

ASIRT DECISION

**IN THE MATTER OF A DEATH DURING AN ARREST BY
LLOYDMINSTER RCMP ON MAY 7, 2021**

Acting Executive Director: Matthew Block

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Introduction

On May 7, 2021, pursuant to s. 46.1 of the *Police Act*, the Director of Law Enforcement directed the Alberta Serious Incident Response Team (ASIRT) to investigate a death, which occurred during an arrest by Lloydminster Royal Canadian Mounted Police (RCMP) officers. The arrest of the affected person (AP) arose in the context of a call for service involving the AP being inside a family member's residence while intoxicated and armed with a machete. ASIRT designated two subject officers and provided them with notice. ASIRT's investigation is now complete.

ASIRT's Investigation

ASIRT's investigation was comprehensive and thorough, conducted using current investigative protocols, and in accordance with the principles of major case management.

ASIRT investigators interviewed or reviewed interviews conducted by RCMP officers of nine civilian witnesses.

ASIRT investigators interviewed six police officers, including both subject officers.

ASIRT investigators reviewed all available video of the incident, including video from four police vehicles (WatchGuard system, which is equipped with forward-facing and rear-facing cameras).

ASIRT investigators reviewed the originating 911 call and all relevant RCMP radio transmissions from the incident.

ASIRT investigators also oversaw a scene examination conducted by members of the RCMP Forensic Identification Services unit.

Circumstances Surrounding the Incident

On May 7, 2021, at approximately 5:13 a.m., RCMP officers were dispatched in response to a 911 call reporting that the AP was intoxicated, armed with a machete, and refusing to leave a residence. The subject officers attended the residence and were invited inside by the occupants.

The AP was located outside on an elevated back deck. A machete was observed on a table just inside the door leading to the deck. The subject officers went onto the deck and advised the AP that he was under arrest. Subject officer #1 (SO1) attempted to place him in handcuffs, but he began actively resisting. Subject officer #2 (SO2) tried to assist in gaining control over the AP, but the AP broke the officers' hold on him, turned, and began punching SO1 in the face. A prolonged physical fight occurred. During the struggle, the AP grabbed at the officers' holsters and other police equipment on their service belt. At one point, the AP got a hold of SO1's expandable baton, but it was knocked out of his hand before it could be used. SO2 unsuccessfully attempted to deploy his OC spray, only to have the can knocked out of his hand by the AP.

SO2 was eventually able to use a lateral neck restraint (carotid control technique) to control the AP long enough for handcuffs to be applied. Four other officers eventually arrived to assist. While handcuffed on his stomach, the AP continued to yell, kick out at officers, and flail against his restraints. Eventually, he appeared to calm down and was then noted to be in medical distress. Officers provided medical aid until emergency medical services (EMS) arrived. The AP was pronounced deceased at the scene.

Autopsy

An Office of the Chief Medical Examiner (OCME) pathologist performed an autopsy on the AP. The AP was observed to have blunt injuries, including bruises, abrasions, lacerations to his head, back, posterior neck, and lower extremities, along with three rib fractures. No muscle bruising or fractures in the anterior neck were observed.

The pathologist, in his report of June 8, 2022, concluded that the immediate cause of death was methamphetamine toxicity combined with the struggle with police. The report specifically referenced that the combined effect of adrenaline, which is released during the fight or flight response, and methamphetamine, both of which are stimulants that can affect the brain and cardiovascular system, can result in lethal cardiac arrhythmias. The report also noted that the other injuries found at autopsy would not be expected to cause death in and of themselves.

Toxicology results showed the AP ingested methamphetamine sometime before death.

Civilian Witnesses

ASIRT investigators interviewed or reviewed interviews conducted by RCMP officers of nine civilian witnesses. Four of these witnesses were paramedics who had responded to the scene and tried to resuscitate the AP. They each noted that they did not observe the AP with any signs of life while on scene.

The five remaining witnesses were the AP's relatives who had been inside the residence with the AP following his arrival at approximately 8:30 p.m. the prior evening and into the early morning hours of May 7, 2021. Collectively, they described the AP behaving erratically throughout the evening. They noted that he appeared to be hearing things, making paranoid comments, and was carrying around a bag of white powder, which the AP had claimed was methamphetamine and crack cocaine. He was also holding a machete, which on one occasion, he had held in a threatening manner towards his sister, prompting her to retreat and barricade herself and her children in a basement bedroom.

None of these witnesses observed the AP's interaction with police as they had either remained barricaded in the basement or exited the front of the residence. They could hear the AP screaming and yelling on the back deck and could hear sounds they believed were consistent with fighting. Two of them heard the AP yelling, "I'll fucking kill you."

Subject Officers

As the subjects of a criminal investigation, the subject officers were entitled to rely on their right to silence and not speak to ASIRT. In this case, both officers provided investigators with prepared written statements and answered questions in an interview. They also signed a medical consent to allow ASIRT investigators to obtain their medical records relating to treatment of their injuries post-incident.

Subject Officer #1 (S01)

S01 confirmed that he attended the subject residence after being dispatched to a call involving a male with a machete. S02 also attended in a separate vehicle. Upon their arrival, he knocked on the front door and tried the door handle, but it was locked. A female opened a basement window and told them to come in and advised them that she was too scared to exit her room to come and open the door. A teenaged girl then came and opened the door. Both women looked scared and relieved that police were there.

S01 enquired about the whereabouts of the AP and was told that he was upstairs on the deck and that he had a big knife. S01 told the occupants to exit the residence. S01 and S02 then drew their firearms and began making their way up a narrow staircase. S01 announced that they were the police and began calling out to the AP. He could hear the AP mumbling but couldn't see or understand him. The kitchen was at the top of the stairs and there was a door that led out onto the deck. S01 observed a machete sitting on a table inside the kitchen, beside the door to the deck. The AP was standing on the deck.

S01 pointed his firearm at the AP and nudged the door open with his foot. He began giving the AP commands to put his hands on his head. After a short delay, the AP eventually complied. S01 directed the AP to get down on his knees, but he did not do so. S01 advised the AP that he was under arrest for possession of a weapon. S01 re-holstered his firearm and approached the AP to apply handcuffs. He managed to get the left cuff on the AP's wrist before the AP suddenly turned aggressively and began delivering strikes to S01's head, face, and mouth. S01 returned strikes towards the AP's face, but the AP was not reacting to them.

S01 recalled being thrown down to the ground numerous times – either from the blow of being struck by the AP or being physically tossed by him. He expressed surprise that the AP was able to move and toss around both himself and S02 so easily, given their size. At one point, S01 was thrown into the doorway of the residence and landed on his back. He then got back up and re-engaged in the fight. He also pushed the button on his radio to signal that they needed immediate assistance. The physical fight continued until, after some manoeuvring, S01 and S02 were able to get the AP in a prone position and applied handcuffs behind his back. The AP continued to thrash his body and S01 tried to keep his upper body down as he almost managed to get back to his feet. Both S01 and S02 were exhausted at that point.

S01 noted that throughout the physical assault, the AP did not try to flee despite having available exits through the door of the house or down the stairs from the deck into the backyard. S01 believed that it was the AP's goal to cause the officers serious injury or death. S01 did not feel that there was any way for the officers to create distance from the AP on the deck.

Other officers began arriving and assisted with restraining the AP. Leg restraints were also requested. S01 was told to disengage because he was bleeding. At this time, he noticed that he was missing a gun magazine from his service belt pouch and his baton. He located these items, along with S02's gun magazine and S02's OC spray, on the east side of the deck. He recalled the AP grabbing at his equipment during the melee but had not noticed until this point that he had lost them. Despite efforts by the other officers to de-escalate the situation and maintain physical control of each corner of his body, the AP persisted in kicking his legs violently, trying to roll his body, and yelling sexually explicit comments and profanities. At one point, the AP began oddly bending his own fingers such that S01 felt the need to move back in and separate the AP's hands to prevent him from breaking them.

While the AP was being restrained by the other officers, SO1 noticed that the AP was not moving as much as he had previously been. Another officer began administering CPR. SO1 and SO2 left the scene as EMS was arriving and went to the hospital to have their own injuries assessed.

SO1's medical records confirmed that he sustained a small lower lip laceration, which was sutured, and two swollen bumps on his mid-skull.

Subject Officer #2 (SO2)

SO2 provided substantially the same information as SO1. His additional observations are set out below.

SO2 recalled that when SO1 had initially grabbed onto the AP's arms, placed them behind his head, and then pulled them down behind the AP's back, they appeared to have compliance and control of the AP. This allowed SO2 to re-holster his firearm and grab onto the AP's right arm to assist SO1 with handcuffing. As soon as SO1 applied a handcuff to the AP's left arm, he felt the AP's right arm tense up and he tried to pull away by straightening his arm, pulling it out of SO2's grip, and pushing SO2 to the side.

The AP then quickly turned towards SO1 and the next thing he saw was an exchange of punches between the two. SO2 tried to grab at the AP. He got punched a couple times as he tried to intervene, but the AP seemed primarily fixated on SO1. SO2 managed to land his right knee on the AP's ribs, and the AP responded by tossing him headfirst into the wall of the house, such that his feet left the ground. He pulled out his OC spray and attempted to deploy it, but it failed. The AP ripped it out of his hand and broke it. SO2 described that both he and SO1 were essentially being "rag dolled" by the AP and that at times, he felt like they were close to going through the railings on the deck as they had nowhere to go to disengage and no option to flee because the AP's family was still present inside the home and the AP continued to present a threat to their safety.

When they appeared to be getting control of the AP, he observed the AP holding a collapsible baton, which he quickly chopped out of his hand. SO2 had his arm over the AP's head and was forcing him to bend at the waist. He then began feeling the AP tugging at his service belt and his hand grabbing onto his service pistol. SO2 pushed the AP's hand away and then re-attached the locking band, which secures the pistol in place. SO2 advised that this elevated his threat assessment as the AP had escalated to trying to access their weapons, which could be used to seriously injure or kill them. In his view, there is no reason for someone to go for their weapons unless they planned to use them and so, in his mind, the situation escalated from just a fight to the AP was trying to kill them.

SO2 then wrapped his arm around the AP's neck and locked in a carotid control technique, which involved squeezing the lateral side of the neck, over the carotid artery, between his bicep and forearm. The technique is designed to cause loss of consciousness, which would have allowed them the opportunity to gain control over the AP. Once SO2 had him in this hold, he tried to quickly drag him down to the ground and in doing so, lost his grip and the AP was able to reposition his chin under SO2's arm. No loss of consciousness ensued. SO2 then continued to squeeze his arm around the AP's face until SO1 was able to apply the handcuffs.

The AP calmed slightly but then quickly became agitated again and began smashing his head on the ground and yelling. SO1 maintained control of the AP's right arm, while he controlled the left. Other officers then began arriving and switched places with them to maintain control over the AP's limbs. He did not observe any of the officers placing sustained pressure on the AP's back, head or neck.

SO2's medical records confirmed that he did not sustain any observable injuries but had reported body pain.

Witness Officers

ASIRT investigators interviewed four additional police officers, who provided substantially similar accounts of their observations of the AP and his interactions with police.

They each arrived at the residence separately approximately 10 minutes after the AP had been successfully handcuffed by SO1 and SO2. The AP was lying in a prone position with his hands cuffed behind his back. SO1 and SO2 were noticeably out of breath. SO1 was directed to step back as he was noticeably injured and bleeding heavily from his face.

The AP continued to yell, swear, and resist by kicking his legs and trying to flip over onto his back. He refused to calm down and listen to police directions. Officers then crossed the AP's legs and bent them at the knees to try to gain better control of him. He continued to try to push his legs out, turn onto his side, and lift his head to yell profanities and other incoherent statements. This continued for approximately 10 – 15 minutes. It was determined that leg shackles would be required before the AP could be moved. Control over the AP's limbs was maintained by the officers while the shackles were retrieved from a police vehicle.

Suddenly, the AP stopped moving and talking and it was observed that he was not breathing. The AP was quickly turned onto his back and one of the officers, who was a former paramedic, began CPR. The officer who had retrieved the leg shackles applied them as a precaution, in case the AP regained consciousness and resumed being aggressive. The officers all concurred that they did not observe any indication of medical distress until he suddenly stopped breathing.

Some of the officers reported observing a fully extended baton, pistol magazines, and an OC spray canister on the back deck. It was noted by one of the officers that he did not believe the OC spray had been deployed as he could not smell or feel its effects in the air, which he would have expected to if it had been used.

Video Evidence

ASIRT investigators obtained video from four police vehicles. The videos themselves do not capture any of the incident. SO1 was also equipped with a body worn microphone, which captured audio of the police interaction with the AP that can be heard on the video from his police vehicle. The radio transmissions could also simultaneously be heard from inside the police vehicle.

The audio corroborates the subject officers' accounts of what occurred at the residence. SO1 can be heard clearly announcing that they were the police, making callouts, and telling the AP that he was under arrest. The physical struggle between the officers and the AP can then be heard – there are the sounds of fighting, grunting, banging into things, SO1 gasping for air, and SO1 requesting help and immediate backup. In the midst of the struggle, one of the subject officers can be heard yelling, "drop it" and at one point, frantically questioning, "where's the gun?" After the AP had been handcuffed, and as the officers tried to catch their breath, the subject officers can be heard commenting on their injuries, and both can also be heard mentioning that they felt the AP going for their guns.

The AP could be heard intermittently laughing, and yelling, mostly unintelligibly. He was heard saying, "get off me," as officers were telling him to give them his arm, and to "fucking kill me" as officers are shouting at him to drop something. The AP also told officers he loved them, to grab his wallet, to take

him home, and then randomly shouting, “shoot him, shoot that bitch, kill him.”

When other officers arrived on scene, they can be heard trying to calm the AP down. The AP alternated between periods of calm to making efforts to resist, which is reflected by the comments being made by the various officers. There are no further sounds of active resistance or fighting, which may simply reflect that SO1 was asked to step back, and his body worn microphone was too far away to pick up the sounds of physical activity. SO1 can be heard locating and collecting various items on the deck, including SO2’s OC spray, his baton, and pistol cartridges. A few minutes later, someone is heard commenting that they can’t feel a pulse and are trying to rouse the AP.

Analysis

ASIRT investigates where serious injury or death is caused by a police officer, in addition to other sensitive investigations of police officers. These are criminal investigations only.

Here, the actions under investigation are the uses of force by the subject officers during the AP’s arrest.

Section 25 Generally

Under s. 25 of the *Criminal Code*, police officers are permitted to use as much force as is necessary for the execution of their duties. Where the force used by an officer is intended or is likely to cause death or grievous bodily harm, s. 25(3) applies and the officer must believe on reasonable grounds that the force is necessary for the self-preservation of the officer or preservation of anyone under that officer’s protection.

For the defence provided by s. 25 to apply to the actions of an officer, the officer must be required or authorized by law to perform the action in the administration or enforcement of the law, must have acted on reasonable grounds in performing the action, and must not have used unnecessary force.

All uses of force by police must also be proportionate, necessary, and reasonable.

Proportionality requires balancing a use of force with the action to which it responds. As noted above, where force is intended or is likely to cause death or grievous bodily harm, s. 25(3) codifies a requirement that the officer must believe on reasonable grounds that the force is necessary for the self-preservation of the officer or preservation of anyone under that officer’s protection.

Necessity requires that there are not reasonable alternatives to the use of force that would also accomplish the same goal. These alternatives can include no action at all. Analysis of police actions must recognize the dynamic situations in which officers often find themselves, and such analysis should not expect police officers to weigh alternatives in real time in the same way they can later be scrutinized in a stress-free environment.

Reasonableness looks at the use of force and the situation as a whole from an objective viewpoint. Police actions are not to be judged on a standard of perfection, but on a standard of reasonableness.

Section 34 Generally

A police officer also has the same protections for the defence of person under s. 34 of the *Criminal Code* as any other person. This section provides that a person does not commit an offence if they believe on reasonable grounds that force is being used or threatened against them or another person, if they act to defend themselves or another person from this force or threat, and if the act is reasonable in the circumstances. For the act to be reasonable in the circumstances, the relevant

circumstances of the individuals involved, and the act must be considered. Section 34(2) provides a non-exhaustive list of factors to be considered to determine if the act was reasonable in the circumstances:

- (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.

The analysis under s. 34 for the actions of a police officer often overlaps considerably with the analysis of the same actions under s. 25.

Sections 25 and 34 Applied

The subject officers were lawfully placed and acting in the execution of their duties in responding to a call for service relating to the AP. The initial information provided was that the AP was intoxicated, armed with a machete and refusing to leave a residence causing other occupants to be afraid. This information gave the responding officers grounds to arrest the AP. Under their core duty to protect the public, the officers were required or authorized by law to apprehend the AP. They were acting on this duty throughout the incident.

When the subject officers first interacted with the AP, there did not appear to be any indication that the situation would devolve as quickly as it did. Although the officers could not make out what he was saying, the AP was responding in some fashion to their verbal callouts as they climbed the stairs of the residence. Once upstairs, the subject officers observed that the AP was standing outside, and he had left the machete inside the kitchen; therefore, he appeared to be unarmed. The AP was also initially compliant with police directions to put his hands on his head. The AP's conduct dramatically escalated immediately after the subject officers physically gained control of his arms and began applying handcuffs.

The AP proceeded to turn and repeatedly punch SO1 directly in the face. Both SO1 and SO2 described being thrown down to the ground or tossed by the AP several times as they both physically struggled to gain control over the AP. During the prolonged physical struggle, the AP was able to brandish SO1's expandable baton, which was quickly knocked out of his hand, relieve SO2 of his OC spray before he could successfully deploy it, and attempted to remove SO2's service pistol from its holster. The escalation on the part of the AP from applying physical force to the subject officers to his persistent efforts to gain access to their weapons, reasonably elevated the officers perceived threat to one where

they became concerned for their own, and each other's, self-preservation.

SO2 expressly delineated that the point where he began viewing the AP as a threat of grievous bodily harm or death was when the AP had tried to grab his service pistol and had managed to unhook one of his holster's locking bands. SO2 decided to apply a carotid control technique, which per the RCMP Incident Management Intervention Model policy is reserved for when an officer believes on reasonable grounds that a subject will imminently cause grievous bodily harm or death.

The force used by the subject officers in this instance was not likely to cause death or grievous bodily harm. Although the carotid control technique administered by SO2 is such that, if it is continued to be applied after a loss of consciousness, it could cause death – there is no evidence that a sustained use of this technique was used or that the AP ever lost consciousness while it was in use. The autopsy also confirmed that it was the struggle with police itself, rather than any specific injuries sustained during the struggle, in combination with the effects of the AP's methamphetamine use, that caused his death. There was nothing more that the officers could have done to defuse the situation and calm the AP.

There is no doubt that the subject officers responded reasonably by using physical force to repel the AP's assaultive actions and to try to gain physical control of him. SO2's decision to use the carotid control technique occurred after a sustained two-on-one physical fight, where the AP was showing no signs of slowing down; rather, he was grabbing at weapons secured to both officers' service belts. In the circumstances, it was reasonable for the officers to infer an intention on the part of the AP to use any weapon he could get his hands on. Therefore, the AP grabbing at SO2's service pistol imported an objectively reasonable concern that if he successfully obtained it, that he would use it against the officers.

It was also necessary for the subject officers to use physical force to take the AP into custody to prevent him from continuing his assault on them and from re-entering the residence, where the machete was located, and where other civilians were still present. SO1 noted that during the physical struggle, there were opportunities for the AP to have fled but instead he chose to persist in assaulting them. He appeared to be highly motivated to continue behaving in an aggressive and erratic manner. The AP continued to resist even when outnumbered by the presence of a total of six police officers, while handcuffed in a prone position and where those officers were maintaining control over his limbs.

The subject officers use of physical force to strike the AP and to administer a carotid control technique to try to subdue him so that they could effect his arrest was also proportionate to the threat that he reasonably appeared to pose to them.

Based on the evidence, there is no reasonable interpretation other than that the subject officers were acting to defend themselves, and each other, when they physically grappled with the AP and delivered strikes and unsuccessfully administered the carotid control technique.

The subject officers were required or authorized by law to act that day and acted on reasonable grounds. Their use of force was reasonable, proportionate, and necessary. As a result, the defence provided by s. 25 of the *Criminal Code* is likely to apply to the subject officers.

There were also no other means available to the subject officers to respond to the escalating threat presented by the AP. As such, the defence under s. 34 of the *Criminal Code* is likely to apply to the subject officers.

Conclusion

The subject officers' use of force was proportionate, necessary, and reasonable. As a result, there are no reasonable grounds to believe that an offence was committed.

Original signed

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Acting Executive Director

March 6, 2026

Date of Release