



CANADA
Northwest Territories
Territoires du Nord-Ouest

VERDICT OF CORONER'S JURY
VERDICT DU JURY DU CORONER

As a result of an inquest into the death of
Suite à l'enquête sur le décès de

27-
the 28 day of SEPTEMBER, 20 16 at FORTSMITH
le 28 jour de SEPTEMBER, 20 16 à : FORTSMITH

WILFRED
given names of deceased / prénom(s)

ENILE
surname of deceased / nom

held on
qui s'est tenue

in the Northwest Territories, we the jurors have considered the evidence and make the following determinations:
aux Territoires du Nord-Ouest, nous les jurés avons examiné la preuve et sommes arrivés aux conclusions suivantes :

1. Identity of deceased:
Identité du défunt (ou de la défunte) : WILFRED ENILE
2. Date and time of death:
Date et heure du décès : OCTOBER 26, 2015 AT 03:45
3. Place of death:
Lieu du décès : FORT SMITH HEALTH CENTRE, FORT SMITH
community or approximate geographic location and name of hospital or institution, or description of place where death occurred
collectivité ou emplacement géographique approximatif et nom de l'hôpital ou de l'établissement - ou description de l'endroit où le décès est survenu

4. Cause of death: / Cause du décès : Part I / Partie I

Immediate cause of death / Cause terminale du décès

(a) COMPLICATIONS OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE
(due to, or as a consequence of / en raison de ou suite à)

Antecedent causes, if any, giving rise to the immediate cause (a) above, stating the underlying cause last:

(b) _____
(due to, or as a consequence of / en raison de ou suite à)

Inscrivez, s'il y a lieu, les causes antécédentes du décès qui ont conduit à la cause terminale inscrite à l'allineé (a), en nommant la cause initiale en dernier lieu :

(c) _____
(due to, or as a consequence of / en raison de ou suite à)

(d) _____

Part II / Partie II

Other significant conditions contributing to death but not causally related to the immediate cause (a) above:

Autre facteurs déterminants qui ont contribué au décès mais n'ont pas de lien causal avec la cause terminale inscrite à l'allineé (a) :

5. Manner of death:
Façon dont la mort est survenue : NATURAL

6. Circumstances under which death occurred (use Supplementary Information form NWT8245 if necessary):
Circonstances entourant le décès (Utiliser la formule Information supplémentaire NWT8245 si nécessaire) : _____

PLEASE REFER TO SUPPLEMENTARY INFORMATION FOR NWT8245

7. *Recommendations to be attached - use form "Jurors' Recommendations"
*Joindre vos recommandations - utiliser la formule <>Recommandations des jurés<>

Jurors' names - Noms des jurés
(Please print - En lettres moulées)

Signatures

Date
(m/d/y - m/j/a)

<u>HILARY KATHLEEN LEROY</u>	<u>X</u> <u>[Signature]</u>	<u>09/28/2016</u>
<u>DAVE BEAMISH</u>	<u>X</u> <u>Dave Beamish</u>	<u>09/28/2016</u>
<u>Cody Gregory Heron</u>	<u>X</u> <u>Cody</u>	<u>09/28/2016</u>
<u>NICK Curbungi</u>	<u>X</u> <u>Nick Curbungi</u>	<u>09/28/2016</u>
<u>Stephanie Heron</u>	<u>X</u> <u>S. Heron</u>	<u>09/28/2016</u>
<u>Louise Elizabeth Fraser</u>	<u>X</u> <u>L. Fraser</u>	<u>09/28/2016</u>

SUPPLEMENTARY INFORMATION
INFORMATION SUPPLÉMENTAIRE

Name of deceased: WILFRED Given names of deceased / prénoms de la personne décédée
Nom du défunt (ou de la défunte) : ENILE Surname of deceased / nom de la personne décédée

Additional Information re: the above named deceased.
Informations supplémentaires concernant le défunt (ou la défunte) susmentionné(e):
On October 16, 2015 Wilfred Emile was detained for public intoxication. While in custody, Wilfred Emile became unresponsive and an ambulance was called. Mr Emile was booked out of custody and he was transported to the Fort Smith Health Centre, where he received significant medical intervention. In the early morning of October 17, 2015, Wilfred Emile was transported to Royal Alexandra Hospital in Edmonton, AB. He received diagnostic and supportive medical care. On October 21, 2015 Wilfred Emile was transported back to Fort Smith Health Centre to receive palliative care. On October 26, 2015 Wilfred Emile passed away with family present.

NWT0205/200

X

Coroner's signature / Signature du coroner

Notification 1 - Avis 1



CANADA
Northern Territories
Territoires du
Nord-Ouest

JURORS' RECOMMENDATIONS RECOMMANDATIONS DES JURÉS

Note: To be used as an attachment for form - "Verdict of Coroner's Jury" only. (Use as many of these forms as you may need)
Nota: Utiliser comme pièce jointe pour la formule <<Verdict du jury du coroner>>. (Utiliser autant de formules que nécessaire).

As a result of an inquest into the death of
Suite à l'enquête sur le décès de

Wilfred

[given names of deceased / prénom(s)]

Emile

(surname of deceased / nom)

We, the jurors submit the following recommendations:
Nous, les jurés soumettent les recommandations suivantes:

- Within one calendar year of this inquest, The Royal Canadian Mounted Police and the Department of Health and Social Services, will, in consultation with relevant stakeholders in the Town of Fort Smith, including citizens without agency, establish a mutually agreed upon procedure for dealing with individuals displaying symptoms consistent with a dangerous level of intoxication.
- The Royal Canadian Mounted Police and the Department of Health and Social Services will ensure this mutually agreed upon procedure is clearly communicated to officers and health workers, as well as public welfare and housing providers and other interested citizens in the Town of Fort Smith.

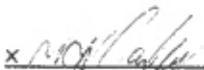
Signatures - All jurors to sign
Signatures - Tous les jurés doivent signer


Wilfred


Dave Beaman


Stephanie

Form 6 / Formula 6
NW74015/1203


Wilfred


Stephanie


Stephanie

Chief Coroner - Coroner en chef

