

# ***FINAL REPORT: IIU concludes investigation into death following arrest in Winnipeg***

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On October 1, 2019, the Winnipeg Police Service (WPS) notified the Independent Investigation Unit (IIU) of a fatality following an arrest of a male, later identified as the affected person (AP) that occurred in the early morning hours of September 23, 2019 in Winnipeg. This notification, provided to IIU (edited for clarity), read in part:

*“On Sept 23 at approx. 00:42 hrs, WPS officers responded to a wellbeing call at Assiniboine Ave and Kennedy where it was reported that a naked male who seemed confused was yelling about people trying to get him. The male was located on the riverbank and observed to be on his back yelling randomly at no one. As officers approached, the male is reported to have jumped up and confronted officers. Officers attempted to restrain the male and handcuff him. Officers utilized force to restrain the male on the ground at which time he became unresponsive. Officers performed chest compressions and revived the male. He then continued to fight and leg restraints were applied. He was then transported in critical condition to St. Boniface Hosp where he was later listed as stable. The male was pronounced deceased on Sept. 30th at 06:58”*

As this matter concerned the death of a person that may have resulted from the actions of a police officer(s), IIU assumed responsibility for this mandatory investigation in accordance with section 66(4) of The Police Services Act (PSA). IIU investigators were assigned to this investigation. In January 2020, the original lead investigator resigned from the IIU and this matter was reassigned to a new lead investigator. This resulted in a delay to permit the new lead investigator time to familiarize themselves with this matter.

Further, in accordance with section 70(1) of the PSA, the IIU was required to seek the appointment of a civilian monitor, as this matter involved the death of a person. IIU requested a civilian monitor be appointed by the Manitoba Police Commission.

WPS information, and other information obtained by IIU investigators, included:

- incident history report
- WPS radio transmissions
- 911 Audio Recordings
- scene photographs
- GPS data from WPS cruiser cars
- Airl video recordings
- notes and reports from various witness officers
- use of force report
- WFPS medical records
- SBH medical records

- autopsy report
- toxicology report

Due to the dearth of information at the outset of this investigation as to whether any actions by any WPS officer contributed, to any degree, to the death of AP, it was decided that no subject officer designation would be made at this stage, pending receipt of more facts and evidence. Eight WPS officers were designated as witness officers (WO1 – 8) and interviewed by IIU investigators. IIU investigators received notes and reports from three additional WPS officers which were sufficient for this investigation as it was determined that interviews of these officers were not required. IIU investigators interviewed six civilian witnesses (CW1 – 6). Two potential civilian witnesses declined to be interviewed by IIU investigators. Additionally, IIU investigators interviewed five members of the Winnipeg Fire and Paramedic Service (WFPS) (PW1 – 5).

### **Facts and Circumstances**

#### **Scene Examination and Canvass:**

The incident surrounding the arrest of AP occurred on September 23, 2019. Information received disclosed that AP lost consciousness after contact with police on September 23 and never regained consciousness. He was declared deceased on September 30. IIU was not notified of this matter until seven days after the incident, in the evening of September 30. On October 1, IIU investigators intended to examine the scene of the arrest of AP, however the area of the arrest at Assiniboine Avenue and Kennedy Street was found to be flooded because of rising levels on the Assiniboine River and the scene was destroyed.

The buildings immediately to the west of the incident location, on Assiniboine Avenue, are the Government Greenhouse and buildings associated to the Manitoba Legislative property. The Manitoba Legislative Building is northwest of the intersection of Assiniboine Avenue and Kennedy Street. The Manitoba Legislative property is between Kennedy Street and Osborne Street from Assiniboine Avenue to Broadway.

IIU investigators canvassed the surrounding areas and found surveillance cameras around the water fountain, south of the Manitoba Legislative Building, on the north side of Assiniboine Avenue and around the walkway by the Louis Riel sculpture, south of the water fountain. It was confirmed that the surveillance cameras are the property of the Province of Manitoba and are monitored by Manitoba Protective Services. Unfortunately, not all the cameras were operational. IIU investigators also canvassed nearby apartment buildings and residences, but did not locate any exterior cameras located on any of the buildings facing toward the Assiniboine River.

#### **Civilian Witnesses:**

All witness interviews disclosed similar descriptions of the incident that took place on September 23. All witnesses noted that AP was heard yelling, acting erratically, running towards the river and then observed to fall, striking his head on a curb of the river walk prior to the arrival of WPS officers and WFPS personnel.

**CW1** is a member of the Manitoba Protective Services and was on duty that night. Between 12:30 and 12:45 a.m., he was at the Law Courts Building complex, checking on staff, when he noticed the Air1 helicopter flying around the area of Kennedy Street and Assiniboine Avenue, nearby the Manitoba Government Greenhouse. CW1 stated that he made his way to this

area and noted a number of WPS cruisers parked at the end of Kennedy Street, when three more cruisers arrived. CW1 stated that he heard the sound of a male yelling and screaming, coming from the riverbank along the river walk. CW1 stated that he made his way to the edge of a pier along the bank of the River and saw a male, later identified as AP, in handcuffs and laying on his side on the river walk. CW1 stated that AP's head was facing toward the river and he was yelling, screaming and shaking violently. CW1 stated that based on his experience, he believed that AP was on methamphetamine. CW1 stated that WFPS arrived and attended to AP. CW1 stated that WPS and WFPS members were assessing an uncooperative and shaking AP. CW1 stated that at no time during his presence at this scene did he witness any police officer strike, kick or punch or use any weapons on AP.

**CW2** resides across the Assiniboine River from the intersection of Kennedy Street and Assiniboine Avenue. CW2 stated that at approximately 1:00 a.m., she was watching TV when she heard screaming from outside. CW2 stated that she stepped out onto her balcony, where she saw and heard a male, later identified as AP screaming and "... *standing just down the steps of the river walk, down from Kennedy Street and Assiniboine Avenue*". CW2 stated that she had previously seen AP in the vicinity a week or two earlier, also yelling and screaming. She did not believe it was necessary to call police then. CW2 stated that on this occasion, AP was screaming, "*I love you Mom, I love you Dad, I love you Bro, God is my redemption.*" CW2 stated that AP appeared to be naked and, in her opinion, "...*high on something*". CW2 stated that AP stood, with his arms stretched out away from his sides, "...*like a cross*", as he continued to yell. CW2 stated that AP put his arms down along both sides and let himself fall backwards. CW2 stated that she heard the sound of a "*loud clack*", as if his head struck the stone curb along the river walk. CW2 stated that AP was not moving and she thought he killed himself. As CW2 was about to telephone police, she noticed that a WPS cruiser car drove down the street and two police officers went down the stairs toward AP. CW2 stated that more police officers arrived on scene and attended towards AP. CW2 stated that AP appeared to wake up and began yelling, "*I love you*". AP then stood up and started to walk to the west. CW2 stated that the WPS officers surrounded AP, restrained him and attempted to get him to sit down. When AP finally sat down, CW2 heard on WPS officer say, "*Hey Buddy. Stay with us.*" Then CW2 saw WPS officers lay AP down as an officer commenced to perform CPR compressions on him. She said AP woke up again and repeated, "*I love you.*" CW2 stated that she saw paramedics attend to AP and place him on a board. Paddles were used at one point to resuscitate him. CW2 stated that, at no time, did she see WPS officers hit, punch, kick, or use batons or tasers on AP.

**CW3** resides at an apartment near the scene. CW3 stated that shortly after midnight, he was playing video games, when he heard a male, later identified as AP, yelling from outside. CW3 stated that he looked outside and saw AP standing on the river walk between the stairs and Kennedy Street. CW3 stated that AP was removing his clothes as he yelled, "*You guys wanna fight me. I'm f\*\*\*\*\*g homeless. Let's go!*" CW3 stated that AP was alone and it appeared he was "*tripping out*". CW3 stated that AP started waving his arms around and dancing around the river walk saying, "*I'm ready.*" As CW3 believed that AP may fall into the Assiniboine River or may hurt somebody, he telephoned a WPS non-emergency number to report what he saw. CW3 stated that he continued watching AP, who was now naked, and speaking in religious rhetoric, such as "*Michael the Archangel*", talked the whole time and did not stop yelling. CW3 stated that AP repeatedly said, "*Take me God. I'm ready. I believe in*

you.” CW3 stated that AP was now moving his arms around in a windmill motion, when he tumbled and fell backwards, landing on his back. CW3 stated that he believed that AP’s head might have struck a bench or bricks along the river walk. CW3 stated that AP laid there, without moving, between 15 to 20 minutes until WPS officers arrived on scene. Within a few minutes, CW3 stated that WPS officers’ handcuffed AP. CW3 stated that AP was “...*really putting up a fight*”, and was resisting and screaming at WPS officers. Eventually, AP calmed down and he was removed from the scene.

CW4 resided at an apartment across the Assiniboine River from the intersection of Kennedy Street and Assiniboine Avenue. CW4 stated that she was sleeping in her bedroom, when, between 12:30 and 12:45 a.m., she was awakened by the sound of a male yelling, “*They’re in the trees.*” CW4 stated that she looked out her bedroom window and noticed someone standing alone on the opposite side of the Assiniboine River, near the stairs at the end of Kennedy Street at Assiniboine Avenue. CW4 stated that this male alternated between standing up and lying down and continued yelling a pattern of words. Within five to ten minutes, CW4 stated that she heard the sounds of police sirens. CW4 stated that she then saw two police officers walked down to the river walk and over to the male. More WPS officers (estimated between 12-14 officers) then arrived on scene. CW4 stated that the police officers stood there and did not engage or touch the male. CW4 stated that the WPS police helicopter shone a light on the area; she noticed that the male was naked. Approximately ten minutes later, CW4 stated that firefighters and paramedics arrived on scene. Someone had brought down a stretcher board and the male was wrapped in a blanket. CW4 stated that approximately 10 - 20 minutes after the paramedics arrived, the male was moved towards the stairs. CW4 stated that she saw someone performing CPR on the male. CW4 stated that she did not see any police officer kick or punch the male.

CW5 is a relation of AP. CW5 stated that AP attended Main Street Project (MSP) at 7:00 p.m. on September 22. AP stayed at MSP until 9:00 p.m. that evening. CW5 stated that he did not believe that AP drank alcohol or use any drugs.

CW6 is a relation of AP. CW6 stated that she spoke with AP that evening. She was advised that AP planned to attend Kingdom Hall to participate in bible studies. AP left at 7:30 p.m. and CW6 did not hear from him again.

### **Winnipeg Fire Paramedic Service Personnel**

PW1 was working at Station 11 on Portage Avenue, west of Polo Park, when she was dispatched pursuant to a “*Code 4*” (a male acting erratically or due to excited delirium<sup>1</sup>). PW1 attended to the scene at the river walk, near Kennedy Street and Assiniboine Avenue. PW1 stated that four to six WPS police officers and four WFPS members were already on scene. According to information received, there was a report of a male acting strangely or erratically and it was noted that he might have hit his head on the limestone. PW1 stated that everyone made their way to the river walk and the male, later identified as AP. PW1 stated that AP was handcuffed and laying on the graveled walkway, next to a low limestone retaining wall or planter. PW1 did not observe any blood on the limestone retaining wall. A cardiac monitor was hooked to AP and

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<sup>1</sup> Excited delirium is characterized by agitation, aggression, acute distress and sudden death, often in the pre-hospital care setting. It is typically associated with the use of drugs that alter dopamine processing, hyperthermia, and, most notably, sometimes with death of the affected person in the custody of law enforcement.

his vital signs were monitored. PW1 stated that AP was awake, breathing and yelling. PW1 stated that she tried to speak to AP but he was not making any sense. PW1 stated that AP was naked. PW1 did not detect any signs or odor of alcohol or drugs on him. PW1 stated that AP had three large lacerations to the back of his head, but the bleeding was controlled with a normal dressing. Medication to help AP calm down was administered intra-muscular, which is typical treatment to de-escalate someone in AP's situation, allowing paramedics to treat them safely. PW1 stated that as paramedics were preparing to move AP up the stairs, someone noticed that he was not breathing. CPR and ventilation steps were commenced to deal with AP's condition. Following two minutes of CPR, AP regained a pulse and he was moved up the stairs, into an ambulance and transported to St. Boniface Hospital (SBH). PW1 stated that paramedics did not use a defibrillator on AP.

**PW2** is the District Chief for WFPS. PW2 was dispatched to the scene for a supervisory presence respecting a possible excited delirium scenario. On arrival, PW2 stated that WPS officers and WFPS personnel were attending to a male, later identified as AP. PW2 stated that as AP was by the riverbank, it might be difficult to get him out and to get the equipment up and down the bank. PW2 stated that a WFPS crew of four along with at least six police officers were all down near AP. PW2 stated that AP was naked and handcuffed with his hands behind his back. AP was laying across the river walk walkway, with his feet pointing south towards the Assiniboine River. PW2 stated that AP had a wound to the back of his head, with some congealed blood present. PW2 stated that the paramedics discussed how they would move AP and due to the safety concerns, agreed that he remain handcuffed and be sedated. As paramedics were moving AP, it was noted that he was not breathing and he showed a very slow pulse. CPR and ventilation were commenced until it was determined that he had a pulse again. AP was moved up the stairs, into an ambulance and transported to SBH. PW2 stated that no paramedic used a defibrillator on AP either at the scene or during the transport to SBH. PW2 stated that he was suspicious that AP was under the influence of methamphetamine.

**PW3** is a trained Primary Care Paramedic (PCP) with WFPS. PW3 stated that he and his crew were dispatched to the scene in respect of an agitated person on the riverbank. On arrival, there were numerous police vehicles already present. As he made his way down to the river walk, PW3 stated that the river walk was dark and flashlights were needed to illuminate the area. There were six - eight police officers standing in a semi-circle around AP, who was handcuffed with his arms behind his back. AP was rambling, talking, and yelling incoherently about Jesus. AP was naked and laying on his left side/stomach on the ground. PW3 stated that he saw blood on the bricks by the riverbank but AP was not near them when he arrived. PW3 stated that he assessed AP. PW3 noted that AP had a bleeding laceration to the back of the head. PW3 stated that when AP started getting excited, paramedics gave him some medications via an intra muscular needle to calm him down. As paramedics were preparing to move AP from the river walk, someone noted that AP had stopped breathing and had no heart rate. CPR compressions were commenced for approximately two minutes, when AP's heart rate came back and got a pulse he was transported to SBH.

**PW4** stated that he and his crew were dispatched in respect to a call concerning a male exhibiting excited delirium. Upon arrival at the intersection of Kennedy Street and Assiniboine Avenue, PW4 stated that he heard somebody yelling from the riverbank. PW4 stated that as he went down stairs to the river walk, there were six police officers present. PW4 stated that he was



escorted to a male, later identified as AP, who was naked and laying on the walkway. AP appeared unconscious and PW4 could not recall if he was handcuffed on his arrival. PW4 stated that as he checked AP's vitals. AP was checked for a head injury and PW4 stated that he saw a pool of blood on the rocks that lined the walkway approximately 4 – 5 feet away. As AP began to wake, he started to ramp up and was yelling. AP was given a sedative to calm him down. As AP was readied to be taken up by stretcher, it was noted that he was not breathing and had no pulse. Paramedics were able to restore AP's pulse and loaded him into the ambulance.

**PW5** stated that he and his crew were dispatched to a call of a person yelling on the river walk, near Kennedy Street and Assiniboine Avenue, and a possible excited delirium. On arrival, he observed six or seven WPS cruisers parked. PW5 stated he heard a male, later identified as AP, yelling from the walkway. When PW5 made his way down to the river walk, he saw six WPS officers in a semi circle around AP, who was naked and laying on the ground approximately 30 feet to the east of the stairs. AP's vitals were assessed and it was noted that he had a bleeding laceration on the back of his head. AP was given medication to calm him down. He was placed onto a tarp for transport to a stretcher, when his pulse was checked. AP had no pulse, so paramedics performed CPR and got his pulse back within 3 minutes. AP was rushed up the stairs and into the back of the ambulance, where he was transported to SBH.

### **Witness Officers:**

**WO1** is a Flight Operations Officer with Air1, the WPS helicopter. On the night in question, Air1 was assigned to a well-being call regarding a male in distress and yelling. WO1 stated that at 12:59 a.m., he began recording with the helicopter video system in the area of Kennedy Street and Assiniboine Avenue. Their video system records the infrared (IR) light which is the black and white differences according to the amount of heat radiated from the objects. IR does not have the capability to look through objects but only differentiates heat differences; therefore, objects such as trees can obstruct the camera's view. WO1 stated that WPS cruiser cars arrived on scene and parked in the parking lot while AIR1 was arriving on scene. Upon their first orbit around the trees, WO1 noticed an individual person lying down on the river walk, just east of the staircase by the parking lot. His feet were pointing toward the Assiniboine River and his head was resting on a curbed or concrete area along the path. WO1 stated that he voiced to the ground crew on two separate occasions to get their attention of the location of this individual. The ground unit officers then voiced that they found the individual, a male later identified as AP. WO1 stated that he activated the AIR1 spotlight down to the area to provide light. WO1 stated that AIR1 continued orbiting, while the ground units voiced and requested WFPS to attend. There did not appear to be any threats to AP, the police officers, or the public. There were no further requests by WPS officers to AIR1. Accordingly, WO1 stated that he stopped recording then focused his attention and efforts to other areas of the City. At 1:10 a.m., WO1 heard a radio broadcast that AP was unconscious and a rush request was made for an ambulance and paramedics. WO1 stated that AIR1 returned to the area and started recording the area at 1:12 a.m. and, once again, activating the spotlight. AIR1 continued to orbit the area for another five minutes and when no other concerns or requests were made of AIR1, at 1:17 a.m., WO1 cleared the area.

**WO2** was partnered with WO3 when they responded to a dispatch request to assist in a call for service at the river walk near Kennedy Street and Assiniboine Avenue. On arrival, WO2 states they walked down to the river walk. There were four to six WPS officers already present and

standing around a naked male, later identified as AP, lying on his back on the river walk. AP's head was pointing to the north with his feet toward the river. WO2 states that AP was yelling "*gibberish talk*" and talking about God. When AP got up and tried to walk away, WO2 believes that four WPS officers grabbed him for his safety, fearing he might walk into the river. WO2 states that the WPS officers were having a hard time getting AP back onto the ground. Once AP was back to the ground, he was handcuffed and turned face down. WO2 stated that AP appeared to be having a difficult time breathing. AP was rolled onto his back and one of the WPS officers started chest compressions. Paramedics arrived and took over treatment of AP. When AP's pulse returned and his breathing was all right, AP was moved up the stairs, into an ambulance and then left for SBH.

**WO3** was working with WO2 and on routine patrol, when they were requested to assist with a male who appeared in medical distress on the river walk near the intersection of Kennedy Street and Assiniboine Avenue. WO3 stated that they arrived at the scene at 1:01 a.m. WO3 stated that when she got out of her vehicle, she heard a male, later identified as AP, yelling, "*God loves you.*" When WO3 arrived at the river walk, she saw at least two to four police officers already present. AP was naked and lying on his back, across the river walk. AP was clenching his fists while repeatedly saying, "*God loves you.*" An officer advised that paramedics were requested. WO3 stated that she was also advised it appeared that AP might have struck the back of his head, as he was bleeding and lying on a rock ledge. As officers attempted to converse with AP, he continued to repeat and shout, "*God loves you*" and other nonsensical phrases. WO3 stated that AP stood up and ran towards the river. Officers then surrounded him and gained control. WO3 stated that she stood to the side between the officers and the river and drew her CEW. WO3 stated that she was preparing to fire her CEW at AP in the event he eluded the other officers and ran towards the river. WO3 stated that she was the only barrier between AP and the water. Fortunately, officers were able to restrain AP and she re-holstered her CEW. AP was lying back on the ground again, kicking and screaming that same phrase, "*God loves you*". AP was handcuffed, with his hands behind his back, and calmed down. As officers waited for an ambulance to arrive, AP started gasping for air and appeared to go unconscious. AP was rolled onto his back and chest compressions were commenced. A short time later, AP became conscious again. The paramedics arrived and took over patient care, transporting AP to the ambulance and then left. WO3 stated that she was not aware of the medical treatment paramedics completed at the scene.

**WO4** was the driver and WO5 was the passenger in a marked WPS cruiser when dispatch voiced over the radio about a screaming male by the river. When they arrived on scene and were at the top of the stairs at the end of Kennedy Street, WO4 stated that he heard a male, later identified as AP, yelling and screaming at the river walk. WO4 states that four to six officers went down the stairs and then to AP, who was naked and lying down, crossways, on the river walk, approximately 40 feet east of the stairs. AP's head was pointing toward the riverbank and resting against a stone ledge or rough limestone along the river walk. AP was screaming out nonsensical references about God. WO4 stated that AP required immediate medical assistance as it appeared he was going through a drug psychosis. They waited for an ambulance to arrive. WO4 stated that he saw a pipe (believed to be used to smoke crack or meth) approximately 8 feet away. AP stood up, muttered more nonsense and then appeared to rush towards the river. WO4 stated that a group of officers surrounded AP to prevent him from going

into the river. A few officers grabbed AP by his arms and tried to take him down. AP was forcefully opposing the officers and he was very difficult to control. WO4 stated that AP was displaying super-strength, common with people displaying excited delirium. Two officers grabbed an arm while other officers tried to do a leg sweep (a trip motion) in order to take him to the ground and gain control of him. AP was taken face down to the ground onto his chest. While they waited for the ambulance to arrive, AP stopped kicking, thrashing and screaming as his breathing became shallow. AP was rolled onto his back as an officer commenced chest compressions. AP started to rally back. AP was conscious and breathing and then started yelling and getting excited again. Paramedics arrived and dealt with him. AP's condition started to decline again and he was rushed into the ambulance.

**WO5** was partnered with WO4 when they were dispatched to assist WPS officers on a well-being call for an agitated male, yelling nonsense, down by the river. WO5 stated they were on scene within a minute of dispatch. WO5 stated that he heard a male, later identified as AP, yelling and screaming. WO5 stated that when they walked down to the river walk, they found AP, naked, and lying down on the river walk, east of the stairs, with his head pointing to the north. AP's head was on the ground and against a 3" - 4" high limestone curb. AP did not respond when officers identified themselves as police but kept ranting and raving and talking about God. AP's fists were clenched and were held down along both sides of him. WO5 stated that he saw some blood on the limestone curb above AP's head and the hair on the back of his head was wet with blood. WO5 stated that he assumed AP struck the back of his head on the limestone curb. WO5 stated that officers were circled around AP on the walkway as he continued to lay there, yelling, talking gibberish and banging his fist on the ground. Suddenly, AP stood up and moved towards the river. WO5 stated that he and four to five other officers took hold of AP. WO5 stated that he grabbed AP's left arm. WO5 stated that he tried kicking AP's leg two to three times, behind the left knee, to sweep it out and take him to the ground. WO5 stated that AP was kicking backwards, similar to a horse kick. WPS officers repeatedly told AP to get on the ground. Within seconds, WO5 stated that they took AP to the ground and face down, onto his chest. WO5 stated that he did not see anyone strike AP. WO5 stated that AP started to calm down when someone asked if he was breathing. WO5 stated that AP was flipped onto his back. WO5 stated that he checked AP and when he noted that he was not breathing, he started CPR, applying four to six chest compressions to AP. WO5 stated that AP immediately responded and he was placed in a recovery position. WFPS were advised by WPS officers that AP needed to go to the hospital. WFPS personnel assessed AP and gave him a needle to calm him down. AP was taken to the ambulance and then transported to hospital. WO5 stated that he did not see WFPS personnel use a defibrillator or perform CPR.

**WO6** was an acting patrol sergeant and attended the incident. WO6 stated that a call for service was received at 12:35 a.m. with WPS units dispatched at 12:57 a.m. According to the call for service, a naked male, down by the riverbank, was reportedly yelling that people were trying to get him. This male also appeared confused. WO6 stated that based on this information and his own experience, he believed this matter "*sounded like a call of excited delirium*". As he drove to the scene, WO6 stated that he radioed for an Advanced Care Paramedic to attend. WO6 stated that he arrived at the scene at 1:01 a.m. parking his WPS cruiser at the south end of Kennedy Street, south of Assiniboine Avenue. There were several other cruiser cars already on scene and Air1 was in the air. On exiting his cruiser, WO6 stated that he heard a male, later



identified as AP, yelling by the river. He could not understand what AP was saying. WO6 made his way down stairs to the river walk. WO6 stated that just to the east of the stairs, he observed AP, who was nude and lying face up across the pathway with his head against a barrier or edging. There was a small amount of blood on the back of AP's head and on the curb. AP was conscious, breathing and yelling nonsensical things about God and Jesus. AP did not respond to any of the WPS officers' questions. WO6 stated that he was advised that this was the position officers found AP and he had not been moved. WO6 stated that based on his observations of AP (being nude outdoors in cold temperatures, speaking rapidly and nonsensically and not alerted to officers' questions), he concluded that AP was under the influence of a drug or drugs. Several radio requests for an ambulance to attend were made to dispatch. WO6 stated that AP became agitated, stood up and walked towards the river. Several WPS officers, including WO6, told him to stop. WO6 stated that officers physically prevented AP from walking into the river. As WPS officers took hold of AP, he tensed up his body and started thrashing about. WO6 stated that officers took AP to the ground. AP was controlled for his and for officer safety. While AP was on the ground, he continued kicking and thrashing. WO6 stated that he went to a police cruiser and retrieved a spit sock, a Ripp Hobble™<sup>2</sup>, a pair of shackles and a blanket. When he returned, WO6 stated that he was advised that AP was having medical issues and struggling to breathe. WO6 stated that he observed an officer perform CPR chest compressions on AP. AP responded and the officer stopped the chest compressions. WO6 stated that shortly afterwards, AP started to kick and thrash about again, so he placed the Ripp Hobble™ around AP's ankles to prevent him from harming himself or WPS officers. An ambulance arrived on scene and took over the medical care of AP. WO6 stated that he was advised that given AP's unstable condition, he would be transported to the hospital. WO6 stated that other than restraining AP from walking into the river, no WPS officer, in his presence, punched, kicked or struck him.

WO7 was partnered with WO8, when they were dispatched to a call regarding a male yelling on the riverbank near Kennedy Street and Assiniboine Avenue. WO7 stated that on arrival, he heard the sound of a male yelling and immediately believed it to be part of a drug-induced psychosis. As a result, WO7 stated that he immediately radioed for backup, advising that the call was a "*possible excited delirium*". WO7 stated that they made their way down to the river walk and the embankment, where a male, later identified as AP, was observed laying on the river walk and was naked. AP was rambling, incoherently, about God and angels, saying, "*Why did you do this to me*". WO7 stated that he did not observe any injuries at that time. WO7 stated that he asked more officers to attend and assist with AP. Once additional officers arrived on the river walk, WO7 stated that they made their way to AP. AP appeared to be delusional, rambling and would not answer officers' questions. WO7 stated a "*rush request*" for an ambulance was made, as more WPS officers and supervisors began to arrive at the scene. WO7 stated that AP then sprung up from the ground. WO7 stated that officers were able to take control of AP, without resorting to any intervention tools or weapons such as CEWs. WO7 stated that it was his opinion that AP's condition was related to a form of drug psychosis. AP was extremely strong but there was enough police officers there to control him. AP was placed on the ground to keep him safe until the ambulance arrived. However, it became evident that AP's breathing may have stopped and

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<sup>2</sup> A Ripp Hobble™ is an effective and safe device used to limit subject movement, primarily hand and feet, of potentially unruly prisoners during arrest and transport.

WO7 believed that a female WPS officer performed chest compressions on AP. AP started breathing again and they continued waiting for the ambulance to arrive.

**WO8** stated that he and WO7 were dispatched to a well-being call regarding a male yelling and screaming by the riverbank at Kennedy Street and Assiniboine Avenue. Upon arrival, WO8 stated that a male, later identified as AP, was laying on his back on the river walk. His feet were facing the river and he was completely naked. AP did not respond to the police officers' questions. A small amount of blood was seen at the base of AP's head. WO8 stated that in his opinion, AP appeared to be suffering from possible excited delirium, most likely induced by methamphetamine. WO8 stated that AP suddenly jumped to his feet and assumed a fighting stance. AP continued to yell and started to head directly to the river. WO8 stated that other police officers on scene took hold of AP, brought him to the ground and handcuffed him. While on the ground, AP appeared to relax and then lost consciousness. WO8 stated that he believed that chest compressions were performed by WO5. AP regained consciousness and was placed in the recovery position, on his left side.

### **WFPS Medical Records**

IIU investigators received and reviewed WFPS medical records relating to AP from this matter, which included:

- incident details
- patient care report

This a summary of the WFPS Medical Records:

- Male walking on river walk sounding agitated far south down path, excited delirium. Trauma, minor soft tissue injury. Mental health, Violent/agitated/bizarre behavior
- Naked male yelling at a/l, seems confused, yelling about ppl trying to get him. Not carrying anything, no injns seen...compl is across river in apartment building.
- in case its excited delirium req paramedics
- WFPS dispatched 01:03:19 a.m.; at scene 01:12:57
- Winnipeg Fire Department (WFD) at patient side: 01:12:59
- Winnipeg Emergency Medical Services at patient side: 01:17:00
- Medical Supervisor at patient side: 01:18:00
- To destination (St. Boniface Hospital) 01:51:00
- At destination 01:56:00
- Triage 02:05:00 and transfer of care 02:06:00
- WFD completing initial assessment. Patient in handcuffs behind back, yelling, thrashing, not answering questions. Patient noted to have three lacerations to occiput (back of head), approximately 8 cm each, bleeding controlled with pad. WPS report patient hit head on limestone edge nearby. Patient lying on left side. NRB administering blow-by oxygen.
- Strong radial pulses, SPO2 96%, BGL 8.2, RR 24, GCS14. EMS administered 2.0 mg Midazolam IM (intramuscular) and 5.0 mg Haloperidol IM per agitated patient protocol. Patient calmed immediately then moved to mega mover to carry from river up stairs to stretcher. Patient noted to be agonal during logroll, moved to backboard and

handcuffs removed. OPA inserted, BVM ventilations initiated. Pulse assessed at carotid and noted to be absent, CPR initiated (PEA at 35). After 1 round (2 min) of CPR, ROSC achieved. Heart rate (HR) 50 and increasing. Patient then carried on backboard up stairs to EMS stretcher.

- Patient Intubated, IV initiated
- Transport to St. Boniface Hospital
- Patient's heart rate and blood pressure increasing during transport
- CVS: radial pulses initially strong, patient suffered respiratory arrest progressing to cardiac arrest

### **SBH Medical Records:**

IIU investigators received and reviewed SBH medical records relating to the treatment of AP from this matter.

This a summary of the key facts of the SBH Medical Records:

- blood samples were drawn on 2019-09-23 0205 hrs
- large lacerations on back of head
- no evidence of intracranial hemorrhage
- sinusitis<sup>3</sup>
- no cervical spine fracture or dislocation is identified
- pg 12 of 261: Urine specimen positive presumptive test was abnormally high for Amphetamines and Benzodiazepines
- pg 30 of 261, MRI brain uninfused: The findings are consistent with cytotoxic edema<sup>4</sup> in these locations would be consistent with a global hypoxic ischemic brain injury<sup>5</sup>.
- pg 50 of 261, Vital Signs: patient shaking not sure if coughing and waking up or seizing...im. 2mg midaz given IVP.
- pg 129 of 261, Reason for Visit: Unknown male found by the river acting bizarre. Police called. Patient was hand cuffed, acting bizarre and EMS was called. On arrival patient agitated. Given 5 mg Haldol and 2mg midaz went to resp arrest and PEA arrest. 1 round of CPR. pulse back. patient had 3 large occipital. Drug paraphilia found by the police. Lacerations. direct to RR2.
- pg 130 of 261, CTAS Triage: Unknown male, has C-collar and on spinal board. Pt was found by riverbank (near Legislature) tearing his clothes off, with a bag full of bibles, erratic behavior, yelling. Police arrived and needed to handcuff pt to contain him. EMS arrived and pt agitated/ delirious, GCS 14. Gave 5mg IM haldol and 2mg IM versed. 30 after that, pt developed respiratory arrest. Then developed PEA. 2 minutes of CPR with BVM and ROSC achieved. Intubated by EMS. Has 3 large lacs to occiput. To RR2.

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<sup>3</sup> Sinusitis is an inflammation or swelling of the tissue lining the sinuses.

<sup>4</sup> Cerebral edema is excess accumulation of fluid in the intracellular or extracellular spaces of the brain. This typically causes impaired nerve function, increased pressure within the skull, and can eventually lead to direct compression of brain tissue and blood vessels.

<sup>5</sup> Hypoxic ischaemic brain injury is common and usually due to cardiac arrest or profound hypotension. The clinical pattern and outcome depend on the severity of the initial insult, the effectiveness of immediate resuscitation and transfer, and the post-resuscitation management on the intensive care unit. Overall, the prognosis is extremely poor and only a quarter of patients survive to hospital discharge, and often even then with severe neurological or cognitive deficits.

- pg 131 of 261, Assessment Emergency Prescriber: HPI: Patient presents to the emergency department after respiratory/cardiac arrest. Police called to an area near the River walk Addison point Kennedy. Patient was found naked lying on the ground and screaming by police noted to have bleeding from his head. He was praying to Jesus apparently and had a bible. According to police, he was lying on the ground for approximately 10 minutes, all the while not making sense but talking, when he suddenly jumped up and started screaming. He was wrestled to the ground and handcuffed? on stomach face down. That is when EMS was called. He was given IM Haldol and midazolam. Approximate 30 seconds after the IM injection the patient stopped breathing and deteriorated to cardiac arrest. He had 1 cycle of CPR and then return of spontaneous circulation. No shocks, arrives to the emergency department intubated and ventilated.
- pg 158 of 261, Progress Note-General-ICMS Attending... Will not recover from this event. Recommended extubation and focus on comfort and dignity... however, that given his current state would not prolong extubation beyond what was reasonable (24-48hrs).
- pg 162 of 261, As documented in flow sheet, patient passed away on the night shift
- pg 167 of 261, Notification of Death, 2019-09-30 0558 hrs,

### Autopsy Report

Manitoba's Chief Medical Examiner (CME) at SBH performed the autopsy of AP on October 2, 2019. At this time, CME stated that there is no apparent cause of death, pending further examination. CME advised that the pre-admission blood taken from AP on September 23 was not preserved by the hospital<sup>6</sup>; therefore, the only toxicology analysis available is what is found in the medical records. SBH's decision to dispose AP's blood samples following seven days of retention prevented an analysis that may have been conclusive as to the presence and types of drugs in AP's system at the time of the encounter at the river walk.

CME also stated that the laceration at the back of AP's head is consistent with a fall but this injury did not contribute to his death.

It was not until February 16, 2021, that IIU received a copy of the autopsy report from the CME, in which it was reported that the cause of death is **anoxic brain injury due to complications of cardiac arrest and due to probably excited delirium** (my emphasis). Other significant conditions contributing to AP's death, but not casually related to the immediate cause was psychological stress of struggle and restraint by police.

The CME also made the following comment in the autopsy report:

*“The behaviour of the decedent as well as the course of events during and following his arrest are consistent with a diagnosis of excited delirium. This potentially fatal disorder is typically caused by abuse of stimulant drugs (particularly cocaine and methamphetamine) as well as underlying psychiatric illness with psychotic features. The decedent in this case had no reported history of psychiatric illness prior to this event.*

*Unfortunately, the initial blood samples taken upon his arrival at hospital were no longer available for toxicological analysis; the earliest sample that remained were collected*

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<sup>6</sup> SBH confirmed that blood samples taken from AP on his admission to hospital on September 23, 2019 were disposed of after held for seven days

*three days after his admission to hospital. Therefore, meaningful toxicological analysis could not be conducted in this case.”*

### **Toxicology Report Findings:**

On April 27, 2021, IIU investigators received a toxicology report related to AP (noting the deficiencies as identified by the CME) based on available samples and materials.

The following specimens were screened:

#### Peripheral blood (fluoride preservative) (4 mL):

Ethanol, methanol, isopropanol, and acetone (0 mg/dL). All were at normal levels.

#### Peripheral blood (9 mL):

##### Qualitative drug screen detected:

- Hydromorphone (19 ng/ml) therapeutic levels
- diazepam (detected, not confirmed)
- diazepam metabolite (nordiazepam): (24 ng/ml) therapeutic levels
- Screening for carfentanil, norcarfentanil, furanyl fentanyl and U47700 was negative.
- Diazepam and Nordiazepam results are below limit of quantitation 100 ng/mL

#### Vitreous right 1 ml:

Ethanol, methanol, isopropanol, and acetone (0 mg/dL). All were at normal levels.

(Of note: tube containing vitreous left broke during processing)

### **Conclusion**

This investigation must consider whether the actions of any police officer caused, or in any way contributed to the death of AP.

Based on the various witness accounts, the available video footage, audio transmissions and medical information, the following determinations can be made:

- At all material times, all WPS officers were in the lawful execution of their duties;
- AP was displaying aberrant and bizarre behaviour on the river walk that came to the attention of various onlookers;
- AP was alone and ultimately fell backwards, striking his head on a limestone or concrete curb on the river walk;
- WPS officers attended to the river walk and came upon a naked AP laying on the ground;
- It was apparent to all witnesses that AP was under the influence of a drug or drugs, was in the midst of a drug-induced episode, was in physical distress and required immediate medical attention;



- WPS officers took all necessary steps to call for paramedics and an ambulance to attend and treat AP forthwith;
- AP attempted to flee the area and potential enter the river. WPS officers took the necessary and reasonable steps to prevent AP from entering the river and took control of him to ensure his and all officer safety until medical treatment could be administered;
- AP went into medical distress when he stopped breathing and had no pulse. WPS officers provided immediate attention and life saving treatment to assist AP. They were successful;
- AP was taken to hospital but his prognosis was not positive;
- AP displayed all the usual signs of excited delirium;
- The cause of death was noted as *Anoxic Brain Injury due to complications of cardiac arrest and due to probably excited delirium.* (my emphasis) None of these factors arose from actions or inactions by WPS officers.

AP encountered WPS officers in the early morning hours of September 23, 2019. Following the initial contact between police and AP, there was a physical involvement between them resulting in AP taken to the ground, handcuffed and detained. WPS officers confirm that medical treatment and an ambulance were requested over concerns of the well-being of AP. AP went into medical distress resulting in a WPS officer performing CPR to revive him. AP was taken to hospital by ambulance and was described as being in unstable condition. AP was admitted to hospital following his arrival remaining there until his death on September 30, 2019.

In conclusion, there is no evidence to support a finding that there is any level of contribution by any WPS police officer as to the cause of AP's death. Accordingly, there is no evidence in this matter that would justify the designation of any of police officer as a subject officer. As a result, there is no further requirement or need by IIU to continue with this investigation.

The IIU investigation is complete and this file is closed.

**Final report prepared by:**

Zane Tessler, civilian director  
Independent Investigation Unit  
May 14, 2021

*Ref 2019-054*