

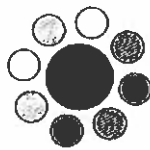
IN THE MATTER OF:

THE RESPECTFUL WORKPLACE COMPLAINTS

OF

COMPLAINANT "A" AND RESPONDENT "B"

REPORT AND FINDINGS



Equitable Solutions

BACKGROUND

On October 7, 2020 at 4:04 a.m., a Winnipeg Police Service event number was generated as a result of a 911 call from a third party requesting assistance for a 23-year-old female who had sustained a self-inflicted stab wound to the neck. Members of the Winnipeg Police Service (hereinafter, "WPS") were dispatched, arriving on scene at 4:07:52 a.m. Members of the Winnipeg Fire Paramedic Service (hereinafter, "WFPS") were also dispatched at approximately 4:09 a.m. A rescue unit and a paramedic unit attended at the scene where the injury occurred, with the rescue unit arriving at 4:13:59 a.m. and the paramedic unit arriving at 4:14:11 a.m.¹

On that evening, the rescue unit was staffed by:

- Witness 1;
- The Respondent, a Firefighter-Primary Care Paramedic (hereinafter, "FF-PCP");
- Witness 3 also an FF-PCP;
- Witness 2.

The paramedic unit was staffed by the Complainant, who is an Advanced Care Paramedic (hereinafter "ACP") and Witness 6.

The Complainant has filed a complaint under the Respectful Workplace Administrative Standard with respect to the alleged conduct of the Respondent on the call, including in the ambulance and upon arrival at the Health Sciences Centre (hereinafter, "HSC"). In addition to the conduct about which the Complainant complained, the Complainant asserted that the conduct of the Respondent caused a delay in transporting the patient to hospital compromising patient safety. The Complainant expressed his view that there was a racially-based motivation for the actions which are the subject of his complaint and are part of a course of racist events which have occurred within the WFPS.

The Respondent has also filed a complaint under the Respectful Workplace Administrative Standard with respect to the alleged conduct of the Complainant during transport and upon arrival at HSC. He alleged that the Complainant's behaviour was

¹ EMS Incident Details for the relevant call.

verbally abusive and he the allegations of the Complainant, including the characterization of his conduct as having a basis in racism.

On October 19, 2020, the Winnipeg Free Press published an article entitled "Paramedic Accuses Firefighters of Refusing To Help Injured Indigenous Woman". The article printed a copy of the private email sent by the Complainant to Chief John Lane on October 8, 2020. The Complainant denies having forwarded the email to the Winnipeg Free Press; confirmation from the Winnipeg Free Press supports that denial.

As a result of the publication of this article, the Complainant complained further that he was the victim of retaliation in the form of a post on a private Facebook page used primarily for firefighters to trade shifts ("Trade Centre") in which the Complainant was named as the whistleblower quoted in the Winnipeg Free Press article. The Complainant reported having received harassing telephone calls to his home telephone, his cellphone and to Witness 13's home telephone. He also reported attendances at his home on October 19, 2020 by either the Respondent or people purporting to be the Respondent.

All of the events hereinbefore described which took place after the primary incident on October 7, 2020 have been considered and addressed by the Investigator in this Report.

Twenty-six interviews were conducted by the Investigator between October 27, 2020 and December 15, 2020 (see Appendix "A"). An offer for the Investigator to meet with the patient was also transmitted to the patient in writing; she did not respond.

A list of the documents reviewed by the Investigator during the course of this investigation is attached as Appendix "B" to this Report.

A summary of available video footage relating to the relevant call is attached at Appendix "C" to this Report.

A summary of findings which have been made is attached at Appendix "D" to this Report.

- On his way out of the ambulance bay:
 - The Complainant told him he could not leave;
 - He replied “yes I can”;
 - The Complainant told him that “you need to stay, and we need to talk about this” and he replied, “no I don’t, write up the incident if you need to”;
 - The Complainant then said “yeah, walk away you fucking pussy” within earshot of the patient and Witness 6;
 - There was a later exchange in the ambulance bay where, in the presence of Witness 1, the Complainant became agitated and hostile, and that the Complainant repeatedly referred to him as a “fucking pussy”;
 - Witness 15 walked by and entered the hospital at one point during this exchange.

The Complainant's Response to the Complaint of the Respondent

In response to the complaint filed by the Respondent made October 8, 2020, the Complainant provided a second written statement, which provided more detail than his original email to Chief Lane. In it, the Complainant added the following assertions (*inter alia*):

- That at or about the time of the shooting of George Floyd and the Black Lives Matter movement, the Complainant brought to the attention of Human Resources a Facebook post by a WFPS member which stated “Black lives matter only when they're killed by cops. Killed by each other? Not so much”;
- That over the summer months he brought forward to Human Resources additional examples of what he asserted to be racist posts on social media by WFPS members;
- That the Respondent would have known about those complaints due to his union work with the UFFW;
- That prior to this event, the Complainant had had only limited exposure to the Respondent and that “every encounter with the Respondent prior to this incident has always been amicable and without issue”;

- That there was a confrontation in the ambulance bay outside the presence of the patient in which he referred to the Respondent as a "fucking pussy";
- That the Complainant thereafter spoke with Witness 15 in the ambulance bay, and relayed what had happened, apologized and recounted the story with tears in his eyes as he did so;
- That back at the station the Complainant also advised Witness 9 in person and Witness 5 by telephone as to what had occurred and apologized to them; that he apologized again the next shift in a meeting about the matter with Witness 5, Witness 13, and other members;
- That at the conclusion of the meeting everyone present agreed that the matter would best be resolved at the street level but that the Respondent had disregarded an order to participate and refused to go;
- That the Complainant also called Witness 1 and apologized for his behaviour;
- That the Complainant had never had his rank or authority questioned on a call but in this instance was questioned, undermined and prevented from providing the best possible care to a patient;
- That the Respondent had contacted a family member of Witness 6 (also a member of the WFPS) to ascertain whether if the patient had been transported with "lights and sirens";
- That "someone" had leaked the Complainant's email to Chief Lane to the Winnipeg Free Press, that the Respondent had posted his name on social media and that the Respondent had stated that everyone should be wary of working with the Complainant;
- That the Complainant and Witness 13 received hang-up phone calls, and that the Complainant's household has received threatening calls which he believed to be retaliation for making the complaint;
- That someone purporting to be the Respondent attended at his home when he was not present, which he also believes to be retaliation for making the complaint.

THE INTERVIEWS OF THE COMPLAINANT AND THE RESPONDENT

The Complainant's Interviews

The Complainant was interviewed on three occasions. He presented as racialized person with a dark skin tone. The Complainant (generally) confirmed the content of his written statements.

With respect to his previous claims about racist social media postings by members of the WFPS, the Complainant stated that:

- On June 7, 2020, he approached a union representative with respect to the Facebook post of a WFPS member which asserted that Black lives only matter when killed by police and had requested a meeting with the WFPS to discuss the post;
- He had attended several follow up meetings with (in varying combinations) Human Resources staff, the Deputy Chief and Chief Lane over the summer of 2020;
- At some point during the summer, Chief Lane released to little effect a memorandum to staff reminding them to use social media appropriately;
- On August 31, 2020, the Complainant advised Human Resources that the inappropriate and racist social media posts were continuing;
- Several years ago, Witness 3, UFFW member referred to him as a "sand ni**er" and that the matter had been resolved at the "street level" (i.e.: within the station) at the time; he had also heard Witness 3 make inappropriate comments about Indigenous peoples and immigrants. In a later interview the Complainant stated that the incident when he was called a "sand ni**er" occurred while Witness 3 and the Complainant were both working out of Station 22.

With respect to the events of October 7, 2020, the Complainant stated that (*inter alia*):

- He arrived at the patient first, spoke to the WPS officer on scene and immediately called in a trauma pre-alert;

- He contacted the administrator of the page, Witness 11, by text message. A copy of the messages was provided to Witness 11 by the Complainant in which the Complainant names the Respondent as the person who made the post. Witness 11 in the messages responds without concurring that the person who made the post was the Respondent;
- He asserted in his first and second interviews with the Investigator that he also spoke with Witness 11 by telephone and that in that call, it was clear from the context of their conversation that the Respondent created the post. Further, the Complainant asserted that to join the private Facebook group, the WFPS registration number was required for each firefighter requesting admission to the group;
- He also asserted that persons had been making harassing telephone calls to his home and cell phone as well attending at his home on two occasions on Monday, October 26, 2020;
- With respect to the harassing telephone calls, he stated that three calls were placed to his cell phone; including one in which he was referred to as a "fucking idiot"; and another one in which he was told that if his house was on fire, to call the paramedics for help, not firefighters.

With respect to the persons attending outside his home the Complainant:

- Acknowledged that he told Human Resources staff and the WPS that it was the Respondent who had attended his home in the heat of the moment as he was himself upset by his [family member's] distress;
- Asserted that he was not home when the incidents occurred, and acknowledged it could have been someone else purporting to be the Respondent or that someone may have simply used the name of the Respondent;
- Stated that he has a long driveway, and that the first attendance was one vehicle at approximately 10:30 a.m. and he was alerted to this event by his [family member];
- Stated that the same vehicle returned to his home along with a second vehicle at approximately 11:30 a.m.;

- Because it was not an emergent or volatile situation in his view, Witness 2 and Witness 3 were putting away medical equipment and removing their PPE;
- On a non-COVID-19 call, PPE consists of protective eyewear, respirator and gloves, and this is the PPE that was worn on this occasion;
- The Complainant asked, "who's coming?"; Witness 1 then instructed the Respondent, who had been assigned to drive the apparatus that shift, to go get Witness 3;
- When the Complainant asked a second time, Witness 1 told him "hang on, you're not even leaving yet" to which the Complainant replied, "yes we are";
- Witness 1 told Witness 6 to "hold on" or words to that effect and then ordered the Respondent to accompany the patient whereupon the ambulance departed;
- If there was a delay of care as a result of his having the Respondent get Witness 3, Witness 1 was responsible for the delay;
- Medical decisions are within the authority of the ACPs and Witness 1 is responsible for general safety at the scene;
- He did not see urgency but made clear he was not challenging the Complainant's authority on scene;
- He referred to the call on three occasions as "just another call in the North End", "just a regular call in the North End", and "just a routine call in the North End".

With respect to the events which occurred in the ambulance bay at HSC, Witness 1 stated that:

- The Complainant initially spoke with Witness 1 because Witness 1 wanted to know what had occurred and wanted to calm the situation. The Complainant asked what happened that caused the delay;
- He did not want to be "a rat", but stated that when the Complainant and he were speaking about the conduct of the Respondent, he told the Complainant that he had not been following protocol by failing to wear a mask (which he asserted was hanging around the Complainant's neck during the call) and that no one was going to write anyone else up;

- They discussed what had occurred at the scene but when the Respondent entered the ambulance bay the Complainant became aggressive and volatile and swore at the Respondent;
- The Complainant later phoned him to apologize for his behaviour in the ambulance bay; when doing so, the Complainant said that they had never had a problem working together in the past and Witness 1 agreed;
- He described this investigation into allegations of racism as "horrifying", "sickening" and being called a racist was akin to being called a "rapist" or a "pedophile";
- He also took issue with the Complainant sending an email directly to Chief Lane (rather than proceeding through the chain of command).

During Witness 1's second interview, certain matters were clarified by the Investigator and Witness 1 viewed the video footage from the front and rear of the ambulance as well as the video footage from the ambulance bay. He stated that (*inter alia*):

- The Complainant made two requests from the back of the ambulance for a PCP to accompany the patient;
- The Complainant did not raise the issue of race or racism with Witness 1 in the ambulance bay nor in the phone call which took place on October 7th;
- The consequence of "throwing around" the accusation of racism was a "stain that doesn't go away";
- Contrary to the indications of Witness 3 and the Respondent, once positions are assigned, they are almost never changed;
- He did not recall anyone volunteering to accompany the patient but had the circumstances called for it (due to urgency) there would have been "zero hesitation";
- He again took issue with the Complainant's email to Chief Lane and referred to doing so as "tattling";
- He had heard a rumour that the Complainant had played the "race card" to get out of a [traffic] ticket;

- He took issue with the Complainant having reported another UFFW member for sharing a racist post on social media and referred to that member as a "beautiful man" with a "heart of gold";
- With respect to the Respondent's use of social media, Witness 1 stated that the Respondent thinks it is his job to defend the "fire side" and the dual service-system model currently in place within the WFPS rather than having paramedics operate separately;
- When asked about changes within the WFPS since the killing of George Floyd, he stated that there was an awareness campaign and that right now the issue of racism was a "timebomb";
- He stated that a large percentage of the WFPS workforce identified as Métis;
- He stated that all members are brothers and sisters and that everyone must have each other's backs irrespective of their race;
- He stated that Black Lives Matter had made martyrs out of career criminals.

Witness 1 presented as persuasive, but also appears to have accepted to a large degree assertions of fact made by his crew members which were outside of his knowledge. During his second interview, he presented as genuinely upset by what he felt were false allegations of racism.

Witness 2, UFFW member

Witness 2 was part of the crew on the rescue unit on October 7, 2020 call. He asserted that:

- The fire truck arrived first with the Respondent driving;
- Both the Respondent and the Complainant looked at the patient's wound;
- One person was taking vitals and blood pressure prior to loading the patient;
- Witness 3 assisted the Complainant in loading the patient into the ambulance;
- He was about to grab the (medical) gear which was in a large bag similar to a backpack, approximately three feet long by 18 inches wide, brought the bag back and heard (Witness 1) say "who do you want to go with you";

assessment was determinative, Witness 15 responded: "no disrespect intended, they [the PCPs] don't get an opinion";

- Witness 3 should have been wearing his protective eyewear for the entire call.

Medical Director, WFPS

The Medical Director was provided with the Final Patient Care Report for the subject patient prior to the interview. The Medical Director also reviewed the video footage from the ambulance with the Investigator.

At the commencement of the interview, the Medical Director confirmed that he had reviewed the Final Patient Care Report and had also reviewed the actions taken by the trauma team at the Health Sciences Centre.

the Medical Director stated that:

- The Complainant was "100% correct" transporting the patient CTAS 2 with lights and sirens and treating the injury as life-threatening;
- There are limited interventions which can be conducted to treat neck wounds, in turn increasing the urgency in having the patient's injury assessed and treated;
- It is not possible to determine if a penetrating neck wound is life-threatening without the use of advanced diagnostics, even for a trauma surgeon;
- The patient was taken to the resuscitation room at HSC, and her injury was managed as being life-threatening until such time as it was determined that the injury was not by way of diagnostic imaging;
- The patient received diagnostic imaging on an urgent basis, within 15 minutes of arrival at hospital;
- There is "no way" that a determination as to whether or not the injury was life-threatening could be made in the field;
- The amount of blood loss was not relevant to this determination;
- A stab and a laceration are both considered to be penetrating injuries;

- Paramedics are taught not to probe or explore a wound, and as a result would not know exactly the depth of a wound;
- Any unnecessary delay to arrival at hospital in the case of a penetrating neck wound as was the case in this instance is "unacceptable" and could have led to dire consequences for the patient (parenthetically, the patient safety review conducted by the WFPS' Service Quality and Patient Safety Officer found this event to be a "near-miss").

The Medical Director also discussed the concept of "decompensation" in relation to emergency medicine. "Compensation" is the ability for organ systems within the human body to continue to function notwithstanding an injury or illness. "Decompensation" occurs when one or more organ systems fail. The Medical Director stated that:

- Decompensation in a younger adult (the patient was 23 years of age) can happen very quickly. In other words, a younger, relatively healthy person may be able to compensate for some time, and then suddenly become unable to do so; for example, a patient might be able to continue to walk and talk normally for a period of time, and then the patient's condition could deteriorate very quickly;
- In contrast, older adults may show signs of decompensation earlier and more gradually as their organ systems may not be able to compensate as well;
- As an ACP, the Complainant is trained to recognize "decompensation" in a patient and how decompensation might present in different circumstances;
- The Complainant was put in a difficult position when the delay in having a FF-PCP accompany the ambulance was occurring. Had he left the scene without having a second paramedic in the ambulance, and the patient suddenly decompensated *en route*, he would not be able to take interventions which could be life-saving; conversely, the delay itself was also placing the patient at risk.

With respect to the ACP being the medical authority on scene, the Medical Director stated that:

- b. A direction made by an ACP to a PCP is not optional nor dependent on the authorization of Witness 1 unless there was an overriding safety issue at the scene, and his authority should not have been challenged;
- c. An ACP is the only decision-maker as it relates to triaging the patient.

The Medical Director, the Deputy Chief and Witness 15 concur that:

- a. Witness 3 should have been wearing all required PPE;
- b. The Complainant as ACP should have received assistance with the patient without delay once the request was made.

While reviewing the video footage of the call, Witness 3 acknowledged that:

- He didn't have any medical equipment with him upon exiting the video;
- He was not wearing his protective eyewear upon exiting the vehicle;
- When observed on the video to be shaking his head after the patient was loaded, Witness 3 asserted that he did not know what this head shake referred to;
- There was no equipment with him when returning to the apparatus.

While reviewing the video footage of the call, Witness 1 acknowledged that:

- The rescue unit crew members didn't remove any medical equipment from the apparatus;
- Witness 3 was not wearing his protective eyewear upon exiting the apparatus at the time of arrival;
- There was no equipment returned to the apparatus by any members of the rescue unit.

In the Respondent's second interview, he asserted that he "misremembered" that there was no equipment taken off of the truck. When asked if he and any of the other members of the rescue unit discussed a common narrative with respect to this issue he denied that this occurred.

The Investigator finds it implausible that all four members of the crew have asserted the same explanation for the delay, when none of the four crew members' respective narratives accord with the video evidence. Accordingly, the Investigator finds that the members of the rescue unit, and in particular the Respondent, Witness 3 and Witness 2 agreed upon a common narrative to be presented to the Investigator with the intent to obstruct the investigation of the Complainant's complaint. The Investigator makes no finding as to the intention of Witness 1 in adopting the same explanation as at least some facts upon which this finding is based are outside of his direct knowledge.

Reason for the Delay – Witness 3's Protective Eyewear

In addition to the assertion made by Witness 3 that his protective eyewear slipped between the seats of the apparatus as he was putting it away, a different explanation for

never left the apparatus, it would be impossible to complete the tasks Witness 3 asserted he completed in the 14-second period between Witness 3's arrival at the apparatus and the Respondent's as evidenced in the video footage;

is demonstrably false as confirmed by the video evidence.

As previously stated herein, Witness 3 is seen on the video evidence to shake his head in the negative after the patient was loaded and is then seen to walk slowly back to the rescue apparatus.

Witness 3 also stated, "Maybe I shouldn't have assumed, but I thought [the Respondent] is junior to me and I assumed, you know, he was just going to be going in if needed". Given the evidence of Witness 1 that the Respondent was the assigned driver that shift, the Investigator finds that Witness 1's motivation in sending the Respondent to get Witness 3 was related to the assignment of roles at the commencement of the shift, coupled with his belief that the call was not urgent thereby justifying the delay in his own mind. Given that Witness 1 is not trained as a paramedic, the assumption that the call was not urgent is understandable, but inaccurate.

Considering the totality of the foregoing evidence, and in the absence of any credible explanation for Witness 3's actions during the call, the Investigator finds that it was more likely than not (on the balance of probabilities) that Witness 3 was aware of the request that he accompany the ambulance prior to returning to the apparatus and that he refused to do so as a result of the racial animus he bore towards the Complainant.

Motivations of the Respondent

Having found that the Respondent failed to render assistance to the Complainant at the scene, the Investigator now turns to the motivation on the Respondent's part for doing so.

The available evidence permits two possibilities:

1. The Respondent's honest belief that the call was not urgent based on his assessment of the patient, thereby rendering the delay reasonable in his view;
2. The Respondent was motivated by personal animus toward the Complainant.

As to the first possibility, and based on the information from Witness 15, Witness 5 and the Medical Director, as a licensed primary care paramedic the Respondent should have known that:

- It is not relevant whether the injury was a laceration or an injury caused by a stabbing motion, both are considered penetrating neck injuries (particularly when, by his own account, the injury had reached the deep tissue);
- The amount of blood loss was not relevant to the urgency with which the patient needed to obtain medical assessment and treatment;
- Any penetrating injury to the neck, chest or abdomen comes with a high suspicion of criticality and requires transport on a CTAS 2 basis.

The Respondent was also aware that the Complainant was the medical authority on scene and, even if the Respondent disagreed with the Complainant's assessment of the patient, it was not permissible for him to second-guess it. In other words, even if he disagreed, the Respondent ought to have conducted himself according to existing protocols.

If in fact the Respondent had the honest belief that the injury was non-urgent, he raises concerns with respect to his own competence as a paramedic. Moreover, this first possibility nevertheless fails to address the impropriety of the Respondent's questioning and disregarding the Complainant's authority at the scene.

The Respondent was generally aware of the Complainant's prior complaints with respect to allegedly racist social media posts due to his position on the executive of the UFFW. In addition, the Respondent also acted as the union representative for one of the WFPS members having made posts which were alleged to be racist. The Investigator did not hear information relating to the Respondent's role as a representative for the member as there is no relevance to the subject matter at issue here. The Investigator did, however, question the Respondent with respect to his personal beliefs and attitudes.

During his interviews, the Respondent stated that being called a racist is a "stain that doesn't go away" in relation to the seriousness of being subjected to such accusations. the Respondent also referred to the allegations of racism in connection with this incident

going from a respectful workplace complaint to the front page of the Winnipeg Free Press as "disgusting". The Respondent also acknowledged that he was aware of the article published in the Winnipeg Free Press relating to the allegedly racist Facebook posts on September 23, 2020.

In his first interview, the Respondent expressed that he did not think that the posts were, in fact, racist. In his second interview, the Respondent expressed his personal view that he found the posts made by the member for whom he provided representation to be "extremely right wing" and disagreed personally with some of the content posted by the member.

When asked specifically as to whether the Respondent in his personal capacity believed the complaint made by the Complainant was reasonable or unreasonable, the Respondent would not answer directly, but acknowledged that "some of the content was worth a look".

In considering the totality of the evidence, including:

- The Respondent's general and specific knowledge of the substance of the Complainant's complaints relating to the social media activity of certain WFPS members;
- His own belief that the posts of the member he represented were not racist;
- His belief that the publication of the current allegations of racism in the Winnipeg Free Press were "disgusting" as it related to this incident;
- His knowledge of a prior Winnipeg Free Press article relating to complaints of racism made by the Complainant;
- The Respondent's dishonesty during the course of this investigation with respect to key events;
- The Respondent's admission to Witness 15 almost immediately after the call took place that there had been racial conflict between the Complainant and Witness 3 in the past which influenced Witness 3's conduct at the scene; and

In addition, the Respondent, by his own account, did nothing to voluntarily render assistance in the back of the ambulance other than to hand the Complainant an IV line. He did not take over putting pressure of the wound from the patient herself while the Complainant conducted interventions that required the use of both of his hands.

These actions have not been considered by the Investigator as part and parcel of the breach of the Respectful Workplace Administrative Standard or the Code of Conduct. The Respondent's failure, however, to take over putting pressure on the wound from the patient (having provided no other patient care which would prevent him from doing so) also denotes a lack of concern on his part for the patient's physical and emotional wellbeing.

This lack of concern is indicative of the presence of implicit bias on the basis of the social standing and/or the race/indigeneity of the patient. Just as the Respondent's assertions as to his assessment of the seriousness of the wound are not relevant to the proper triaging of the patient, nor are they relevant to his obligation to treat every patient with compassion and respect.

The Investigator wishes to make clear that, having identified areas where implicit bias was likely present during the call, this is not a matter which ought to be resolved by way of discipline nor are these findings relating to alleged breaches of the Code of Conduct or the Respectful Workplace Administrative Standard. The remediation of implicit biases requires a willingness on the part of WFPS employees to embrace education with a view to improving relationships between coworkers as well as improving patient care, so that they may each become equipped to recognize when implicit biases may be unconsciously affecting their assessments and actions.

The WFPS had previously identified the need to offer ongoing training to disrupt both overt expressions of racism on the part of its employees as well as training to address the effects of implicit biases (racial or otherwise) held by all persons in our society, including those who are members of the WFPS. The Investigator endorses this approach. The Investigator during several interviews observed a significant level of discomfort about the very subject of racism and in particular with respect to any member being labelled "a

- The Respondent's decision to disobey orders from the Complainant and substitute his judgement for the Complainant's;

the Investigator finds that the Respondent's failure to voluntarily take steps to assist the Complainant until he was ordered to do so by Witness 1 was more likely than not the result of personal animus arising from the Respondent's knowledge of the Complainant's previous complaints of racism. Accordingly, the Investigator finds that the Respondent's conduct in its totality, including his failure to assist the Complainant upon arrival at HSC to be, minimally, retaliatory within the meaning of the Respectful Workplace Administrative Standard.

Implicit bias

The Respondent has asserted that the Complainant made a false accusation in his email to Chief Lane dated October 8, 2020 when he referred to the patient's indigeneity as a potential factor in the quality of treatment the patient received and/or in the delay caused. Based on the totality of the evidence, the Investigator has identified the patient's social standing/race/indigeneity as the likely subject of implicit bias² that affected the conduct of some members that night, including that of the Respondent, and accordingly the Respondent's complaint in this regard is not substantiated.

While the Investigator is not prepared to find that the Respondent harboured personal animus towards the Complainant as a direct result of the Complainant's race or perceived race, there are signs of implicit racial bias towards the Complainant in the form of questioning – and dismissing – the judgment of the Complainant as the medical authority on the scene.

² Conscious Bias (also known as Explicit Bias) refers to the attitudes and beliefs we hold about a person or group on a conscious level. Unconscious Bias (or Implicit Bias) refers to prejudices that arise from the internalization of messages we receive from those "cultural waters" referred to by Dr. DiAngelo, but of which we are unaware. The term "implicit bias" is used to describe when we have attitudes towards people or associate stereotypes with them without our conscious knowledge...the mind sciences have found that most of our actions occur without our conscious thoughts, allowing us to function in our extraordinarily complex world. This means, however, that our implicit biases often predict how we'll behave more accurately than our conscious values (*The Perception Institute* (n.d.) <https://perception.org/>, retrieved from July 2020).

Issue III: Did the Respondent engage in retaliation against the Complainant by posting his name and a statement asserting he shared information with the Winnipeg Free Press about the call?

The Complainant has asserted that it was the Respondent who posted anonymously to the Trade Centre Facebook page naming the Complainant as the “whistleblower” who leaked his October 8, 2020 email to the Winnipeg Free Press.

The Trade Centre Facebook group was private. To be accepted into the group, questions were posted, including a request for the proposed new member’s registration number. The page’s administrator, Witness 11, stated that the answers to questions posed to prospective members of the group were optional. He stated that he simply accepted the request of an anonymous person onto the page automatically and without confirming the identity.

The Investigator reviewed an exchange of text messages between the Complainant and Witness 11 in which the Complainant named the person who posted as the Respondent. In the messages, Witness 11 did not deny that the Respondent had done so, saying instead that he did not wish to be involved. The Investigator views this as an implicit acknowledgement that the Respondent did create the post.

In his interview, Witness 11 did not present credibly in his assertions that he simply accepted a request from an anonymous person using the name “Winnipeg Firefighter” to join the Trade Centre private Facebook group even though the request for admission included questions to be answered and a registration number to be provided. Witness 11 also stated that he did not want anything to do with allegations of racism and it is the view of the Investigator that this is a reflection that the general culture within the WFPS is not to be, in the words of Witness 1, “a rat”. The Investigator finds that Witness 11 was likely aware of who made the post naming the Complainant notwithstanding his denials.

When Witness 11 provided a copy of the text messages between himself and the Complainant, there was one additional text which he received from the Complainant that was left out when the text messages were provided by the Complainant to the Investigator. That message said “and thank him [the Respondent] for the paid time off”.