

SiRT

SERIOUS INCIDENT
RESPONSE TEAM

Summary of Investigation

SiRT File # 2025-0026

Referral from

Halifax Regional Police

February 28, 2025

Erin E. Naus
Director
December 19, 2025

SiRT MANDATE

The Serious Incident Response Team (“SiRT”) has a mandate to investigate all matters that involve death, serious injury, sexual assault, intimate partner violence or other matters in the public interest to be investigated that may have arisen from the actions of a police officer in Nova Scotia and New Brunswick. This mandate encompasses incidents that occur on or off duty, to avoid the real or perceived bias of police investigating police.

At the conclusion of every investigation, the SiRT Director must determine if criminal charges should result from the actions of the police officer. If no charges are warranted the Director will issue a public summary of the investigation which outlines the reasons for that decision, which must include the information set out by regulation. Public summaries are drafted with the goal of adequate information to allow the public to understand the Director’s rationale and conclusions.

Mandate invoked: This investigation was authorized under Section 26I of *Police Act* due to the death of the Affected Party.

Timeline & Delays: SiRT commenced its investigation on February 28, 2025. The investigation concluded on November 19, 2025. There was some delay awaiting the completion of the reports from the Medical Examiner.

Terminology: This summary uses the following language in accordance with regulations made under the *Police Act* and to protect the privacy of those involved:

- “**Affected Party/AP**” means the person who died, was seriously injured or impacted in relation to a serious incident.
- “**Civilian Witness/CW**” means any non-police individual who is a witness to or has material information relating to a serious incident.
- “**Witness Officer/WO**” means any police officer who is a witness to or has material information relating to a serious incident.
- “**Subject Officer/SO**” means a police officer who is the subject of an investigation, or whose actions may have resulted in a serious incident.

Evidence: The decision summarized in this report is based on evidence collected and analyzed during the investigation, including, but not limited to, the following:

1. Police Incident Reports
2. Subject Officer Statement, Notes and Reports
3. Witness Officer Statements, Notes and Reports (9)
4. Civilian Witness Statements (7)
5. Civilian video footage
6. CCTV footage of West Bedford School from the Halifax Regional Centre for Education
7. Medical Examiner Reports
8. Forensic Identification Reports
9. CEW Records
10. EHS Records

INVESTIGATION SUMMARY

Overview

On February 28, 2025, members of the Halifax Regional Police (HRP) responded to multiple 911 calls regarding an adult male who was reported as being high on cocaine and acting out of control. Multiple officers located the male (the Affected Party/AP) near West Bedford School, shoeless and wearing only shorts, despite the temperature being approximately -10^o Celsius. The Subject Officer (SO) requested EHS on his way to the call, as he was familiar with the AP and knew that medical assistance was required in the past to sedate him. EHS was directed to stage for the call.

Officers attempted to speak with the AP and to offer help, but he did not respond. The AP was yelling into his phone and behaving erratically. He proceeded to clench his fists and start walking towards one of the officers, who feared for their safety, the safety of the AP and others on the scene. This officer deployed their Conducted Energy Device (CEW/Taser). It did not make full contact with the AP and was therefore not effective. The AP then started moving much more aggressively towards the officer who had just deployed the CEW. Another officer pulled her out of the way. At this time the SO approached the AP from behind and attempted to place him in a neck hold. Both the SO and AP slipped on ice and fell to the ground, with the AP landing on top of the SO.

Six officers then attempted to restrain the AP, who was resisting and exhibiting extreme strength. A seventh officer arrived and assisted in handcuffing him, and another officer placed flex cuffs

around his ankles. The AP continued to struggle, but eventually his breathing slowed down and when officers checked his pulse there was none. Officers radioed again for EHS multiple times. They began CPR and went to retrieve an AED. Firefighters arrived with an AED and administered care until EHS arrived. The AP was transported to hospital by ambulance, where he was pronounced deceased.

Police Incident Reports

The police incident reports provided by HRP indicate that the SO was dispatched at approximately 10:27 pm on February 28, 2025, in response to a 911 call. A person had called but did not speak. Dispatch returned the call and determined the number belonged to the AP. A male answered and mumbled unintelligible sentences and expletives, said something about a “bad guy” and stated “yeah, yeah, I’m crazy.”.

The AP was known to the SO as being violent and strong from previous calls, so he called for additional officers to respond and for EHS to be dispatched for possible sedation. While officers were on their way to the call, the AP’s mother, Civilian Witness #1 (CW1) called 911. She stated that she was at the West Bedford School with the AP, and that he was high on cocaine and out of control.

Subject Officer

In this file, the officer who took the AP to the ground was identified as the Subject Officer, as this was the clearest use of force SiRT investigators could identify. SiRT became aware early on in the investigation that the CEW did not make contact with the AP, and the other officers applied minimal force when applying handcuffs and ankle restraints.

Subject officers are not required by law to provide their notes or reports, or to provide an interview. In this case, the SO provided his notes and reports and attended an interview with SiRT on April 28, 2025.

On the night in question, the SO was working alone in an area that was in a different policing zone than the call, but when he heard the AP’s name, he advised dispatch he would attend as the AP was known to him. The SO called for more officers to attend and for EHS. He went to the AP’s address, but then heard he was at the West Bedford School with his mother. The SO made his way to the school, where he observed who he believed was the AP’s mother, but could not locate the AP. He drove around the school and eventually could hear the AP. Witness Officers #1 and #2 (WO1 and WO2) located the AP on a curb, and the SO went to that location on foot.

The SO stated he observed the AP on his cell phone, in his underwear with his shorts around his ankles. Witness Officer #3 (WO3) arrived in his police vehicle and shined his lights on the AP before exiting his vehicle. The SO stated that the AP got out of his shorts and continued to yell into the phone. He tried to speak to the AP and to get his attention. The SO and witness officers #1, #2, and #3 were following the AP. The SO stated that the AP eventually seemed to see the SO and WO1. The SO stated that WO1 discharged her taser, but the AP did not react or make any noise, so he realized that it did not hit him.

The SO stated the AP then went at WO1, “going right for her”. He estimated the AP was about 2 feet away from WO1, and with two more steps he would have been on her. WO3 grabbed WO1 by the sleeves as the AP went for her and moved her out of the way. The SO came from behind and placed the AP in a vascular neck constraint. He stated he did not get a proper lock so it was unsuccessful and they both landed on the ground. The SO stated that the attempted restraint was very short, and the AP grabbed on to the SO in a sort of bear hug. The SO was on his back and the AP was on top of him, screaming and making noises. He had blood in his beard and was sweating profusely, despite the cold temperature. The SO could hear someone on the phone telling the AP to calm down.

The SO stated that WO3 came over on his right side, WO1 and WO2 were there, and two other officers, Witness Officers #4 and #5, had arrived. When Witness Officer #6 arrived, the officers were able to handcuff the AP, and they realized he should be shackled at the ankles. The SO stated the AP was a big man and very powerful, and from his previous experience with him, he is difficult to calm down. The SO stated that he felt the AP needed to be arrested to be taken to the hospital for help, not to be arrested criminally. The SO stated he made sure no one was on top of the AP, and WO4 placed zip ties around his ankles. The AP continued to struggle and scream, and the SO tried to talk to him to calm down. He called EHS again to assist. The SO stated the AP suddenly stopped screaming, and he had stopped breathing. The officers began CPR and provided the AP a shot of Narcan.

The SO described the strength of the AP as being able to lift five officers. He stated that the AP’s behaviour was at the highest level and he felt he could have seriously hurt WO1. He thinks the AP was in another state of mind, likely due to drugs.

Witness Officers

WO1 was interviewed by SiRT on March 26, 2025. She was on duty with WO2 on February 28, 2025, and heard the SO call for additional units over the radio. WO1 stated she recognized the AP’s name and was aware multiple officers had been required on a previous call to subdue him.

WO2 was driving, so WO1 relayed updated call notes on the radio to other officers. The 911 call taker could not make out what the AP needed, but his mother called 911 and stated she was at West Bedford school with him and he was a drug user who was out of her car, freaking out. WO1 and WO2 located the AP on a curb, laying on the ground with his phone, mumbling incoherently. His mother stated “he doesn’t seem to know who I am.” The AP got up and started walking away from the officers. WO1 stated the AP was in only his underwear and was making noises. The officers followed and tried to communicate with him, with the SO taking the lead. She stated the SO was very calm with the AP, and he continued to mumble. WO1 stated they were likely taking him into custody under the IPTA (*Involuntary Psychiatric Treatment Act*), as he was clearly in distress and a danger to himself and others. She had unholstered her CEW when the AP got up and started walking away.

The AP then turned toward them. WO1 stated the AP clenched his fists, tensed his body and started walking in her direction. She said it was like he was looking right through her. He got about 4-5 feet away from her. She deployed her taser, but it was ineffective—he did not lock up and kept coming in her direction. WO3 pulled her to the side, and the SO was beside the AP and moved him to the ground, which resulted in the AP laying face down on the SO.

WO1 stated that at some point additional police units arrived. She was on the AP’s right side, and the AP’s hand was gripping the SO’s vest. He appeared to then move his hand toward the SO’s neck. She grabbed his right wrist, and three officers were able to get his right hand behind his back. The AP continued to fight, buck and thrust his hips. WO1 stated he was the strongest person she has ever dealt with. They were eventually able to handcuff the AP and the SO slid out from beneath him. He was kicking, fighting, and making incoherent noises. WO4 retrieved flexicuffs which were put on the AP’s ankles.

WO1 stated the AP was rolled onto his side. He seemed to be calming down and then went quiet. They did sternum rubs and WO2 went to get an AED. The fire department was contacted, and they took over life saving measures until EHS arrived.

WO2 was driving the police vehicle with WO1 as a passenger. WO2 was aware that it took 6 officers and EHS to sedate the AP on a previous call. WO2 stated that when they located the AP, he was on the sidewalk screaming into his phone, super rigid, super worked up, voice super hoarse, screaming at the top of his lungs.

WO2, the SO, and WO1 all tried to talk to the AP and tell him to come talk to them, that they wanted to help him calm down, and he said no, no, no, and then screamed into his phone. WO3 arrived, and they formed a semi-circle around the AP. The AP walked toward WO1 and lunged at her. WO1 was less than ten feet from the AP, and she discharged her taser, but it was not effective. She stated she knew it was ineffective because she heard a crackling sound, which is the sound a taser makes when it does not make contact. She explained they do this every day before their shift to ensure it is working.

WO2 observed WO3 grab WO1 and move her out of the way, while the SO “bear-hugged” the AP and brought him to the ground. They all struggled to get the AP under control, and more officers arrived. Once he was cuffed, he continued to buck and kick. WO2 stated the SO called for EHS and stated they needed sedation. They put him in the recovery position, and he calmed down a bit. His breathing then changed, and she checked for a pulse. They started CPR, and she drove quickly to retrieve an AED from a nearby rink. When she returned firefighters were there with an AED. WO2 stated EHS did not arrive for another ten minutes.

WO3 arrived at the scene and shined his headlights on the AP. His description of the scene aligns with the other witness officers. WO3 observed the AP come toward WO1 aggressively and stated he felt the AP was clearly focused on her for some reason. WO1 deployed a Taser, and he could see that only one prong hit so it was ineffective. WO3 then saw the AP going toward WO1, so he grabbed WO1’s arm and pulled her out of the way. The SO grabbed the AP and they went to the ground. WO3 stated he also slipped on the ice and fell to his knees. He assisted in handcuffing the AP. WO3 stated the SO was clear to the team not to put any weight on the AP, and they had him on his side when things deteriorated. WO3 stated that the AP had numerous cuts on his body, which could have been from going into the woods before they interacted with him. WO3 noted that the AP was sweating and hot to the touch, and the outdated term “excited delirium” was going through his head. WO3 stated his goal was to get the AP to EHS, and he was hoping EHS were closer, but unfortunately, they were not.

WO4 was on a call and heard a 911 call related to the AP. She had not dealt with him previously but was aware police had responded to him several times, and that he was large, strong, usually in a drug psychosis and required a multi officer response. Three members were responding and asking for more, so she responded and told WO6, who was a large and strong officer, to respond. Her account is similar to the facts provided by other witness officers.

When she arrived, WO4 observed the SO, WO1 and WO2 walking near the AP trying to talk to him. She saw the AP walking, and he appeared amped up and angry, screaming and posturing. She was concerned for his safety due to the cold, and in his state, he was a danger to himself and others and needed to be arrested under the IPTA. The AP turned to WO1 screaming, and WO3 told her to tase him. WO4 stated nobody would want to go hands on with the AP as he was large, strong and very agitated. The AP lunged toward WO1, and nothing happened when WO1 discharged her taser. WO4 observed the SO take the AP to the ground. She and other officers ran over, and they were all slipping on the ice. WO4 stated she tried pressing on the AP's hip to secure him, but he lifted her up. The SO said not to put any pressure on his back. WO6 arrived, and she was relieved as he is very strong. With WO6's help they were able to secure handcuffs and flexicuffs.

WO5 was working an overtime shift on February 28, 2025, and responded to the call with WO4. WO5 explained that a second 911 call came from the AP's mother, who advised that the AP's roommate called her when he was damaging their apartment and asked her to come calm him down. She had successfully gotten him in the car but at some point, he got out of the car near West Bedford School. The AP's mother said he was high, that she couldn't control him and he was out of the car. When they arrived, WO5 parked her vehicle to cut off civilian traffic. She ran to help officers who were struggling with the AP on the ground. After a struggle he was handcuffed. WO5 stated his strength was incredible, and she was surprised how hot to the touch he was on a such a cold night. She felt he needed medical attention and to be detained under the IPTA.

WO6 had dealt with the AP three times previously and was aware he was difficult to manage. He noted that two of his own biceps were like one of the AP's, and that he was a big guy. When he arrived on the scene, he observed a number of officers around the AP, including four female officers. He ran from his car and noted that the AP was not handcuffed. There was a taser on the ground, so he kicked it away, grabbed the AP's arm, and assisted in handcuffing him. He was not compliant and continued to kick and buck. They called for EHS to sedate him, and then the AP's breathing changed. WO6 stated the AP was sweating which he thought was odd in the cold weather, and the officers thought he may be overdosing.

Other officers who attended the scene or hospital after the incident were interviewed as part of the investigation, but their statements are not relevant for the purpose of this report.

Civilian Witnesses

Civilian Witness #1 (CW1), the AP's mother, provided helpful background information and was cooperative with the SiRT investigation. SiRT also interviewed the AP's friend, Civilian Witness #2 (CW2) and his roommate, Civilian Witness #3 (CW3).

At approximately 9:00pm, CW3 texted CW2 to advise that the AP was out of control, was yelling and throwing things. His text stated that he was getting violent. He asked that she call the AP's mother, which she did. CW1 then called CW3, who said she had to come get him or he would get evicted. CW1 stated she agreed to go, hoping she could calm the AP down.

CW1 stated that when she arrived, she could tell the AP was very high and agitated. When they got downstairs, he ran into the parking lot wearing only shorts, no other clothes or shoes. CW1 stated he was moaning and eventually got in her backseat. She called 911 as she was concerned he may grab the gearshift. She stated he has never been violent with her. When they got near the school, he jumped out of the moving vehicle, ran up a snowbank and into the woods. He was out of her sight when police arrived, and after about 15 minutes police told her he was in cardiac arrest.

CW2 and CW3 confirmed the series of events described by CW1, and provided other information relating to their interactions and relationships with the AP.

SiRT interviewed other friends and acquaintances of the AP, who provided information about his life and some of his struggles, and interactions with the AP leading up to the incident with police.

The interviews provided information about the AP's history and health information, which were helpful context for the SiRT investigator, but are not relevant to the interaction with police or this report.

EHS

SiRT interviewed three EHS employees who responded to the call for service. EHS was requested by the SO at approximately 10:28 pm, and again at 10:42pm. At 10:44 pm officers were advised over radio that EHS would be another 14 minutes. EHS arrived on scene at 10:58 pm.

Civilian Witnesses #4 and #5 (CW4 and CW5) both stated they were dispatched to a scene in Bedford related to a 911 call, and a patient that may require sedation. They were directed to stage, which they explained means prepare when a call may involve violence, until the police clear them to attend. The call then changed to a cardiac arrest, and they were dispatched directly to the scene.

CW4 stated that when they arrived on scene, police and firefighters were performing CPR. They transported the AP to the ambulance and CPR continued. CW4 stated that the SO was instrumental in assisting with CPR.

CW5 noted that it was very slippery at the scene, and that they were on the scene itself for approximately 20 minutes before departing to the hospital.

Civilian Witness #6 (CW6) was working on his own on February 25, 2025. He was in Dartmouth when he learned there was a cardiac arrest and responded to the call as he had a “Lucas device”, which he explained is an automated chest compression device that is used during cardiac arrest events to reduce fatigue to first responders. When CW6 arrived, the AP was already in an ambulance. They attempted to use the Lucas device, but the AP was too large. He was transported to hospital. The SO went in the ambulance and assisted with lifesaving measures. CW6 noted he did not have a lot to do with the call and was just there to assist the crew.

Video Evidence

SiRT interviewed two neighbours who recounted hearing yelling, cursing, moaning, and things being slammed around from the AP and CW3’s apartment. Both provided videos of the sounds, and one video shows the AP and his mother exiting the apartment building. In the video, the AP is wearing only shorts and walks away from his mother.

Videos from West Bedford School were obtained from three different cameras. Camera #1 shows officers arriving in their vehicles. The AP can be observed walking with officers around him for approximately 7 seconds. The AP appears to be agitated. The officers and the AP move out of the camera range where the incident takes place.

Camera #2 shows the AP and his mother (CW1) arriving at the school. CW1 gets out of her vehicle. The AP is in the backseat, gets out and then back inside the vehicle. He exits the vehicle with his phone in hand and walks toward the front of the school where there is a hill and patch of trees. This video shows the SO arriving on scene and later, an officer meeting with CW1 to provide her an update on the AP. Camera #3 did not provide any relevant footage.

Autopsy Report

An autopsy was performed by the Nova Scotia Medical Examiner Service on March 2, 2025. The toxicology report found the AP had high levels of cocaine in his system. The autopsy report stated that the autopsy did not show a definitive anatomic cause of death. It notes the death was probably caused by some combination of a preexisting heart disease, cocaine intoxication, and the exertion of the altercation. The cause of death was determined to be a “sudden cardiovascular collapse during an altercation”. Other contributing factors were “cocaine intoxication and atherosclerotic coronary artery disease”. The manner of death was determined a homicide. The Medical Examiner noted in his report that: “Homicide is a neutral term and means death at the hands of another person: it does not compose an opinion on culpability.” (*Director’s note: Across Canada, coroners and medical examiners are required to categorize deaths according to what is called the cause of death and the manner of death, both of which are reflected on the death certificate. The “manner of death” means the mode or method of death and can be deemed: natural, homicide, suicide, accident or undetermined. This is not a determination of criminality and does not have the same meaning as criminal or culpable homicide*). The report acknowledges that these situations can be controversial and that a reasonable certifier in his position might find the manner of death as undetermined.

The altercation was considered to be one contributing factor of the AP’s death. However, the autopsy report found that a vascular neck restraint was attempted by an officer, but it did not appear to have been deployed for long or to any effect. It also notes that a Taser was deployed but only one dart contacted the AP. The autopsy report found the police officers did not strike the AP, and that although he was prone for at least a short period, police did not apply pressure to his chest or back during that time or otherwise.

RELEVANT LEGISLATION

Criminal Code:

Protection of persons acting under authority

25 (1) Every one who is required or authorized by law to do anything in the administration or enforcement of the law

- (a) as a private person,
- (b) as a peace officer or public officer,
- (c) in aid of a peace officer or public officer, or
- (d) by virtue of his office,

is, if he acts on reasonable grounds, justified in doing what he is required or authorized to do and in using as much force as is necessary for that purpose.

When not protected

(3) Subject to subsections (4) and (5), a person is not justified for the purposes of subsection (1) in using force that is intended or is likely to cause death or grievous bodily harm unless the person believes on reasonable grounds that it is necessary for the self-preservation of the person or the preservation of any one under that person's protection from death or grievous bodily harm.

When protected

(4) A peace officer, and every person lawfully assisting the peace officer, is justified in using force that is intended or is likely to cause death or grievous bodily harm to a person to be arrested, if

(a) the peace officer is proceeding lawfully to arrest, with or without warrant, the person to be arrested;

(b) the offence for which the person is to be arrested is one for which that person may be arrested without warrant;

(c) the person to be arrested takes flight to avoid arrest;

(d) the peace officer or other person using the force believes on reasonable grounds that the force is necessary for the purpose of protecting the peace officer, the person lawfully assisting the peace officer or any other person from imminent or future death or grievous bodily harm; and

(e) the flight cannot be prevented by reasonable means in a less violent manner.

Excessive force

26 Every one who is authorized by law to use force is criminally responsible for any excess thereof according to the nature and quality of the act that constitutes the excess.

Defence of person - Use of threat of force

34 (1) A person is not guilty of an offence if

(a) They believe on reasonable grounds that force is being used against them or another person or that a threat of force is being made against them or another person;

(b) The act that constitutes the offence is committed for the purpose of defending or protecting themselves or the other person from that use or threat of force; and

(c) The act committed is reasonable in the circumstances.

(2) In determining whether the act committed is reasonable in the circumstances, the court shall consider the relevant circumstances of the person, the other parties and the act, including, but not limited to, the following factors:

(a) the nature of the force or threat;

(b) the extent to which the use of force was imminent and whether there were other means available to respond to the potential use of force;

(c) the person's role in the incident;

- (d) whether any party to the incident used or threatened to use a weapon;
- (e) the size, age, gender and physical capabilities of the parties to the incident;
- (f) the nature, duration and history of any relationship between the parties to the incident, including any prior use or threat of force and the nature of that force or threat;
- (f.1) any history of interaction or communication between the parties to the incident;
- (g) the nature and proportionality of the person's response to the use or threat of force;
- and
- (h) whether the act committed was in response to a use or threat of force that the person knew was lawful.

LEGAL ISSUES & ANALYSIS

I must now assess the evidence to determine whether there are reasonable and probable grounds to believe a criminal offence has been committed.

For Section 25 of the *Criminal Code* to apply, an officer must be required or authorized by law to do anything related to the administration or enforcement of the law. On the date of the incident, the Subject Officer, along with the other officers who attended, had a duty to attend the call to protect the safety of others and the AP. The evidence shows there was clear legal authority to arrest the AP under Section 14 of the Nova Scotia *Involuntary Psychiatric Treatment Act* (commonly referred to as "IPTA"). The IPTA requires police to have reasonable and probable grounds to believe that the person "apparently has a mental disorder" and "will not consent to undergo medical examination." There must be reasonable and probable grounds for police to believe that the person is a threat to themselves or others, is likely to suffer serious physical impairment of serious mental deterioration, or both, or is committing or about to commit a criminal offence. The facts of this situation warranted police action under the IPTA.

Police have a duty to preserve peace, prevent crime and protect life and property. Section 25 of the *Criminal Code* permits a peace officer, acting on reasonable grounds, to use as much force as is necessary to enforce or administer the law, provided that the force used is not excessive based on all the circumstances. The Supreme Court of Canada in *R v Nasogaluak* [2010] 1 S.C.R. 206, at paragraph 35 stated:

Police actions should not be judged against a standard of perfection. It must be remembered that the police engage in dangerous and demanding work and often have to react quickly to emergencies. Their actions should be judged in light of these exigent circumstances. As Anderson J.A. explained in *R. v. Bottrell* (1981), 60 C.C.C. (2d) 211 (B.C.C.A.):

In determining whether the amount of force used by the officer was necessary the jury must have regard to the circumstances as they existed at the time the force was used. They should have been directed that the appellant could not be expected to measure the force used with exactitude.

When police officers use force in the administration or enforcement of the law, their legal constraints are articulated in the *Criminal Code*. The officers must use only as much force as necessary. The force used must consider the circumstances in which the force is used, and it is not required that a person weigh the force used with precision. Police forces have developed tools to assist officers in assessing risks and determining what type of intervention is consistent with the law. HRP follows the National Use of Force Framework. It is not law but developed to help officers properly apply the law. The National Use of Force Framework instructs police officers to assess the situation, subject behaviour, situational and tactical considerations when determining what type of force to use. In the present case, I am satisfied that the situation and the AP's behaviour required police to respond, and it is clear that the decision to use physical force was based on their perception and tactical considerations.

The SO and other officers attempted to reason and communicate with the AP. He did not respond, and advanced toward WO1 aggressively and with his fists clenched. When she unsuccessfully deployed her CEW, the SO used physical force in the form of a neck restraint when the AP continued to advance. Due to the proximity of the AP and WO1 and the AP's behaviour, I find that this use of force by the SO was reasonable in the circumstances. The SO took this step to protect his colleague, himself, and others nearby. The SO and AP fell due to the icy conditions, with the AP landing on top of the SO. Multiple officers stated that the SO reminded them not to put any pressure on the AP's body when restraining and handcuffing him. The autopsy report prepared by the Medical Examiner makes it clear that although the altercation was a contributing factor, the SO's actions in applying a neck constraint did not cause the AP's unfortunate death. I am satisfied that the safeguards afforded in Section 25 of the *Criminal Code* are applicable.

Section 34 of the *Criminal Code* provides a defence for conduct that would otherwise constitute an offence. The conduct can be justified if it was intended to deter a reasonably apprehended threat of force to yourself or another person. In the present case, I must determine if the use of force used by the SO is legally justified. To make that determination, I must assess whether it was reasonable in the circumstances.

The reasonableness of the conduct must be assessed in light of the relevant circumstances, including such considerations as the nature of the force or threat; the extent to which the use of

force was imminent and whether there were other means available to respond to the potential use of force; whether any party to the incident used or threatened to use a weapon; the person's role in the incident; and, the nature and proportionality of the person's response to the use or threat of force.

The SO attempted to use communication to reason with the AP, and when he advanced on WO1, she attempted to use a CEW. Using physical force was a reasonable next step, as the AP was clearly a threat and was not acting rationally. The AP was agitated and multiple officers described him as fixating on WO1. The SO's response was proportionate and logical in the face of the imminent possibility of physical force by a large, strong, male against the female officer. The subsequent use of force by the SO and other officers to restrain the AP was also reasonable, given his actions and continued yelling and fighting.

In the present situation, there is nothing to indicate that the force used by the SO fell outside of the protections afforded by Section 34.

CONCLUSION

I have determined that there are no reasonable grounds to lay a charge against the SO. This was a tragic situation, and SiRT sends its condolences to the family and loved ones of the AP.