SiRT | SERIOUS INCIDENT RESPONSE TEAM

Summary of Investigation

SiRT File # 2025-0097

Referral from

RCMP

August 25, 2025

Erin E. Nauss
Director
January 6, 2026

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 determined to be of a public interest to be investigated that may have arisen from the actions of any 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 serious injuries of the Affected Party.

Timeline & Delays: SiRT commenced its investigation on August 25, 2025. The investigation concluded on December 3, 2025.

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 or was seriously injured 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 Report
2. Affected Party Statement
3. Medical Records of the Affected Party
4. Subject Officer SBOR Report
5. Witness Officer Reports (2)
6. Civilian Witness Statements (3)
7. 911 call recording
8. Police Radio Transmissions
9. EHS Report
10. Body Worn Camera Footage

INVESTIGATION SUMMARY

Introduction

On August 25, 2025, members of the New Minas RCMP responded to a 911 call related to an adult male who had jumped out of a moving vehicle that had been traveling at approximately 70km/hr. EHS responded and assessed the male (the Affected Party/AP). They identified serious head injuries that required urgent medical attention at the hospital. The AP was not cooperative, would not exit the vehicle he was seated in, and refused medical care. As a result, police were contacted to assist as he urgently required medical attention, and he may need to be taken to hospital under the Involuntary Psychiatric Treatment Act (IPTA).

Two officers responded and tried to reason with the AP to attend the hospital, but he refused. He reached for a bag in the vehicle, then stepped out of the vehicle and made a statement that challenged officers to fight. Officers attempted to handcuff the AP, took him to the ground, and a struggle ensued. Officers were eventually able to handcuff the AP, and he was transported to a local hospital and then airlifted to a hospital in Halifax. The AP was diagnosed with a fractured skull, a temporal bone fracture, and other injuries. As a result of the police interaction and the injuries sustained by the AP, SiRT commenced an investigation into the actions of the officer who brought the AP to the ground. At the time of the referral to SiRT, it was unclear how the AP sustained his injuries.

911 Call & Police Reports

One of the AP's colleagues, Civilian Witness #1 (CW1) called 911 to report that the AP had opened the back door of the van they were traveling in and jumped out.

Affected Party

SiRT interviewed the AP on August 28, 2025. He stated that on the day in question, he was not feeling well. He was discussing sensitive personal issues with his colleagues in their work vehicle, and he opened the door while it was still moving and "fell down." He stated that he had told them to stop the vehicle before this happened.

The AP stated that from there everything happened very quickly, and people in uniforms were telling him to get inside the car. He stated that he told them no and that he was good. When asked if he knew who the people in uniforms were, he stated they were paramedics and police. He stated that at the time he was not aware they were police and paramedics, and he did not know them or that he had injuries. The AP stated he lost consciousness at one point, and that he did not recall if he was handcuffed. He stated the "police did not do any police stuff." The AP stated that he had consumed marijuana on the day in question.

The AP consented to the release of his medical records to SiRT, which confirmed that the AP sustained a fractured skull, a temporal bone fracture, and other injuries.

Civilian Witnesses

The RCMP took initial investigative steps and interviewed CW1 on August 26, 2025. CW1 was working with his colleagues doing door to door sales. He was driving the work van, and picked up the AP. The AP was acting normal, chatting, and making jokes. They traveled to a gas station and then returned to the van to drive back to work. CW1 stated that the AP said he was not feeling well and did not want to work. CW1 asked him why, and then the AP stated he was going to jump out. Before CW1 could respond, the AP opened the door and jumped out of the van. He estimates that the van was traveling at about 70 km/hr. CW1 stated they were all shocked. They pulled the van over and he called 911 at 2:56 pm.

CW1 stated that the AP was lying down and was not making a lot of sense. He was bleeding from the face and head. EHS arrived and the AP did not want to go with them and said that nothing had happened. CW1 stated that the RCMP arrived and tried to talk to the AP, but he was arguing with them that he did not want to go. CW1 observed the AP tried to grab something from his bag, and the RCMP put him on the ground and detained him. The RCMP, EHS, and fire personnel put the AP on a stretcher and brought him to the hospital.

Civilian Witness #2 (CW2) was also interviewed by RCMP on August 26, 2025. He was also working with the AP that day. He had been working with him for 2-3 months, and stated the AP was happy-go lucky and often joking. When they got back in the van after a break at a gas station,

CW2 was laughing and making jokes, but then shifted and was not responding. CW2 stated it was almost like he wasn't there. The AP said that he wasn't feeling good and wanted to sit in the van. CW2 said we have to knock on doors, it is our job and asked if he was feeling sick. AP replied that he was not feeling sick, and said, "OK, I'll get out." He then opened the door and lunged out of the van. CW2 stated the AP tumbled 20-30 feet, hitting his head on the ground and rolling over.

CW2 stated that the AP was laying unconscious in the middle of the road, a piece of his scalp was on the ground behind him. When he came to, he said he was good and tried to get back into the van. CW2 stated that when EHS arrived, the AP was resistant to getting in the ambulance and had to be put in handcuffs. At first the AP was sitting in the van. EHS was trying to coax him out, but he was resistant. CW2 stated that police had to pull him out of the vehicle, they went down a slope, put him on his stomach and into handcuffs. CW2 stated that the situation was handled very professionally, and that the AP needed to go into the ambulance, and he was not going to go any other way.

Civilian Witness #3 (CW3) was interviewed by SiRT on September 18, 2025. He is an EHS paramedic and firefighter. On the day of the incident, he was working in his capacity as a firefighter and arrived on the scene at approximately 3:26 pm. His supervisor asked him to speak to the paramedics to see if they required any assistance, due to his expertise as a paramedic. When he approached the vehicle, the RCMP were engaged in a conversation with the AP, trying to get him out of the vehicle. He heard one officer say, "you really need to get out of this vehicle" and the officers extracted the AP from the vehicle. The went down a small embankment. CW3 stated the AP was putting up a valiant effort to fight and was not cooperating or listening to any commands. He stated that the male officer used a leg sweep to bring the AP to the ground. He was impressed with this being done in a controlled manner, as the AP was resisting "with every fibre of his being." CW3 wondered if the head injury caused him to be non-cooperative. CW3 offered assistance to the officers and helped them put the AP in handcuffs. The Witness Officer had hold of the AP's right arm, and he recalled the SO holding the AP's upper neck or head. He helped lift him onto a stretcher and traveled to the hospital in the ambulance. CW3 stated that the police did what was required to get the AP proper medical care. He estimated that it took approximately 60 seconds from the time the AP exited the vehicle to get him under control.

Subject Officer ("SO")

Although not required by law, the Subject Officer (SO) provided his Subject Behaviour Officer Report (SBOR) to SiRT. He did not consent to providing a statement. SiRT obtained body-worn camera footage from the camera worn by the SO, which captured the entire response and interaction with the AP.

The SO's SBOR described the AP's behaviour as abnormal, and that he appeared to be having mental health issues. The report notes that the AP was not rational, even after EHS showed him how bad his injuries were. The report states that the AP needed treatment and appeared to be getting annoyed when being told he needed treatment. At one point the AP got out of the van and stated "Ok, who is first," indicating that he wanted to fight the officers. In the section of the report that asks if the subject was perceived to be a person in crisis, the SO selected "Yes."

The SO wrote that the AP needed treatment and needed to go with EHS or be arrested under the IPTA (*Involuntary Psychiatric Treatment Act*), and that he was given these options. He noted that the AP was seated in a vehicle and tried to close the door on the SO a few times. EHS advised that it would not be safe for the AP to be transported in a police vehicle due to his injuries.

The SO wrote that when they were giving the AP an ultimatum that he go with police or EHS, the AP grabbed his backpack and put his hand inside to grab something. The SO wrote that he immediately grabbed the AP's arm as he feared he was grabbing a weapon. The WO ripped the bag from his hands, and the AP stood up and said, "Who wants to go first." They grabbed his arms and a struggle ensued. The SO noted he had control of the AP's neck. He adjusted his position so as not to choke him and controlled the AP's head. They eventually got him in handcuffs with the assistance of a firefighter.

Witness Officers ("WOs")

SiRT obtained a copy of the Witness Officer's occurrence report. SiRT was able to gather the information needed from this report and Body Worn Camera footage and did not request the Witness Officer attend for an interview.

The WO's report notes that they responded to a call regarding a male who jumped from a moving vehicle. Her report states that EHS were first on scene and they had located a male with substantial head trauma, who was refusing medical attention. She arrived on scene with the SO and identified the AP in the back of a van. He was bleeding from his face, ear, and the back of his head. The WO's report states that there was a large piece of his scalp and hair, approximately 3 inches in diameter, left on the road, and he had multiple contusions on his forehead and were swelling in size while speaking with him.

The WO noted that the AP would agree to attend the hospital with EHS, stand and walk towards the stretcher, then he would stumble and sit back in the van and said he was okay and did not need medical attention. She noticed the AP's eyes shift from side to side and then seemed to be confused and forget the conversation. She wrote that the SO informed the AP he needed medical attention, and he would have to go with EHS or the RCMP.

The WO noted that the AP became agitated and grabbed his backpack and began to open it. She feared something may be in it that could harm himself or someone else. The SO grabbed the AP's right arm, and she grabbed the left arm. The WO noted that she arrested the AP and the SO took him to the ground. They went down an embankment into the ditch. The AP actively resisted, pulling his hands to prevent the handcuffs from going on. They called for back up. The WO's report notes that she was on top attempting to gain control of the AP's left arm, and the SO had control of his head. She was able to get handcuffs on the AP with the assistance of a firefighter and with the SO controlling his head. The WO estimated the physical struggle lasted approximately 30 seconds. The AP required handcuffs in the ambulance and was sedated when they arrived at the hospital. He was air lifted to Halifax due to the head injuries.

SiRT obtained the report of another officer who attended the hospital, but the contents do not offer anything of relevance for this report.

EHS Reports

SiRT obtained a copy of EHS reports which outline EHS interactions with the AP. They reflect consistent accounts of the incident and reiterate that the AP required medical attention and was uncooperative with police.

Body Worn Camera Footage

SiRT obtained body worn camera footage from both the SO and WO, which recorded the interaction with the AP. The footage shows the AP seeming confused and refusing to go with EHS or the officers. EHS explains that he jumped from a vehicle and has a large chunk missing from his head. The AP states that he fell down, and EHS try to explain that he jumped out of a moving van and is in need of medical attention. Officers try to reason with him, and you can see the AP reach for his bag and the WO pull it away. The footage shows the AP put his arm up and challenge the officers.

The body worn camera captured the struggle, and when the AP is taken to the ground it is difficult to see all details. The WO's camera shows the SO holding the AP's head with one hand while he is on the ground and they are attempting to handcuff him. It then shows him being taken on a stretcher and EHS conducting an assessment.

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.

LEGAL ISSUES & ANALYSIS

SiRT assumed responsibility for this file because of the serious injuries sustained by the AP. As the investigation unfolded it became apparent that the injuries sustained by the AP were more than likely due to his decision to jump from a moving vehicle. Although there was a struggle to handcuff the AP and the SO had control of his head, there was no evidence to suggest the SO caused any head trauma to the AP during the struggle.

Although it does not appear that the force used by the SO resulted in the injuries, I have assessed the evidence to determine whether the force used amounts to reasonable and probable grounds to believe a criminal offence has been committed.

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.):
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> > 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.

For Section 25 of the *Criminal Code* to apply, a police 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 SO had a duty to attend the call to assist EHS. The AP was clearly very seriously injured and was refusing to accept medical assistance. The officers were acting under their 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.

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 be considered in relation to the circumstances, and it is not required that a person weigh the force used with precision. The important considerations are reasonableness, necessity, and proportionality. Police forces have developed tools to assist officers in continually assessing risks to ensure officer and public safety, and to assist in determining what type of intervention is consistent with the law. The RCMP uses the Incident Management Intervention Model (IMIM). It is not law but developed to help officers properly apply the law. The IMIM instructs police officers to assess situational factors, their own perception, subject behaviour, and tactical considerations when determining what type of force to use.

The situation and the AP's behaviour required police to respond, and the decision to use physical force was based on their perception and tactical considerations. The AP refused to comply with verbal communication and directions, and upon police arrival he reached for a bag, and the SO and WO reasonably feared he could be reaching for a weapon. He made comments and gestures that indicated he wanted to fight police, and when they placed him under arrest he resisted and engaged in a struggle. The force used was necessary to gain control and ensure that he could be transported to hospital for medical care. Based on the seriousness of his injuries, the AP immediately needed medical attention.

I am satisfied that the use of physical force by the SO was reasonable force in the circumstances.

CONCLUSION

After a careful review of the evidence and the law, I have determined that there are no reasonable grounds to lay a charge against the SO.