

## SUMMARY REPORT OF INVESTIGATION

## I. EXECUTIVE SUMMARY

Date of Incident:	November 21, 2017
Time of Incident:	8:21 AM
Location of Incident:	XXXX N Elston Ave, Chicago IL 60618
Date of COPA Notification:	December 1, 2017
Time of COPA Notification:	1831

On November 21, 2017, the complainant, Subject 1, was walking toward the Blue Line CTA stop when he collapsed on the street. According to Subject 1, he suffers from PTSD and experiences such episodes occasionally. Two civilians stopped to assist and called 911 to report a disturbed male speaking incoherently, foaming at the mouth, and expressing suicidal thoughts. When paramedics arrived, Subject 1 had regained most of his lucidity but was still taken to the hospital, where he was released shortly after. He later filed a complaint with COPA that he was not suicidal and was detained against his will. He also complained that his handcuffs were placed too tightly on his wrists.

## II. INVOLVED PARTIES

Involved Officer #1 (Accused):	<b>Officer A</b> , Star #XXXX, Employee #XXXXX, Appointed XX/XX/12, Police Officer/Field Training Officer, Unit XXX, DOB XX/XX/84, Male White
Involved Officer #2 (Witness):	<b>Officer B</b> , Star #XXXX, Employee #XXXXX, Appointed XX/XX/17, Police Officer, Unit XXX, DOB XX/XX/90, Female White Hispanic
Subject #1 (Reporting Party Victim):	<b>Subject 1</b> , DOB XX/XX/90, Male, White
Subject #2 (Witness):	Unknown; First name 'Civilian 1'
Subject #3 (Witness):	Chicago Fire Department A (CFD, first name unknown), DOB Unknown, Male White
Subject #4 (Witness – No Recorded Statement Obtained):	Civilian 2, DOB Unknown, Female, Race Unknown

**III. ALLEGATIONS**

Officer	Allegation	Finding
Officer A	1. Subject 1 alleged that Officer A improperly detained him, deprived him of his ability to leave and refuse medical attention, and ordered an unnecessary psychological evaluation, in violation of Rule 8 and the 4 <sup>th</sup> Amendment of the U.S. Constitution.  2. Subject 1 alleged that Officer A handcuffed him too tightly, in violation of Rule 8.	1. Unfounded  2. Unfounded

**IV. APPLICABLE RULES AND LAWS**

**RULES**

Rule 8: Disrespect to or maltreatment of any person, while on or off duty.

**FEDERAL LAWS**

4<sup>th</sup> Amendment to the United States Constitution

**V. INVESTIGATION<sup>1</sup>**

**a. Interviews**

**Complainant Subject 1<sup>2</sup>**

In his December 6, 2017 statement to COPA, Subject 1 stated he was walking westward down Irving Park Road toward the CTA Blue Line station when he suddenly experienced symptoms of PTSD.<sup>3</sup> His eyes shut and he lost control of his legs and body, collapsing onto the street near the sidewalk.<sup>4</sup> Two individuals came to assist him including one male nurse, and while drifting in and out of consciousness, Subject 1 heard the gentleman call 911 and tell the dispatcher

<sup>1</sup> COPA conducted a thorough and complete investigation. The following is a summary of the material evidence gathered and relied upon in our analysis.

<sup>2</sup> Atts 4-7, 9-10

<sup>3</sup> Subject 1 explained that he has been diagnosed with PTSD and has had several previous episodes, but his medication had not changed recently. No psychological history records were requested by COPA.

<sup>4</sup> Subject 1 did not sustain any injuries from the fall per his own testimony.

that he (Subject 1) was suicidal.<sup>5</sup> When Subject 1 regained control of his senses and tried to insist that he was feeling much better, he was convinced by this gentleman to stay and wait for the police.

A uniformed male white officer and female Hispanic officer arrived to the scene within a few moments.<sup>6</sup> At this time, Subject 1 was standing up on the Southwest corner of Irving Park and Elston. Although Subject 1 again insisted to the officers that he was feeling better, the male officer advised him to rest and wait for paramedics, but said that he could refuse treatment when they arrived. When the fire and medical personnel arrived several moments later, Subject 1 expressed that he was not suicidal and wanted to get to work. The medical personnel informed Subject 1 that they had to transport him for further evaluation; the male officer then told him that he could not be released and was required to get in the ambulance because they were concerned that he may be suicidal. The male officer then “came at him” with handcuffs while Subject 1 was speaking to Firefighter A, who had arrived by then.<sup>7</sup> Subject 1 then called his father, a former CPD member, and the male officer became angry at this. A command was given for Subject 1 to be handcuffed, and he then felt pressure against his side. He moved his body away and put his hands up, to resist being handcuffed as much as possible. However, shortly after his left wrist was handcuffed, he decided to comply and moved his arms down to allow the officers to continue to handcuff him. He explained that his left wrist was more hurt because he initially fought against being handcuffed, but he let them handcuff his right wrist.

While in the ambulance, Subject 1 complained to the male officer that the cuff on his right wrist was much too tight. At first, the officer stated he could not loosen or remove the cuffs for safety concerns; but after asking several more times, Subject 1 convinced the officer to remove the cuffs entirely. Subject 1 estimated that the officer removed his handcuffs approximately two to four minutes after his first request to have the handcuffs loosened. After arriving at the hospital, Subject 1 was asked by a nurse and a doctor about his suicidal tendencies. He was offended and told the medical staff he had never contemplated suicide. He was released from the hospital within an hour and took pictures himself of the redness on his wrists.

## **Witness Civilian 2**

On March 9, 2018, COPA contacted the phone number of the 911 caller listed on the Event Queries obtained from OEMC.<sup>8</sup> A female individual answered, identified herself as Civilian 2, and confirmed that she witnessed this incident. She explained that she was crossing the street on Irving Park Road on her way to the Irving Park CTA Blue Line stop on the morning of November 21, 2017 when she observed a gentleman collapse in the middle of the street in front of Alp’s Pancake House. She approached him to help and observed foam coming from his mouth. A male customer<sup>9</sup> from Alp’s who identified himself to Civilian 2 as a nurse also appeared to assist, pulling the gentleman to the edge of the sidewalk so he was out of the way of traffic.

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<sup>5</sup> Subject 1 stated he overheard the 911 caller identify himself as ‘Civilian 1’ on the phone. This individual’s identity was not confirmed by CPD or COPA, and a statement was not obtained from him.

<sup>6</sup> These officers were later identified by COPA as Officer A and Officer B.

<sup>7</sup> Firefighter A’s identity was not verified by COPA, and he was not contacted for an interview.

<sup>8</sup> The Sprint caller was shown as ‘Civilian 2’ at XXX-XXX-XXXX.

<sup>9</sup> The complainant’s letter indicated this male as “Civilian 1.” Civilian 2 described Civilian 1 as being Latino and about 6’ tall. The complainant’s letter to COPA indicated the name as Civilian 1. This person could not be reached.

According to Civilian 2's observations, the gentleman who fell looked pale, malnourished, and fatigued. He also appeared mentally disturbed, which Civilian 2 had concluded because he was speaking irrationally. He was also shaking and saying things like, "I feel very weak" and "I've been thinking about killing myself." At the request of the male nurse, Civilian 2 called 911 and told the dispatcher that the gentleman may be in epileptic shock. She also mentioned that he appeared to be suicidal. After completing the call, Civilian 2 remained for about 3-4 minutes, then left for the train before officers arrived.

#### b. Evidence<sup>10</sup>

The **Event Queries**,<sup>11</sup> **911 Call Recordings**,<sup>12</sup> and **Radio Transmissions**<sup>13</sup> confirmed that OEMC was contacted about a male who had collapsed on the street and was refusing an ambulance; however, the female caller then advised 911 that the male was feeling suicidal and was suffering from PTSD or a possible overdose. The dispatcher then called for CPD to respond.

Subject 1 provided five **Photographs**<sup>14</sup> to COPA that depicted mild redness on his wrists. According to Subject 1, this was a result of the handcuffs being placed on too tightly.

The **Medical Records**<sup>15</sup> received from XXXXX Hospital confirmed that Subject 1 was admitted on November 21, 2017 for a psychiatric complaint. He was diagnosed with Tachycardia (rapid heart rate) due to an "unspecified fall" and was discharged the same day in good condition. The narrative detailed that the patient was distraught upon his admission due to being transported there against his will; he denied any suicidal or homicidal thoughts.

The **Ambulance Report**<sup>16</sup> received from the Chicago Fire Department documented that EMS Engine XXX arrived on scene due to an overdose. They arrived to find the patient agitated and experiencing anxiety, but he denied wanting to hurt himself. The narrative also details that the patient tried to run from the medical personnel, which is why CPD placed him in handcuffs. The patient was also upset and displayed a combative attitude while being transported and when arriving at the hospital. Subject 1 was given a Fall Prevention follow up plan and was not believed to be at risk of harming himself or others upon release.

## VI. ANALYSIS

COPA recommends that **Allegation #1** that Officer A improperly detained Subject 1, deprived him of his ability to leave and refuse medical attention, and ordered an unnecessary psychological evaluation, in violation of Rule 8 and the 4<sup>th</sup> Amendment of the U.S. Constitution

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<sup>10</sup> Video footage from surrounding Red Light Cameras and one private business were requested by COPA, but were past retention. No video was obtained of this incident.

<sup>11</sup> Atts 12-14.

<sup>12</sup> Atts 21-22.

<sup>13</sup> Atts 23-25.

<sup>14</sup> Att 8.

<sup>15</sup> Att 29.

<sup>16</sup> Att. 27.

be UNFOUNDED. Although Subject 1 was upset by being transported to the hospital, the responding officers had a duty to address Subject 1’s potential suicidality. There is no dispute that the officers were informed that Subject 1 had made suicidal statements at the scene of the incident. Whether the basis of this information was accurate, the officers’ reliance on the information was reasonable; therefore, they were obligated to assess Subject 1’s psychiatric condition upon receipt of this information. Subject 1’s complaint that he simply did not wish to visit the hospital does not substantiate this allegation of misconduct.

COPA recommends that **Allegation #2** that Officer A handcuffed Subject 1 too tightly, in violation of Rule 8, also be UNFOUNDED. By his own admission, Subject 1 briefly resisted being placed in the cuffs by police once he was told he was being detained, which resulted in the redness to his wrists. Furthermore, Subject 1 admitted that Officer A removed the handcuffs two to four minutes after Subject 1 complained that they were too tight.

**VII. CONCLUSION**

Based on the analysis set forth above, COPA makes the following findings:

Officer	Allegation	Finding
Officer A	1. Subject 1 alleged that Officer A improperly detained him, deprived him of his ability to leave and refuse medical attention, and ordered an unnecessary psychological evaluation, in violation of Rule 8 and the 4 <sup>th</sup> Amendment of the U.S. Constitution.  2. Subject 1 alleged that Officer A handcuffed him too tightly, in violation of Rule 8.	1. Unfounded  2. Unfounded

Approved:

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 Deputy Chief Administrator – Chief Investigator A

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 Date

**Appendix A**

Assigned Investigative Staff

Squad#:	X
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**Investigator:**

Investigator A

**Supervising Investigator:**

Supervising Investigator A

**Deputy Chief Administrator:**

Deputy Chief Administrator A