



**IN THE MATTER OF THE DEATH OF A MALE  
IN CONNECTION WITH AN INVESTIGATION  
BY MEMBERS OF THE RCMP  
IN THE CITY OF DUNCAN, BRITISH COLUMBIA  
ON DECEMBER 15, 2019**

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

Chief Civilian Director: Ronald J. MacDonald, Q.C.

IIO File Number: 2019-229

Date of Release: July 24, 2020

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## Introduction

On the afternoon of December 14, 2019, RCMP members attended at the residence of the Affected Person ('AP') in response to a report that he had said he was planning to commit suicide. During an approximately half-hour conversation, AP assured the officers that he was not planning suicide, and there was no indication that he should be apprehended under the *Mental Health Act*. The next morning AP was visited by his stepfather and was found sleeping, but later in the day his parents found him in medical distress. Despite the efforts of paramedics, he was subsequently declared deceased. Because of the connection with police actions, 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 two civilian witnesses;
- police Computer-Aided Dispatch ('CAD') and Police Records Information Management Environment ('PRIME') records;
- results of toxicology tests; and
- RCMP *Mental Health Act* policy.

Pursuant to section 17.4 of the Memorandum of Understanding between the IIO and BC Police Agencies, officers who are the subject of an investigation are not compelled to submit their notes, reports and data. In this case, neither Subject Officer provided any evidence to the IIO.

## Narrative

At 2:39 p.m. on December 14, 2019, Duncan RCMP received a 911 call from Civilian Witness 1 ('CW1'). CW1 was calling from Alberta, and told police that she had received messages from AP saying he was going to commit suicide and had been consuming fentanyl. Police were also told that AP often experienced suicidal thoughts, and had previously attempted suicide. CW1 told police, however, that AP would deny suicidal thoughts, as he had done so before.

At 2:51 p.m. that afternoon, Subject Officers 1 and 2 ('SO1' and 'SO2') went to AP's home, and spoke with AP for approximately thirty minutes. According to the PRIME report of that meeting, referred to by an officer involved in investigating AP's subsequent death, AP told the officers that he had no intention to commit suicide and had sent the messages to CW1 to "get a rise out of" her. He is reported to have said also that he was planning to see a counsellor as scheduled, and had upcoming visits from home care workers and from his

parents. AP did acknowledge having consumed fentanyl. The PRIME report indicates that AP was given information about community mental health resources, and that he appeared to be taking care of himself appropriately. After the police visit, CW1 received a message from AP saying he was alright.

The next morning, December 15, 2019, AP's stepfather CW2 visited AP and found him asleep, with no sign of distress. That afternoon at approximately 3:00 p.m., though, CW2 and AP's mother returned to the residence and found AP in medical distress. Paramedics were called, and attempted CPR for twenty minutes without success. Police were called and checked the residence for anything of evidentiary value, but found nothing out of the ordinary.

The BC Coroners Service have confirmed that toxicology testing indicated a concentration of Carfentanil in AP's blood said to be consistent with both lethal and non-lethal outcomes.

## **Legal Issues and Conclusion**

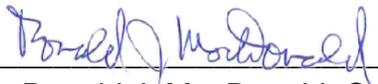
The purpose of any IIO investigation is to determine whether there are reasonable grounds to believe that an officer, through an action or inaction, may have committed any offence in relation to an incident resulting in serious harm or death. More specifically, the issue to be considered in this case is whether there is any evidence that a negligence-based offence may have been committed in the course of the police handling of the matter.

The BC *Mental Health Act* contains a provision authorizing an officer to apprehend a person who appears on objective grounds to be acting in a manner that endangers himself or others and to be suffering from a mental disorder, and to take the person to a physician for examination. On the evidence gathered by IIO investigators in this case, the Subject Officers had information that AP had experienced suicidal ideations, had threatened suicide in texts to CW1 and had attempted suicide in the past.

At the time they spoke with him, though, AP provided a plausible explanation for the texts and apparently showed no signs of mental disorder or distress. In the course of a fairly lengthy conversation, the officers provided him with information about community resources available to him if he felt the need, and understood that he had access to counselling, home care and visits from his parents. The information provided by the PRIME report makes it possible for the IIO to determine that, objectively, there were insufficient grounds to apprehend AP, and that there was nothing more that the officers

could reasonably have done. AP's text to CW1 after the officers had left corroborates their conclusion that at the time he was not in distress or mentally disordered.

At the time this report is being prepared there is still no definitive evidence as to the cause of AP's death, which is a matter within the jurisdiction of the Coroner's Office. The responsibility of the IIO is limited to a consideration of the actions of the involved officers. As explained above, as the 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 therefore the matter will not be referred to Crown counsel for consideration of charges.



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Ronald J. MacDonald, Q.C.  
Chief Civilian Director

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