Summary of Investigation
SiRT File # 2017-037
Referral from
RCMP – Pictou District
December 17, 2017

John L. Scott
Interim Director
March 14, 2018
Facts:
On December 17, 2017, the on-call SiRT investigator was contacted by Pictou Detachment of the RCMP in relation to a death following a motor vehicle collision in River John, Nova Scotia. The collision occurred in the early evening hours of December 16, 2017. The reason for the involvement of SiRT was due to the fact that the male driver of one of the vehicles involved in the collision had just been arrested and placed in custody for impaired driving when he went into medical distress and subsequently died. The SiRT investigation was completed on January 30, 2018.

As a result of the SiRT investigation, statements were taken from two EHS paramedics and three members of the River John Volunteer Fire Department. Notes and reports from two witness RCMP officers were reviewed, as well as the notes and report of the subject officer. The subject officer in this instance had the only real contact with the deceased/affected person (AP) by placing handcuffs on him in the back of the ambulance. The subject officer, like any person potentially involved in a crime, was not required to provide a statement to investigators, but cooperated fully by turning his notes and reports over to SiRT investigators. SiRT investigators also received an EHS Patient Care Report as well as the preliminary Autopsy Report.

As stated above, the head-on collision occurred at approximately 6:30 pm, December 16, 2017 on the West Branch Road in River John, Nova Scotia. From witnesses at the scene, AP’s vehicle crossed over the center line and struck an oncoming vehicle containing several occupants. The first responding RCMP officer (Officer 1) noted the AP inside his vehicle slumped on the floor with a visible laceration to his head. There was communication between AP and Officer 1. The AP wanted to get out of the vehicle, but was told by Officer 1 he needed to wait until additional help arrived. Officer 1 was concerned about causing further injury to the AP in his removal.

Minutes later members of the River John Volunteer Fire Department arrived, followed by EHS and two additional RCMP officers including the subject officer. The AP was removed from the vehicle on a backboard by firefighters, paramedics and police. He was placed on a stretcher and put in the back of the ambulance. Any of the attending personnel that were close to the AP noted a strong odor of alcohol coming from his breath. Officer 1 noted other signs of impairment on the AP and got into the back of the ambulance to place him under arrest for impaired driving.

As Officer 1 was attempting to read the AP his rights and police caution, the AP was becoming aggressive and uncooperative with the paramedic who was attempting to take his vital signs. The subject officer also got in the ambulance to try and reason with the AP and get him to cooperate. The subject officer placed handcuffs on the AP so paramedics could facilitate the required tasks needed to be done for assessing the injuries AP incurred in the accident. The handcuffs were placed on his wrists behind his back by the subject officer. This resulted in a more cooperative AP. Officer 1 was able to give the blood demand to the AP during this time as well. Because of
the AP’s cooperation, the cuffs were removed from the back and placed in front which also allowed the paramedic easier access to perform the required tests on the AP.

At this time, it was decided that Officer 1 would park his car and go in the ambulance when the AP would be transported to the hospital in New Glasgow. The second paramedic was checking on the people in the other vehicle leaving the first paramedic and the subject officer with the AP.

The subject officer was talking with the now cooperative AP when suddenly the AP became unresponsive. Efforts of resuscitation were made by the paramedics and fire department personnel in an effort to get the AP breathing again, while the RCMP officers were trying to communicate for possible assistance from the New Glasgow hospital. Based on these communications with the hospital, the patient transport did occur but the AP was pronounced dead by the attending physician. Prior to this, the resuscitation efforts by EHS and fire department took place over a 40-50-minute period.

On December 18, 2018, an autopsy was performed on the AP and the results showed that the manner of death was “accidental” and the cause of death was due to “blunt force injuries to the chest and abdomen”.

**Conclusion:**

Any and all contact RCMP officers had with the AP was in the presence of EHS paramedics and the fire department personnel. From statements taken by the SiRT investigator, no one saw any interaction between RCMP and the AP that was in anyway described as harmful. All contact was done to help the AP. The subject officer’s contact with the AP of placing handcuffs, first behind his back and then removed and placed in the front, was observed and required to be done according to the attending paramedics. There was absolutely nothing done by the subject officer in placing the handcuffs on or repositioning them to the front of the AP that in anyway was connected to his death. At the time, the use of handcuffs was required to give the necessary medical attention to the AP by the paramedics. Therefore, there are no grounds for any charges against the subject officer.