



# Report to the Minister of Justice and Solicitor General Public Fatality Inquiry

*Fatality Inquiries Act*

WHEREAS a Public Inquiry was held at the Law Courts Building  
in the City of Edmonton, in the Province of Alberta,  
(City, Town or Village) (Name of City, Town, Village)  
on the 17<sup>th</sup> to 18<sup>th</sup> days of December, 2018, (and by adjournment  
year  
on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_),  
year  
before Jody J. Moher, a Provincial Court Judge,  
into the death of Dante Michael Lawrason 18  
(Name in Full) (Age)  
of Edmonton and the following findings were made:  
(Residence)

**Date and Time of Death:** 21 January 2017 between 6:34 AM and 7:40 PM

**Place:** #5, 11925 - 34 Street NW, Edmonton, Alberta

### Medical Cause of Death:

("cause of death" means the medical cause of death according to the International Statistical Classification of Diseases, Injuries and Causes of Death as last revised by the International Conference assembled for that purpose and published by the World Health Organization – *Fatality Inquiries Act*, Section 1(d)).

Oxycodone and methamphetamine toxicity

### Manner of Death:

("manner of death" means the mode or method of death whether natural, homicidal, suicidal, accidental, unclassifiable or undeterminable – *Fatality Inquiries Act*, Section 1(h)).

Accidental overdose

**FORWORD:**

In compliance with the *Child, Youth and Family Enhancement Act*, identifying information has been redacted, as follows:

- “P” is Dante’s oldest sister.

**Introduction**

A Public Fatality Inquiry (*Fatality Inquiry or Inquiry*) was ordered by the Fatality Review Board in the aftermath of the death of Dante Michael Lawrason (*Dante*) pursuant to section 33(2) of the *Fatality Inquiries Act*, RSA 2000, c F-9 (*Fatality Inquiries Act or Act*).

A Fatality Inquiry was held from December 17 to 18, 2018, inclusive. Ms. Jennifer Stengel was inquiry counsel appointed pursuant to section 35.1 of the *Act*. At the Pre-Inquiry Conference, Children’s Services was granted interested party status pursuant to section 49(2)(d) of the *Act*. Children’s Services was represented by Ms. Jo-An Christiansen. Both Dante’s mother, Kathleen Lawrason, and his oldest sister, P, as his next of kin under the *Act* participated in the Inquiry.

The Inquiry heard from 6 witnesses over the course of 2 days:

1. Detective Daniel van den Berg, the Edmonton Police Service officer who investigated Dante’s death;
2. Dr. Sarah Matthews, the psychiatrist who saw Dante 4 times in the period from June to August of 2016, the last occasion being August 26, 2016, less than 5 months before his death;
3. Ms. Kathryn S. Wilson, the Children’s Service’s caseworker responsible for Dante in the period immediately prior to his death inasmuch as Dante was in and out of care from age 4 to nearly age 17;
4. S. L., Dante’s girlfriend who was with him when he died;
5. Kathleen Lawrason, Dante’s mother; and
6. P, Dante’s oldest sister.

The Inquiry also reviewed 4 exhibits:

- Exhibit 1 – an Agreed Exhibit Binder with in excess of 300 pages of documents;
- Exhibit 2 – an Emergency Protection Order filed on August 27, 2018, involving P as applicant and Kathleen Lawrason as respondent;
- Exhibit 3 – the Curriculum Vitae for the caseworker, Ms. Kathryn Wilson; and,
- Exhibit 4 – the Curriculum Vitae for the psychiatrist, Dr. Sarah Matthews.

**Circumstances under which Death occurred:**

On January 21, 2017 Dante Lawrason died of oxycodone and methamphetamine toxicity, having consumed a fatal combination of methamphetamine and his mother’s prescription medication. Dante died approximately 5 months after his 18<sup>th</sup> birthday in his mother’s apartment.

## Background

Dante was born on August 12, 1998, the second youngest of 6 children born to Kathleen Lawrason. Kathleen Lawrason was unable to meet the needs of her children from a number of different perspectives. Ms. Lawrason was unable to meet her children's physical and emotional needs as she struggled with addictions and a variety of physical and significant mental health issues. There was an extensive history of child welfare involvement with the Lawrason family for more than a decade before Dante was born.

The first screening by Child and Family Services, as it was then, involving Dante was on September 5, 2002 when he was 4 years old when his mother attempted suicide in his immediate presence. Dante was first apprehended on October 13, 2010 and was placed in a succession of approved placements including foster, group and kinship care homes. As well, there were a number of Temporary Guardianship orders in place. Dante was in and out of government care until approximately age 16.

The Director applied for a Permanent Guardianship Order in July of 2012. The application was ultimately abandoned following Judicial Dispute Resolution on November 26, 2013. The Temporary Guardianship Order was terminated and the Director's application for a Permanent Guardianship Order was withdrawn in court on September 2, 2014.

Prior to his death Dante was most recently involved with Child and Family Services, now Children's Services, between 2010 and 2015. Children's Services closed Dante's file as of June 2, 2015 when Dante's last Enhancement Agreement with a Youth expired.

Dante was living with his mother, Kathleen Lawrason, in the year and a half before his death. Dante's mother testified that in that period Dante was not working and he was not attending school; he was "getting into trouble". Dante was repeatedly incarcerated at Edmonton Young Offender Centre (EYOC) during late 2014 and early 2015. After his 18<sup>th</sup> birthday, he was remanded at the Edmonton Remand Centre when he was arrested. As well, Dante was using illegal street drugs, including methamphetamine.

In the 18 months preceding his death, Dante continued to be frequently involved with the criminal justice system. In 2015 Dante was flagged by the Edmonton Police Service (EPS) as a young person at risk, a member of 'Y50'. The 'Y50' is a list compiled by the EPS of the 50 young persons in the city of Edmonton at greatest risk of criminal recidivism given their significant involvement in criminal activity in terms of the number and seriousness of offences as well as their socio-economic and family situation. The focus of the EPS 'Y50' program is twofold: firstly, monitoring, enforcement and surveillance of these young offenders, and secondly, offering intervention and support following every interface. Dante had formed a relationship with EPS Cst. Brandon Crozier, who was part of the Southeast Edmonton Offender Management Program including the 'Y50' program through EPS.

Dante was described in the Child and Family Services file as a "High Risk Youth", involved in "criminal activity, suspected drug use and drug trafficking, transient and refus[ing] placement [with] violent behaviors". Repeatedly plans were articulated in the Child and Family Services' file to assign or transition Dante to "High Risk Worker" in Edmonton. Dante expressed willingness to work with a High Risk Worker.

Dr. Sarah Matthews is a psychiatrist who worked at EYOC for more than a decade, providing screening and treatment for mental health issues of young persons in custody. Dr. Matthews saw Dante at his request on 4 occasions, specifically June 6 and 20, 2016, July 18, 2016 and finally on August 26, 2016.

Following her assessment, Dr. Matthews concluded there was no evidence of psychiatric illness, opining that Dante was not depressed, suicidal, despondent or hopeless. It was her opinion that Dante's issues at the time were environmental and social issues; he needed "talk therapy" and a network of supports as he was anxious about his life as he transitioned to adulthood. Dr. Matthews prescribed a short term course of anti-anxiety medication, which was discontinued in August of 2016. Dr. Matthews described Dante as "bright and capable" and noted that Dante was offered and declined other interventions or supports at the time of his last release from the EYOC.

At the time of his death Dante had never had gainful lawful employment. He was an intelligent young man, but was anxious about the transition to adulthood. He expressed concerns that he had "no job, no money and no car". He discussed his obvious difficulty transitioning to adulthood with his mother, his Child and Family Services worker Kathryn Wilson, and Dr. Matthews.

Dante and his mother were offered supports in the community. Ms. Wilson endeavoured to work on safety planning for Dante, aware that Kathleen Lawrason's mental health and addictions issues "were too stressful for Dante to deal with". After Dante turned 16, there was a Transition to Independence Plan, which involved goal setting discussions between Dante and Ms. Wilson.

As well, Dante had a succession of Youth Enhancement Agreements with Child and Family Services between approximately June 10, 2014 and June 2, 2015, each approximately 3 months in duration. The Youth Enhancement Agreements offered minimal financial support, limited to vouchers for groceries, hygiene products and school supplies.

Kathleen Lawrason repeatedly declined or refused assistance from Child and Family Services. She resented the intrusion of Child and Family Services in her family and at some point advised Ms. Wilson that she would rather see Dante serve out his time in custody at EYOC than him be placed in an approved care home.

Dante, too, appeared reluctant to accept offered assistance, unable or unwilling to acknowledge he needed supports or that he would benefit from supports. Assistance was offered in terms of housing, employment and education. At the Inquiry, Ms. Wilson acknowledged that given the fact Dante's life was unstable and unpredictable, it would have been difficult for him to access the services offered.

There were repeated notations in the Child and Family Services' file that a referral would be made to a High Risk Youth Worker, Peter Smyth. Dante expressed a willingness to work with a High Risk Worker. Although Dante was placed on the 'wait list' for assignment to a High Risk Worker, Ms. Wilson advised the Inquiry that the referral did not ever materialize. Ms. Wilson also advised that team meetings with all interested participants as part of transition planning for young persons aging out of the child welfare system were "not common", happening only infrequently.

### **The Last 24 Hours of Dante Lawrason's Life**

On January 20, 2017 at approximately 9:00 PM, EPS received an anonymous call to 911 indicating that Dante was 'overdosing'; he had taken "too many" sleeping pills. EPS officers were dispatched to the Lawrason residence. Kathleen Lawrason refused entry to the police officers, advising that Dante was in bed, was fine, and did not require medical intervention or assistance.

Later that same evening Dante got up, called his girlfriend, S.L., to come over and the 2 of them ate fried chicken. After the young couple ate, they began arguing about their relationship, about their drug use and about using a knife to self-harm as both of them engaged in 'cutting behaviors'. Dante and S.L. argued for several hours in Dante's bedroom. Dante was agitated and unable to sleep. Dante knew his mother had a significant supply of prescription pills in the apartment, which he frequently accessed with and without his mother's knowledge or permission.

Kathleen Lawrason had a longstanding, documented dependence on prescription medication, including opioids and benzodiazepines. She testified she had a single family physician at the Beverly Towne Medical Clinic. She was prescribed significant quantities of benzodiazepines, and opioids including oxycodone.

Kathleen Lawrason, by her own admission, was not using all the medication, stockpiling significant quantities of prescription medications, including the medications taken by Dante leading to his death. Dante had ready access to his mother's prescription medication. In the hours after Dante's death, Kathleen Lawrason advised police that Dante must have taken most of each of her recent prescriptions for Oxyneo and Oxycet.

In the early morning hours of January 21, 2017, Dante obtained a significant quantity of his mother's prescription pills from her bedroom. Dante offered at least one prescription pill to S.L.. S.L. took the prescription medication and rapidly fell into a deep sleep in Dante's bed in his bedroom.

According to the Toxicology Report, prior to his death Dante had consumed prescription pills, including a significant quantity of oxycodone, and lesser amounts of clonazepam, gabapentin, lamotrigine and mirtazapine. As well, it is clear from the Toxicology Report that Dante had consumed significant quantities of methamphetamine. He smoked methamphetamine and a 'meth pipe' was found in his room on his bedside table. Dante then crawled into his bed and fell asleep.

At approximately 7:40 PM on January 21, 2017 S.L. woke up to find Dante cold and unmoving. Kathleen Lawrason called 911 and emergency services attended at the apartment. Dante Lawrason was pronounced dead by staff from the Medical Examiner's Office.

The Medical Examiner's Report indicated that Dante had a past medical and psychosocial history that included depression, suicidal ideation and previous cutting behavior. Toxicology testing was undertaken as part of the autopsy. The Report indicated the post-mortem presence of oxycodone, methamphetamine, amphetamine, clonazepam, aminoclozepam, gabapentin, lamotrigine and mirtazapine.

The Toxicology Report authored by Dr. Graham Jones dated April 16, 2017 confirmed that the testing evidenced:

“[T]he use of oxycodone and methamphetamine prior to death. The recreational use of either of these drugs may prove fatal through their effects unto the central nervous, cardiovascular, and/or respiratory systems and drug toxicity may be enhanced when drugs are used in combination.”

There are so-called “synergistic enhancements”, such that the combined effects of the drugs are exaggerated. It was Dr. Jones’ opinion that “in the present case, in the absence of adequate tolerance, the combination of drugs could be considered potentially life-threatening.”

Methamphetamine is a potent central nervous system stimulant which is generally smoked, but can be injected. Amphetamine is a derivative or metabolite of methamphetamine and a drug in its own right. Oxycodone is an analgesic or pain medication. It is described as a potent pain medication for moderate to severe pain. Clonazepam and aminoclozapam are benzodiazepines, which are central nervous system depressants. Opioids and benzodiazepines are both notorious for their addictive potential as well as the high risk for abuse and diversion. Both drug groups are part of the College of Physicians and Surgeons of Alberta’s Triplicate Prescription Program (*TPP*).

According to Detective van den Berg, the EPS investigation concluded that Dante Lawrason died as a result of a “self-administered prescription pill overdose.” As well it was his conclusion that “Kathleen’s decision not to use her medications is enabling prescription pill abuse in her home.”

Detective van den Berg testified that in the immediate aftermath of Dante’s death, EPS officers seized a Ziploc bag from Kathleen Lawrason’s bedroom containing approximately 600 prescription pills. The prescription medication included OxyContin, OxyNeo, zopiclone, venlafaxine, citalopram, clonazepam, gabapentin, lamotrigine, mirtazapine and omeprazole. As well, there were numerous bottles and blister packs of Kathleen Lawrason’s’ other prescription medications which were unused.

### **Recommendations for the prevention of similar deaths**

Dante Lawrason’s death was undeniably tragic. He was an intelligent young man with significant potential. At the time of his death, he was just months passed his 18<sup>th</sup> birthday. By all reports he was struggling with the transition to adulthood.

Dante was a victim of intergenerational pathology with his family history including significant mental health issues, addictions, poverty, and failure to access available social services and community resources. Efforts were made by Child and Family Services (now Children’s Services), probation, health care professionals at EYOC and in the community, and the Edmonton Police Service to provide resources and supports to this young man.

As envisaged by section 53(2) of the *Fatality Inquiries Act*, several recommendations are appropriate in terms of possibly preventing similar deaths.

The first recommendation is that Alberta Children’s Services, police agencies including the Edmonton Police Service, and Community Corrections and Probation work cooperatively to address the unique needs of high risk youth in our communities. As members of this vulnerable population transition out of the child welfare system and into adulthood, a collaborative approach is necessary to facilitate a successful transition.

Children’s Services should ensure there are adequate high risk youth specialists to assist this population and to liaise with other community resources to provide the supports and connections necessary to address issues prevalent among this population, including homelessness, addictions, lack of education, lack of employment and continued involvement with the criminal justice system.

The second recommendation is that there continues to be a pressing need for ongoing and heightened vigilance, monitoring, oversight and education for health care professionals regarding the overuse, misuse and diversion of opioid pain medication. The term diversion refers to the transfer of any legally prescribed drug from the individual for whom it was prescribed to another person for personal or illicit use.

Physicians and pharmacists are in many respects the ‘gatekeepers’ in terms of prescription medications. The College of Physicians and Surgeons adopted a new Standard of Practice for Prescribing Opioids and other Drugs with the Potential for Misuse or Diversion effective April 1, 2017. The name of the Standard of Practice was changed on September 6, 2018 to Prescribing Drugs Associated with Substance Use Disorders or Substance-Related Harm, but there were no changes to the substance or content of the Standard. The Triplicate Prescription Program for drugs prone to misuse and diversion, including oxycodone, has been in place for more than 30 years. The Opioid Dependency hotline provides ready telephone access to an opioid dependency specialist to assist front line caregivers dealing with patients struggling or at risk for opioid dependency. These excellent programs and new initiatives are crucial to address the human and societal cost of opioid misuse, abuse and diversion in our province.

All of which is respectfully submitted.

DATED February 25 , 2019 ,

at Edmonton , Alberta.

*Original signed*

Jody J. Moher

A Judge of the Provincial Court of Alberta