

# IN THE MATTER OF AN INVESTIGATION INTO A SERIOUS INJURY DURING AN INCIDENT ON OCTOBER 23, 2023

# FINAL REPORT OF THE CIVILIAN DIRECTOR OF THE INDEPENDENT INVESTIGATION UNIT

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# **Introduction**

On October 23, 2023, the Winnipeg Police Service (WPS) notified the Independent Investigation Unit of Manitoba (IIU) of an incident.

The written notification was received on October 24, 2023, and disclosed the following information:

"On October 23, 23 at 9:50 a.m. Winnipeg Police Service received an emergency call to assist Winnipeg Fire Paramedic Service at \* Arlington Street. Information received the Winnipeg Fire Paramedic Service attended to this location for a female experiencing a medical event. On their arrival they encountered the AP (AP), a 37-year-old female patient that was exhibiting erratic behaviour becoming combative with those attending crews and had armed herself with a piece of broken glass. The attending medical crew began struggling with the (AP) and requested the assistance of the Winnipeg Police Service on a rush to assist them as they determined the administration of chemical sedation was required.

Winnipeg Police Division 11 General Patrol units were dispatched to assist the attending medical crew, upon arriving on scene General Patrol members found members of the Winnipeg Fire Paramedic Service in a physical struggle with the (AP) in a bedroom within the noted suite.

Winnipeg Police members assisted in physically restraining the AP to assist with the administration of the chemical sedation, a spit-sock and handcuffs were utilized to restrain the (AP), as the (AP) continued to struggle and spit at responders.

Almost immediately after the administration of the chemical sedation was given the AP experienced a medical event which required her to be conveyed to hospital immediately. She was conveyed by the Winnipeg Fire Paramedic Service to the Health Sciences Centre (HSC) in critical condition where she remains at the time of writing.

It should be noted that drug paraphernalia was located in the bedroom of the suite where this incident occurred. Family also advises that the (AP) has a number of ongoing medical issues."

At the time of the notification, the matter concerned a serious injury as defined under the IIU regulations. The IIU assumed responsibility for this investigation in accordance with Section 66(4) of The Police Services Act (PSA), and IIU investigators were assigned to this investigation.

IIU investigators obtained the following information from the WPS, among other items:

- 911 audio recordings
- Police dispatch audio recordings
- Officer narrative reports
- Officer notes
- Computer automated dispatch (CAD) recordings
- WPS Forensic Identification Report



Due to a dearth of information at the outset about whether any police officers were directly or indirectly involved in the cause of the AP's serious injury, the civilian director did not designate a subject officer (SO). This decision was later re-evaluated, and no subject officers were ever designated.

Three police officers were designated as witness officers (WO) and interviewed.

# **Facts and Circumstances**

## **Scene Examination**

The scene was examined by the WPS Forensic Identification Section. The incident occurred inside a private residence on Arlington Street in Winnipeg.

#### **Affected Person**

AP was taken directly to Health Sciences Centre (HSC) Winnipeg on the day of the incident. At one point, she was resuscitated; however, AP remained in a medically induced coma until her death on November 3, 2023.

# **Civilian Witnesses**

#### CW<sub>1</sub>

CW1 is the mother of AP. CW1 was contacted by IIU investigators on several occasions; however, she declined to speak with the IIU, stating that perhaps she would speak when she is ready to do so. To date, CW1 has not contacted the IIU wishing to be interviewed or participate in the investigation.

## CW2

CW2 is the adult son of CW1 and brother to AP. From phone conversations with CW1, investigators have learned that CW2 has a developmental and cognitive impairment. CW1 advised that her son should not be interviewed without her being present and is easily agitated. To date, CW1 has not consented to doing an interview with her son.

# **Professional Witnesses**

## PW<sub>1</sub>

On October 31, 2023, IIU investigators interviewed PW1, the supervisor of the Winnipeg Fire Paramedic Services (WFPS) crew that attended the incident. PW1 advised that they responded to a report of an adult female having multiple seizures. Upon arrival, the female (AP) was extremely unco-operative. She was standing in an upstairs bedroom, extremely agitated and was making unusual sounds that PW1 described as "growling." The female would not respond verbally to them and was in an "altered state." AP was not approachable and was flailing her arms and banging her head into the walls. WFPS communications centre was advised that chemical sedation may be required and requested the presence of the district chief of paramedic operations as well as WPS. PW1 stated that this is standard operating procedure in these cases.



The rescue crew was unable to obtain an assessment of the patient as she was waving her arms about, kicking and exhibiting signs of excited delirium and possible methamphetamine psychosis. They positioned themselves to prevent AP from injuring herself. At this time CW2 became agitated stating that a female firefighter or paramedic should be dealing with his sister. As there was no female available, CW2 began to verbally threaten the firefighters and became assaultive. CW2 eventually went to a back room, and they locked the door to protect themselves and to allow them to work with the patient. PW1 then heard yelling and a loud smash from the room. PW1 activated his emergency button on his radio which alerts the dispatch centre that police are required immediately and that they are in a violent situation. PW1 exited the house through a back door. PW1 observed CW2 in the front yard holding what appeared to be a large piece of glass. PW1 then locked the front door of the house for the safety of his crew.

Shortly after, ambulance and police arrived. WPS dealt with the brother (CW2) in the yard. Paramedics went into the house to deal with AP. PW1 did not witness any interaction between police and AP as he was down the hall dealing with the patient's mother and her 10-year-old son. PW1 believed that AP was provided patient care and chemical sedation. PW1 witnessed AP being placed on a stretcher into the ambulance.

## PW2

On October 31, 2023, IIU investigators interviewed PW2, a firefighter. They were dispatched in response to someone having multiple seizures. They responded as a Priority 1 call with lights and sirens. Upon arrival, CW1 took them to a back bedroom to the patient (AP). She was in distress and was making strange, growling noises, exhibiting erratic body movements and was "banging off the walls." She seemed to be experiencing a medical incident. The adult brother (CW2) was also present. CW1 informed them that AP was a drug user and that she had found a drug pipe on her bed. Rescue personnel tried to assess the patient, but it was impossible to do so as she was flailing about. According to PW2, the patient was hurting herself. PW2 noted that her lip was cut and she was bleeding. AP was not responding to any of their queries. PW2 noted CW2 was agitated and was "ramping up" the situation. They asked the brother to leave the room. They tried to position themselves between the patient and the walls, to keep her from continuing to hurt herself. The brother came back to the area and grabbed one of the firefighters by the shirt and attempted to engage in a fight. They pushed CW2 into a back room and locked the door. Shortly after they heard some banging and saw CW2 in the front yard holding a shard of glass. Their captain (PW1) contacted dispatch requesting police assistance and sedation as well as the attendance of the district chief. WPS were also called in, in accordance with procedures.

The police and the additional paramedics arrived quickly. Police were talking to the brother (who had now dropped the glass). PW2 returned to the room where the patient was and observed two police officers and two firefighters on the ground with the patient, who was lying on her stomach, handcuffed in the back. AP was wearing a spit sock on her head as she had been spitting. At this time, AP seemed more comfortable and was moving less. There was no use of force observed. One police officer was positioned at her head and the other at her feet.

The paramedic supervisor and the paramedics administered chemical sedation to AP and placed her on a "mega mover" tarp and carried her to the stretcher and then into the ambulance. As they



were putting her in the ambulance, PW2 recalled that she went into cardiac arrest. Paramedics started working on her again inside the ambulance. PW2 said he did not witness any type of physical altercation between police and the patient.

## PW3

On October 31, 2023, IIU investigators interviewed PW3, a paramedic. He and his partner received a dispatch call to go to a residence on Arlington Street, requesting chemical sedation for a woman. This was a Priority 1 call. Just prior to arriving, the captain had pressed his emergency button which indicated that there was violence on scene. Upon arrival, they heard a loud smash coming from the house. They then observed a male in the front yard, holding a large shard of glass. PW3 and his partner went back inside the ambulance for their safety. WPS arrived ten to fifteen seconds later and approached the male who had dropped the glass upon their arrival. One of the police officers stayed with the male and the second went into the residence. Shortly after, they were notified that it was safe to enter the house. While the paramedics went inside the residence, PW3 prepared the stretcher outside. PW3 then entered the room where the patient was located. He observed that the female patient lying prone on her stomach with her arms handcuffed behind her back. She was also wearing a spit sock on her head. There were two persons on each side of her and one at her head. PW3 noted that no one was holding her down or applying any force. The patient was screaming and was wiggling somewhat trying to get free.

They were directed to administer chemical sedation. PW3 prepared Haldol (haloperidol), and his partner administered the chemical sedation. Within 10 to 15 seconds, the patient stopped breathing. His partner asked for the handcuffs to be removed. They moved the patient onto a "mega mover" tarp to get her out of the room as they were in tight quarters. At this time, the patient still had a pulse. When they made it to the stretcher outside, the pulse had stopped, and the paramedics started CPR. PW3 also noted that the patient had a dialysis port on her chest; therefore, they began CPR with dialysis protocol. PW3 stated that they worked on the patient for approximately 10 minutes before transporting her to HSC.

PW3 did not witness any physical confrontation or struggle between WPS officers and AP.

#### PW4

On November 2, 2023, IIU investigators interviewed PW4, a WFPS firefighter. PW4's statement is consistent with the other firefighters/paramedics interviewed. He stated that at no time was there any force used on AP by WPS. She was handcuffed and a spit sock was applied with the assistance of a firefighter. AP was on the ground by her own accord and was thrashing about. She was not taken to the ground by the police or the firefighters. The firefighters tried to keep AP from hurting herself throughout the incident. She was repeatedly banging her head against the walls and floors and flailing her arms and legs. She was not responding to any attempts to communicate with her and would only growl and scream. CW1 had found evidence of drug use, namely a drug pipe with residue which was still hot. When the patient went unresponsive, the handcuffs and spit sock were immediately removed at the paramedic's request.



# **Witness Officers**

#### WO1

On December 20, 2023, IIU investigators interviewed WO1. He and his partner, WO2, arrived at the address at approximately 9:54 a.m. Upon arrival, WO1 observed a male being pushed out the front door of the residence and the door being closed by firefighters. The male was left standing in the front yard and appeared to be holding a large shard of glass in his hand. WO1 went directly towards the male who immediately dropped the piece of glass. The male told WO1 that he had been upset that it was an all-male firefighter crew, and he wanted a female to deal with his sister. The male told WO1 that his sister suffers from seizures. The male advised WO1 that a mirror had broken and took WO1 around the back of the house where WO1 observed a full-length mirror had been shattered. The male subject was co-operative and calm.

When WO1 went back to the front yard, a firefighter advised that the female had gone into cardiac arrest. The female was placed in the back of the ambulance and WO1 briefly went to the ambulance to obtain identification for the female. WO1 did not speak to AP or have any interaction with her. WO1 did not go inside the residence and did not speak to anyone else at the residence other than the male in the front yard. WO1 spoke with WO2 who told him that he had assisted firefighters by handcuffing the female. The female was then chemically sedated and almost immediately went into cardiac arrest.

#### WO<sub>2</sub>

On December 31, 2023, IIU investigators interviewed WO2. At 9:52 a.m., he and WO1 received a call from dispatch to attend to a medical call. The request was for assistance from WFPS, for chemical sedation for an unco-operative patient. Upon arrival, they observed a WFPS fire truck and an ambulance parked outside. They observed a male subject (later identified as CW2) standing shirtless in the front yard, holding a piece of glass. WO2 initially thought that this individual was the reason for the call. WO2's partner, WO1, approached the male and asked him to drop the glass, which he immediately did. Once WO2 was sure the situation with the male was under control, he proceeded into the house. He heard screaming coming from a bedroom. He entered the bedroom and observed a firefighter kneeling and holding the left arm of a female subject (AP). AP was also in a kneeling position. It appeared to WO2 that AP was in some type of medical distress; she was screaming and thrashing her body around. WO2 immediately grabbed AP's right arm and handcuffed her behind her back for her safety and to keep her from hurting herself. WO2 and the firefighter gently lowered AP to the ground onto her stomach. WO2 assumed a shin pin position on the back of her legs to keep her from thrashing. WO2 voiced for additional help from unit D106 as he was the only police officer in the room. The firefighter warned him that AP had been spitting up blood and was actively moving her head from side to side. The firefighter asked him for a spit sock, and WO2 assisted him to put it on her head. At this time, WO2 noticed WO3 had entered the room and was helping to hold down AP's legs. AP was still screaming and there was some blood on the floor.

At this time, EMS personnel entered the room as the situation was under control. EMS personnel advised that they were going to chemically sedate AP. They cut her sweatpants and administered the injection. WO2 stated that almost immediately after the injection was administered, AP's



body went limp and she stopped moving. WO2 looked to see if she was breathing and noted that her back was not moving at all. The firefighter checked for a pulse but there was no pulse. WO2 immediately got off AP (shin pin), took the handcuffs off and got out of the way to let the medical staff do their work. EMS personnel took the spit sock off.

EMS personnel and the firefighters put AP on some sort of blanket or tarp with handles and they rushed her out of the house. WO2 went to speak to the AP's mother CW1. She stated that her daughter was known to use drugs. CW1 stated that she had "heard a thump" coming from AP's bedroom. She went to check on her and saw her on the floor, thrashing about, and called 911. She also observed a glass pipe on AP's bed which was still hot to the touch. She also stated that AP had been on kidney dialysis for the last 10 years.

WO2 stated there was no communication with the AP. She was screaming throughout the encounter (until loss of consciousness) and there was no intelligible communication between the AP, WO2 or firefighters/EMS personnel. WO2 stated that the only force used was handcuffing and the guiding AP down on to her stomach by WO2 and the firefighter. There was no resistance to handcuffing. There were no strikes or pushing required to get her on to her stomach. There was no usage of intermediate tools.

#### WO<sub>3</sub>

On February 8, 2024, IIU investigators obtained a statement from WO3. He and his partner were dispatched to assist WFPS with a chemical sedation situation. At 9:57 a.m., they arrived and WO3 observed WO1 speaking with a male outside the residence. WO3 heard screaming coming from a bedroom; he entered and observed a number of WFPS personnel standing around a female. She was laying on the floor with her hands handcuffed behind her back. She was small in stature and approximately 110 pounds. She was screaming, agitated and making "animal noises" such as grunts and panting. She was flailing her legs; therefore, WO3 held her legs and shin pinned her legs, to keep her from flailing and hurting herself. WO2 was shin pinning her buttock area as well. One of the firefighters warned them that AP had been spitting. There was blood coming from her mouth and he believed she had bit her tongue. WO3 further recalled that there was some smeared blood on the floor near her head and some on the wall. Someone placed a spit sock on her.

WFPS personnel administered the injection. WO3's focus was on her legs and to control her movements. Within 20 to 30 seconds of the injection being given, AP went limp. WFPS personnel instructed them to roll her on her side and to remove the handcuffs, which they did. WFPS personnel advised that she was not breathing and moved her on to a moving tarp and took her outside to the ambulance. That was the extent of WO3 involvement with AP.

AP's mother advised that AP is a user of street drugs and was also prone to seizures and had epilepsy. She had called 911 earlier as she believed AP was having a seizure. She had also found a glass pipe (for drug use) on her bed.



# **Medical Evidence**

IIU investigators were unable to obtain a consent from AP's mother to obtain medial records. IIU investigators spoke with the Intensive Care Unit (ICU) physician at HSC who advised that AP died on November 3, 2023.

On November 10, 2023, the medical examiner investigator (MEI) advised that the autopsy of AP found that there was mild physical trauma (bruising and some minor cuts). MEI stated that this did not contribute to the cause of death. There was evidence of cigarette smoking in the lungs. AP also had damage to her kidneys, but this was already known due to the fact she was on regular dialysis treatments. There was also evidence of a previous surgery that AP had had to her stomach. No cause of death has yet been attributed. Toxicology results have not yet been received. They will be done by HSC, which may take several months, and then a final postmortem report will be completed.

## **Conclusion**

The IIU's mandate is to consider whether AP's serious injury and death may have resulted from the actions of the police officers who attended the scene of the incident. In considering all the circumstances and the evidence obtained in this investigation, I am satisfied that the interaction of the officers did not contribute to the serious injury or death of AP.

This is a tragic set of circumstances where it is believed that AP had consumed drugs causing her to act erratically. There is no evidence of use of force by any of the police officers. Rather, police were called to assist firefighters to provide care to AP. Efforts were made to keep her safe and prevent her from continuing to hurt herself, as she was hitting her head on the floor and walls. Police assisted by handcuffing AP. One officer shin pinned her legs, and one did so on her buttocks. This was to keep her from thrashing and hurting herself. AP had been spitting blood as well and a police officer assisted with putting a spit sock on AP. Shortly after chemical sedation was administered, AP went limp and became unconscious. Both the handcuffs and spit sock were then immediately removed.

Therefore, no charges are recommended against the witness officers, and the IIU investigation is now completed and closed.