

State of Connecticut
OFFICE OF INSPECTOR GENERAL



Report Concerning
The Death of Robert Scott Brown on October 31, 2023
While in the Custody of the Wolcott Police Department

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Inspector General

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Acknowledgements

The Office of Inspector General acknowledges the assistance provided to this investigation by the following:

Wolcott Police Department

Bristol Police Department

Department of Emergency Services and Public Protection, Western District Major Crime Squad

Office of the Chief Medical Examiner

INTRODUCTION

On October 31, 2023, at 5:04 a.m., Robert Scott Brown¹ died while in the custody of the Wolcott Police Department. As required by statute², the Office of Inspector General (OIG) investigated this in-custody death. The results of this investigation are contained in this report.

At approximately 3:43 a.m. on October 31, 2023, Wolcott police were dispatched to 8 Tyrell Drive on a report of a male having a psychiatric issue who had broken a window. Upon arrival, police found Robert Scott Brown on the floor of a bedroom in a pool of blood. He had multiple self-inflicted wounds to his torso and limbs. Brown resisted officers' efforts to get him medical help. He slashed at the officers, first with a razor and later with a large saw. Officers continued to seek Brown's cooperation for approximately thirty minutes. When additional officers arrived from the Bristol Police Department, the decision was made to attempt a TASER deployment and simultaneously have multiple officers move in to take Brown into custody. Using this plan, officers successfully took Brown into custody and got him into an ambulance. Due to the extensive loss of blood, however, Brown lost all vital signs while in the ambulance on the trip to Saint Mary's Hospital. He was pronounced dead within minutes of his arrival at the Emergency Department.

The investigation establishes that Brown's death was not due to any use of force by the police, nor did Brown die as a result of criminal action not involving the use of force by the police. The investigation supports the conclusion of the Office of the Chief Medical Examiner that the cause of Brown's death was suicide.

INVESTIGATION

Police Reports / Statements

Officer John O'Dea

Officer O'Dea responded to 8 Tyrell Drive, Wolcott during the early morning hours of October 31, 2023. He first met with Joyce Swodtich, Brown's mother. Who said that Robert had destroyed his room and was lying on the ground.

¹ On October 31, 2023, Robert Scott Brown was a Caucasian male, age 52.

² General Statutes §51-277(a)(2)(A), in relevant part, provides: "...[W]henever a person dies in the custody of a peace officer or law enforcement agency, the Inspector General shall investigate and determine whether physical force was used by a peace officer upon the deceased person, and if so, whether the use of force was justifiable under section 53a-22. If the Inspector General determines that the deceased person may have died as a result of possible criminal action not involving the use of force by a peace officer, the Inspector General shall refer such case to the Chief State's Attorney or a state's attorney for potential prosecution."

Officer O'Dea and Officer Michael Relva approached the room. They noticed blood on the door jamb leading into the bedroom. The room was in disarray with items tossed and strewn about. The windows were broken. There was a large amount of blood on the floor and nonsensical words written on the wall in what appeared to be blood. Brown was lying in the corner of the room. Next to him was a flipped over bed frame. He had a wound to his neck.

Officers O'Dea and Relva cleared away the furniture that blocked the entrance to the room. Brown stood up. He held a razor blade in his right hand. He was pale and losing blood; both sides of his neck appeared to be slashed open. When Officer Relva unholstered his gun, Brown told Officer Relva to shoot him. Brown seemed incoherent. He was swinging the razor blade in the direction of the officers.

At this point, Officer O'Dea unsuccessfully attempted a TASER deployment. The TASER cartridge failed to deploy. Officer Relva deployed his TASER and attempted to use a pillow to control the razor blade, but Brown slashed the pillow away. Officer Relva then deployed his TASER a second time. The cycle completed and Officer O'Dea was able to knock the razor from Brown's hand, but Brown remained uncooperative and hostile. After Officer Relva deployed his TASER a third time, Brown fell but he grabbed a large saw and began swinging it wildly. The officers then exited the room.

Throughout this time, Officers O'Dea and Relva pleaded with Brown to drop the weapon that he was holding and cooperate with them so that they could get him to the hospital. None of these efforts were successful. Officer Relva deployed his TASER a fourth time, but Brown used the saw to sever the TASER wires. At this point, the Wolcott police department reached out to nearby police departments for additional less lethal options. While waiting for the other officers to arrive, Officer Relva attempted a fifth TASER deployment intending to incapacitate Brown briefly to disarm him. Again, the TASER did not work as intended.

About twenty-five minutes after Officers O'Dea and Relva arrived at 8 Tyrell Drive, Bristol police officers responded to that location with a beanbag shotgun. In the hallway outside of Brown's room, the officers devised a plan to take Brown into custody, namely, that Officer Relva would use his final TASER cartridge to again try to incapacitate Brown and simultaneously the other officers would rush into the room and place Brown in handcuffs. The plan was executed and despite continued resistance from Brown, he was successfully placed into handcuffs. EMS entered the room and gave Brown a shot of ketamine to calm him down. Using a "mega-mover"³, officers moved Brown out of the room and into an ambulance.

³ A mega-mover is a portable transport sheet used to transfer patients from areas inaccessible to stretchers.

Officer Michael Relva

Officer Relva was dispatched to the scene at 3:43 a.m. on a report of a fifty-three-year-old male having a psychiatric issue who had broken a bedroom window. He responded there along with Officer O'Dea. Once in Brown's bedroom, Officer Relva noticed that pan flute music was continuously playing. He also noticed the blood and disarray described by Officer O'Dea in his report. Officer Relva's report details the efforts to obtain Brown's cooperation and the various efforts undertaken to take him into custody and get him medical aid.

Officer Relva's body-worn camera (BWC) recording depicts the interaction between the officers and Brown. That interaction generally falls into three phases. The first phase is the officers' initial encounter with Brown. The second phase is where the Wolcott officers are awaiting the arrival of the officers from the Bristol PD. This lasts about ten minutes. The final portion of the BWC recording shows the arrival of Bristol officers and the actions of the officers in successfully taking Brown into custody. I have determined that these BWC recordings, while supportive of the officers' efforts to assist Brown, are too graphic for inclusion in this report.

Joyce Swoditch

On October 31, 2023, OIG inspectors interviewed Robert Scott Brown's mother, Joyce Swoditch. Ms. Swoditch lived at 8 Tyrell Drive with her son Robert Scott Brown who was her primary caretaker. Ms. Swoditch stated that Robert had been diagnosed as schizophrenic and had episodes of paranoia. She indicated that lately Robert had not been taking his prescribed mental health medication.

During the evening of October 30, 2023, Robert had been talking and acting weird. He said, "I'm going and you're coming with me." Ms. Swoditch indicated that when Robert said things like that, he meant that he was going to heaven. Ms. Swoditch mentioned that Robert had been suicidal in the past.

During the early morning hours of October 31, 2023, Robert was moving furniture around in his room. Ms. Swoditch heard the sound of glass breaking in Robert's room and she went to check what was going on. Robert was talking gibberish. She then left and when she came back, there was blood on the bedroom floor, Robert had positioned his bed to block the entrance to his room and was starting to throw a chair across the room. She called 911.

When the police arrived, they escorted Ms. Swoditch out of the house and had her wait in a police car.

Hospital Records

Emergency Medical Services (EMS) transported Brown to Saint Mary's Hospital in Waterbury. The EMS note describes Brown's injuries as "self-inflicted slash to left and right side of neck, deep cut on left forearm, and deep laceration of abdominal wall." The note further states that upon arrival the patient was no longer bleeding and there were copious amounts of blood on scene. Patient writing on walls with his blood. Patient combative and required 8 TASER shots. 500mg ketamine administered – patient taken to ambulance. Once in the ambulance, the patient lost all vital signs. The EMS note states "traumatic arrest likely due to exsanguination prior to hospital arrival."

Brown arrived at the hospital on October 31, 2023, at 4:58 a.m. His diagnosis was "suicide by self-inflicted injury by cutting and piercing instrument." Brown showed no response to the E.D. procedures and there was no cardiac motion seen on ultrasound. He was pronounced dead at 5:04 a.m.

The hospital record described a history of depression and schizophrenia and a suicide attempt in 1995. The record further described a history of intravenous drug use and alcohol use. The record also noted that at one point Brown was living at the Greater Bridgeport Mental Health Center.

Autopsy

On November 1, 2023, Associate Medical Examiner Cori Breslauer, M.D., performed an autopsy on Robert Scott Brown. Her report describes the results of the autopsy examination as:

CAUSE OF DEATH: INCISED WOUNDS OF NECK AND LEFT UPPER EXTREMITY

MANNER OF DEATH: SUICIDE (CUT SELF)

In her examination, Doctor Breslauer noted various blunt force injuries on Brown's head, torso, and extremities. For the most part, these are described as superficial abrasions. Some are attributed to the TASER leads.

The report also describes sharp force injuries. These are incised wounds.⁴

Neck

There was an incised wound of the left neck that was 4" long with an estimated depth of $\frac{1}{4}$ - $\frac{3}{4}$ ". The wound did not injure the major vasculature. There was an incised wound of the

⁴ Incises wounds are the result of being cut with a knife type instrument.

right neck that was 5-1/4" long with an estimated depth of 1/4 - 3/4". The wound injured the muscle but there was no injury to the major vasculature.

Torso

There were five incised wounds of the abdomen:

1. An incised wound of the abdomen centered 26-1/2" below the top of the head and 1-1/2" left of the midline. It was 6" long with an estimated depth of 1/4 - 1/2" and demonstrates visible subcutaneous fat.
2. An incised wound of the abdomen centered 28" below the top pf the head and 2-1/2" left of the midline. It was 4" long with an estimated depth of 1/4 - 1/2" and demonstrated visible subcutaneous fat.
3. An incised wound of the abdomen centered 30" below the top of the head and 1-3/4" left of midline. It was 4-3/4" long with an estimated depth of 1/4 - 3/4" and demonstrated visible subcutaneous fat.
4. an incised wound of the abdomen centered 28-1/4" below the top of the head and 1" right of the midline. It was 1-1/4" long with an estimated depth of 1/16 - 1/8" and demonstrated visible subcutaneous fat.
5. An incised wound of the abdomen centered 31" below the top pf the head and 2" right of midline. It is 1-1/2" long with an estimated depth of 1/8 - 1/4" and demonstrated visible subcutaneous fat.

Left Upper Extremity

There were three incised wounds of the left forearm:

1. An incised wound of the distal posterior left forearm centered 21-1/2" below the top of the left shoulder. It was 2-1/2" long with an estimated depth of 1/4 - 1/2" and demonstrated visible subcutaneous fat.
2. An incised wound of the distal anterior left forearm centered 22-1/4" below the top of the left shoulder. It was 3-3/8" long with an estimated depth of 1/4 - 3/4" and demonstrated visible subcutaneous fat and musculature.
3. An incised wound of the distal anterior left forearm centered 24-1/4" below the top pf the left shoulder. It was 3-1/8" long with an estimated depth of 1/4 - 1/2" and demonstrated visible

subcutaneous fat and musculature. Dissection of the surrounding wound showed injury to the radial artery, tendon, and ligament.

Toxicology

Samples of Brown's blood were sent to NMS Labs for toxicological analysis. The results were positive Wellbutrin (an antidepressant), Delta THC, Ketamine, and Oxycodone.

On July 22, 2024, I spoke with Doctor Breslauer about her findings. She indicated that Brown died due to bleeding out from multiple self-inflicted wounds. She noted that the wounds to the neck did not injure any blood vessels and did not result in excessive bleeding. She described the wounds to the abdomen as slash wounds. The wound to the left forearm did hit an artery – but it was small, and bleeding took a while.

Doctor Breslauer did not see the TASER deployments as a factor in Brown's death. Likewise, she did not see the toxicology results as relevant factors in his death. She was aware that the police interacted with Brown for over thirty minutes, creating a long time for him to bleed. She essentially saw the case as a suicide committed by a person suffering mental illness.

Scene

The Connecticut State Police Western District Major Crime Squad processed the scene on October 31, 2023, commencing at 10:33 a.m. The scene was a single-family residence located at 8 Tyrell Drive, Wolcott, CT. It was a split level raised ranch style three-bedroom home with 1242 square feet of living space.



[8 Tyrell Drive, Wolcott, CT]

The principal scene was in the bedroom on the west side of the home that was used by Robert Scott Brown. The floor and many items in the room contained blood-like stains (BLS). The room was in overall deplorable condition with a chair and wicker basket flipped over, various items strewn about, and glass from a smashed double window on the floor. Three of the four panes were smashed.



[Broken Windows]

The four walls contained numerous areas of BLS with incoherent words written on each wall. A blood-soaked paint brush that was found on the bedroom floor was likely used for the writings.



[Writing on Wall]



[Writing on Wall]

Three expended TASER cartridges were found in the room.



[TASER Cartridge]

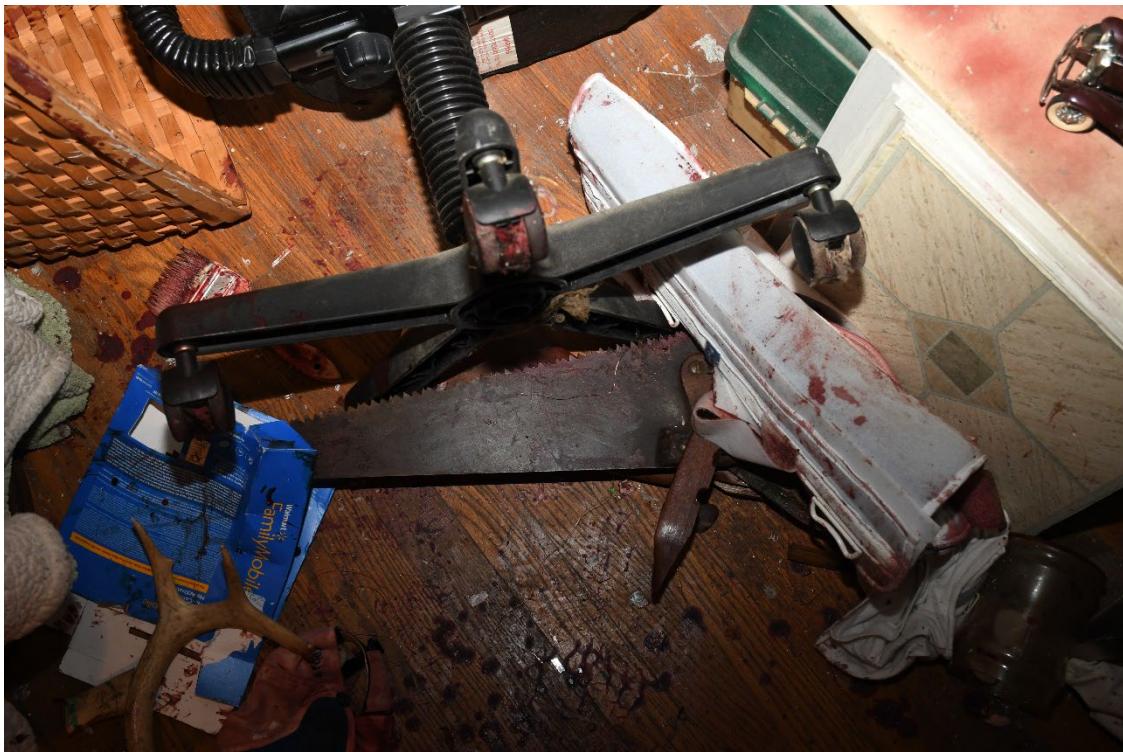


[TASER Cartridge]



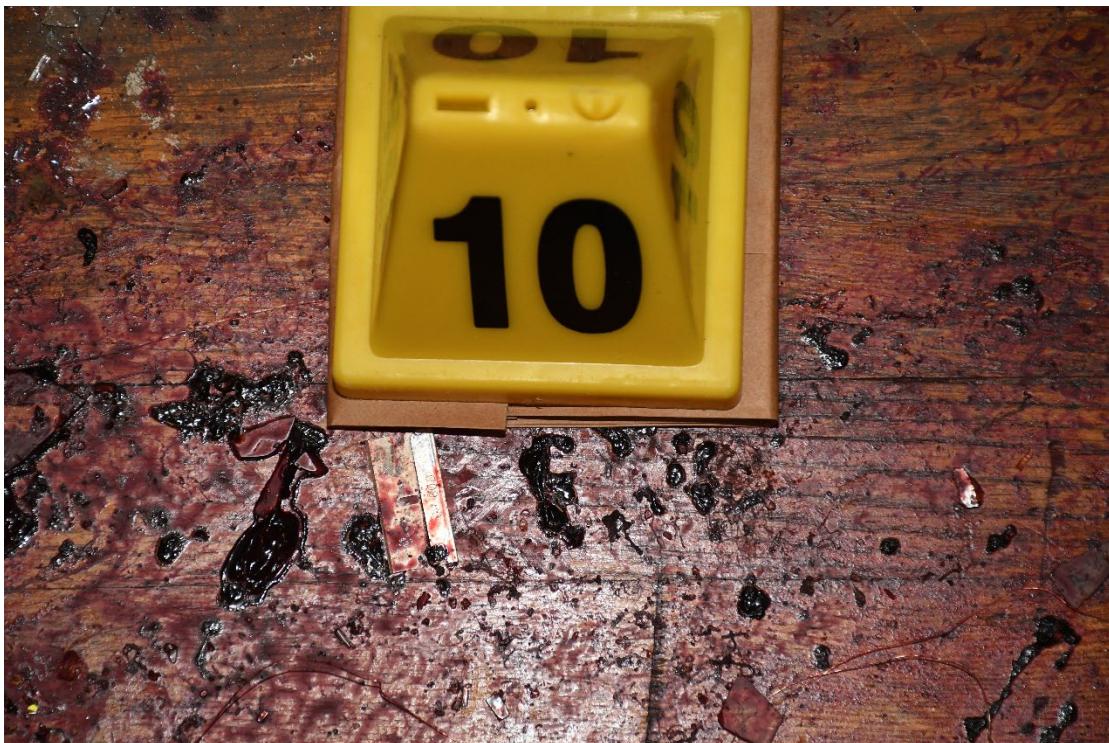
[TASER Cartridge]

A saw with BLS on the blade was on the floor adjacent to an overturned chair,



[Saw]

A single edged razor blade was located on the floor as was a box of single edged blades.



[Razor Blade]



[Box of Razor Blades]

Scene processing concluded at 2:11 p.m.

TASER Reports

A TASER information sheet was provided by AXON Evidence Sync for the TASERS used by Officer O'Dea and Officer Relva. These sheets cover multi-year periods and indicate each date and time that the TASER trigger was pulled and the duration of the deployment. The report does not indicate whether the deployment was successful in achieving neuromuscular incapacitation of the subject.

Officer O'Dea's TASER information sheet states that on October 31, 2023, at 4:11:09 a.m.⁵ the TASER trigger was pulled, and the TASER activated for five seconds. Based on Officer O'Dea's report and the BWC recordings, the TASER cartridge did not deploy the TASER prongs at that time. The AXON sheet reflects no other use of this TASER on October 31, 2023.

The AXON information sheet for Officer Relva reflects five second TASER deployments on October 31, 2023 at:

4:38:02 a.m.
4:38:11 a.m.
4:56:18 a.m.
4:56:23 a.m.
4:56:29 a.m., and
4:56:34 a.m.

The AXON sheet shows six TASER deployments over an eighteen-minute period. This corresponds with Officer Relva's report and the BWC recordings that show six TASER deployments.

FINDINGS

The investigation supports the following findings of material fact.

1. On October 31, 2023, Robert Scott Brown was fifty-two years old. He had been diagnosed as schizophrenic and was prescribed mental health medication. He had been suicidal in the past. He lived with his mother at 8 Tyrell Drive, Wolcott, CT
2. On October 30, 2023, Brown made disturbing comments to his mother, Joyce Swoditch suggesting that the two of them would be going to heaven.

⁵ This time and the times reflected for Officer Relva's TASER are almost certainly wrong.

3. On October 31, 2023, during the early morning hours, Joyce Swoditch heard glass breaking in Brown's room. She saw blood in the bedroom as a chair blocking the bedroom's entrance. She called 911.
4. At 3:43 a.m., Wolcott Police Officers Michael Relva and John O'Dea were dispatched to 8 Tyrell Drive. Joyce Swoditch directed them to Brown's room. There they found a chaotic and bizarre scene with a blood-soaked floor, nonsensical words written in blood on the walls, and pan flute music playing. The officers also observed Brown with lacerations to his neck and abdomen. He was covered in blood.
5. For approximately the next thirty minutes, the officers attempted to get Brown medical aid. Brown was uncooperative with these efforts that included verbal requests, and multiple TASER deployments designed to temporarily incapacitate him in order to take him into custody.
6. Ultimately, with the assistance of other officers, Brown was secured in handcuffs and taken to an ambulance. The officers did not use unreasonable or excessive force in taking him into custody.
7. Due to massive loss of blood, Brown lost all vital signs in the ambulance. He was pronounced dead shortly after arriving at Saint Mary's Hospital in Waterbury.
8. The Office of the Chief medical examiner performed an autopsy and classified Brown's death as a suicide from self-inflicted incised wounds.

LEGAL STANDARD

General Statutes §51-277a(a)(2)(A) provides in part:

“... whenever a person dies in the custody of a peace officer or law enforcement agency, the Inspector General shall investigate and determine whether physical force was used by a peace officer upon the deceased person, and if so, whether the use of physical force by the peace officer was justifiable under section 53a-22. If the Inspector General determines that the person died as a result of possible criminal action not involving the use of force by a peace officer, the Inspector General shall refer such case to the Division of Criminal Justice for potential prosecution.”

Neither General Statutes Chapter 886, nor the penal code define the terms “physical force” or “criminal action.” For the purposes of this report, I apply such terms in accord with their ordinary meanings.

ANALYSIS

Officers Relva and O'Dea faced a disturbing scene when they first looked into Robert Scott Brown's room and saw blood everywhere, odd words painted on the walls, and the cuts on Brown's neck and torso. Their efforts to convince him to get the medical help that he desperately needed were met with Brown's determination to resist those efforts. When words did not work, they tried their TASERS. When the TASERS did not work, they reached out to other police departments for less lethal options. The arrival of the Bristol officers allowed them to assemble a sufficient number of officers to rush into the room and take Brown into custody.

Regrettably, during all of this time, Brown continued to bleed from his self-inflicted wounds – particularly the incised wound to his forearm. As a result, when the police finally got Brown to the ambulance, it was too late.

Based on the investigation, I find that Robert Scott Brown's death was not the result of police use of force, nor the result of criminal action. He died from suicide.

CONCLUSION

The investigation establishes that Robert Scott Brown's in-custody death was not the result of police use of force or criminal action. The Office of Inspector General will take no further action in this matter.

Submitted this 20th day of September 2024.



Robert J. Devlin, Jr.
ROBERT J. DEVLIN, JR.
INSPECTOR GENERAL