at that time appear consistent with administration to the AP of nasal naloxone. He then helps the AP to his feet once more, and the AP now appears able to remain standing. He props himself up against the shelter wall and then moves away with the SO towards the entrance.

About five minutes later, the SO is seen exiting the shelter, holding something in a plastic sandwich bag. The AP has apparently returned to the ground near the entrance, on his knees. The SO helps him into a position against the outside wall of the shelter and gives him the plastic bag. As the SO then drives away, the AP goes down onto his side, and appears to be eating something from the bag.

Neither of the video recordings shows any use of force by the SO other than what appear to be attempts to help the AP get up and remain standing, and possible administration of naloxone (the investigation was unable to confirm whether naloxone was administered).

Between 2:29 and 3:36 a.m., several civilians interacted with the AP. One of them, Civilian Witness 2 ("CW2") told the IIO that he offered to call an ambulance, but the AP responded negatively. Civilian Witness 3 ("CW3"), a shelter staff member accompanying CW2 for his IIO interview, added that she had called an ambulance for the AP about 50 times and he had only agreed on one occasion to go with the paramedics.

The SO returned at 3:36 a.m. and watched from his police vehicle as CW2 helped the AP sit up, tried with limited success to share a coffee with him and brought him a blanket. After apparently speaking with the AP for several minutes, the SO drove away at 3:53 a.m. He did not activate his BWC and no further notes were entered into PRIME by the SO.

In the hours that followed, shelter clients and staff members checked on the AP multiple times. Civilian Witness 4 ("CW4"), a staff member, told the IIO that staff last checked on him at 6:30 a.m., at which time he was responsive.

However, at 8:29 a.m., paramedics attended after a 911 call from a concerned civilian who had observed that the AP was not moving or responding. The AP was transported by ambulance but was subsequently declared deceased at the hospital.

The AP's medical records indicate a history of repeated hospitalizations, characterized by his non-cooperation and habitual self-discharge against medical advice. His autopsy report noted the cause of death as "best ascribed to a right-sided pneumonia," but also mentioned "other significant conditions contributing to death" including mixed drug intoxication; pulmonary emphysema; cachexia (wasting of the skeletal muscles); blunt force head injuries consistent with falls; homelessness and hypothermia. The toxicology report stated that the AP's blood contained methamphetamine at a level at which recreational use overlapped with recorded fatalities. Further, the report continued, the level of para-fluorofentanyl (a potent synthetic opioid) measured was also consistent with fatalities.

Weather records for Quesnel indicate that the outdoors temperature on the day of the AP's death dipped to about minus two degrees Celsius by 8:00 a.m.

## **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 goal 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 the BC Prosecution Service ("BCPS") for consideration of charges.

The SO was placed in a difficult position. Video and civilian eyewitness evidence establishes that the SO approached the AP in a concerned and caring manner, simply trying to assist him in moving to a location where he would not be in breach of his conditions. When the AP appeared unable or unwilling to cooperate, the tolerance displayed by shelter staff made it impractical to arrest him for the breach, so the only remaining course of action would have been to call an ambulance. The officer would have

been aware of the AP's unwillingness to submit to hospitalization, and the evidence is that, on this occasion as well, he was not willing to go in an ambulance.

The SO was under a common law duty to safeguard and preserve the AP's life, so the question that must be answered is whether he was negligent in complying with that duty. In the circumstances, it cannot be said that the SO, who stayed with the AP for a significant time and returned later to check on him further, displayed any degree of negligence.

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 the BCPS for consideration of charges.



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Jessica Berglund  
Chief Civilian Director

May 13, 2026  
Date of Release