OFFICE OF THE INDEPENDENT POLICE MONITOR
City of Madison, Wisconsin

********FOR IMMEDIATE RELEASE*******

DATE:Monday June 15, 2026

TIME: 12:00 pm

OFFICE OF THE INDEPENDENT POLICE MONITOR RELEASES FINDINGS IN THE IN-CUSTODY DEATH OF RICHARD LEE JOHNSON

OIPM Case No. OIPM2025-0009

PRESS CONFERENCE DETAILS
Location: Steps of City-County Building, 210 Martin Luther King Jr. Blvd, Madison, WI 53705

Monday June 15th, 2026 12:00 pm

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MADISON, WI - The Office of the Independent Police Monitor (OIPM) of the City of Madison today publicly releases its investigative findings in the in-custody death of Richard Lee Johnson, a 32-year-old Black man who died on December 31, 2024, one day after going into cardiac arrest during his arrest by Madison Police Department officers. This investigation was opened following a complaint filed by Gloria Johnson, Richard's mother.
This report is issued by Aeiramique Glass, Interim Independent Police Monitor. The findings and recommendations in this report are solely those of this Office and are independent of MPD's Professional Standards and Internal Affairs division (PSIA), Department of Justice Division of Criminal Investigation (DCI), the Dane County Medical Examiner, and the Dane County District Attorney.

ABOUT RICHARD LEE JOHNSON

Richard Lee Johnson was a 32-year-old Black man from Madison, Wisconsin. He was 5' 2 and had a history of asthma. At the time of the incident, Richard worked multiple jobs, unhoused and had been staying at the Best Western Hotel at 4801 Annamark Drive, he went into cardiac arrest on the night of December 30th while in police custody and on December 31, 2024, at 4:04 PM at UnityPoint Health Meriter Hospital he was pronounced dead.

SUMMARY OF THE INCIDENT

On December 30, 2024, at approximately 8:22 PM, MPD Officers were dispatched to the Best Western Hotel on a reported stolen vehicle call. Officers - a probationary Officer and their field training Officer - encountered Richard Johnson in the parking lot. After being verbally told he was being detained, Richard ran. An Officer pursued him on foot. Richard tripped and fell; the Officer tackled him from behind. Both went face-first to the ground.

A struggle followed. The field training Officer arrived and held down Richard's legs. A back up Officer arrived on scene and within seconds shoved Richard's head into the ground and applied his knee across Richard's shoulder blades with sufficient force to press Richard's chin into the dirt, eliminating all head and neck mobility. Richard was heard audibly grunting. The officer was simultaneously using profanity and threatening language. Richard Johnson was already restrained on the ground by two officers when the back up Officer arrived.

Richard was handcuffed, kept in prone position for a period of time after this, and then stood up in a single continuous motion of approximately seven seconds, from prone on the ground to standing , with no time spent in a stabilized recovery position. After being stood up, his legs buckled twice. He told officers he had chest pain, shortness of breath, and a heart problem. He said he could not breathe. He asked for an ambulance.

EMS arrived, assessed Richard for approximately four minutes, and left him in police custody after he declined a test of blood sugar levels. Based on reports EMS was not told that Richard had been held in prone restraint, the

duration of that restraint, the force applied by Officer Gonzalez, that Richard had said he could not breathe, or about the flutter-kicking officers observed before EMS arrived.

Richard was placed in the back of a squad car for transport to the Dane County Jail. For the next 29 minutes, he groaned, heaved, thrashed, and fought to breathe in the back seat while two officers were in the front. At 10:08 PM, he slumped over. Officers said they believed he had calmed down and was resting. Chest compressions did not begin until 10:18 PM… ten minutes later. Multiple doses of Narcan administered on scene produced no response. Richard was transported to Meriter Hospital. He never regained consciousness and was pronounced dead the following day at 4:04 PM.

PRIOR INSTITUTIONAL REVIEWS

The Wisconsin Department of Justice Division of Criminal Investigation (DCI) conducted a 188-page independent investigation and designated 3 officers as critically involved. DCI does not make findings or recommendations; its report was transmitted to the Dane County District Attorney.

The Dane County Medical Examiner performed an autopsy on January 2, 2025. The report was finalized eight months later on September 10, 2025. The certified cause of death was complications of cocaine toxicity; the manner of death was classified as accidental.

Dane County District Attorney Ismael Ozanne reviewed the full DCI investigative file, and declined to bring criminal charges against any of the three officers.

MPD's Professional Standards and Internal Affairs division (PSIA) conducted an internal investigation under case number 2025-0178. Based substantially on the Medical Examiner's findings, PSIA cleared all three officers. Officers have been returned to full duty.

KEY FINDINGS OF THE OIPM INVESTIGATION

The OIPM's independent investigation identified the following significant findings:

1. Use of Force Omitted from Every Official Report. Officer Gonzalez shoved Richard Johnson's head into the ground and applied his knee with sufficient force to press Richard's chin into the dirt. This is captured on Officer Gonzalez's own dashcam, the camera he deliberately positioned toward the scene. This act of force was omitted from his case report, all supplemental reports, and the DCI's own documented list of key timestamped moments from the camera footage.

2. Officer Gonzalez Denied Using Any Other Force. When asked directly in his PSIA interview whether he used any other force on Richard Johnson, Officer Gonzalez said no. His official case report described the same act as "heavy control talk." Shoving a person's head into the ground is not control talk. The camera recorded both.

3. Richard Johnson Said "I Can't Breathe." Richard Johnson said he could not breathe at this scene, captured on audio, after being held in the prone position. That statement does not appear in any official report filed in connection with this incident.

4. No Recovery Position Was Used. Officers stated in their interviews that Richard was placed in a recovery position after handcuffing. The dashcam video contradicts both accounts. Richard went from a prolonged prone on the ground to standing in approximately seven seconds with no stabilized lateral position and no recovery position.

5. EMS Was Not Given the Information They Needed. EMS was told only that Richard was tackled. Based on reports EMS was not informed of the prone restraint, its duration, the force applied, the flutter-kicking, or that Richard had said he could not breathe. EMS made a clearance decision within four minutes, without the most medically relevant facts about what Richard Johnson's body had just been through.

6. MPD's Own SOP Required Hospital Transport, It Did Not Happen. MPD's Standard Operating Procedures require hospital clearance before jail booking for anyone who sustained traumatic injuries prior to arrest, is suspected of a drug overdose, or is exhibiting chest pain or shortness of breath. Richard Johnson met all three conditions. He was transported directly to jail.

7. Officer Lewis's Account Is Contradicted by the Evidence. Officer Lewis described Richard as hollering during his arrest and as very angry during transport. Both squad cameras captured no hollering. What the cameras captured is consistent with respiratory distress. She stated nothing concerned her before transport. The dashcam shows her approaching the car, asking Richard twice what was wrong, receiving no response, and walking away.

8. Officer Lewis Was Laughing During Transport. Officer Lewis was audibly laughing and engaged in casual conversation in the front seat on multiple occasions during transport while Richard Johnson was groaning and dying in the back seat. At one point she said his name in a tone of annoyance at the noise he was making. As the Field Training Officer on scene that night, she carried the highest supervisory responsibility of any critically involved officer.

9. Ten Minutes Between Slumping and Compressions. Richard Johnson slumped over at 10:08:29 PM. Chest compressions did not begin until 10:18:35 PM, ten minutes later. Officers said they believed he had calmed down and was resting. Every minute without compressions in a cardiac arrest reduces the probability of survival.

10. Multiple Doses of Narcan Had No Effect. Officers administered multiple doses of Narcan. None produced any response. Narcan reverses opioid overdose within minutes. The failure of multiple doses to produce any response, combined with the absence of any active cocaine in Richard Johnson's blood at the time of his cardiac crisis, along with the chemical abnormalities in blood samples, are among the key pieces of evidence that led this Office to seek an independent forensic pathologist.

11. MPD Internal Correspondence Pre-determined the Cause of Death. Internal MPD email correspondence reviewed by this Office reflects that before the DCI investigation was closed and the Medical Examiner's report was finalized, MPD leadership was communicating internally that the final cause of death would be accidental and was coordinating notification of the officers who were on restrictive duty pending the investigation's outcome.

12. The Family Has Not Received the Evidence. The family of Richard Lee Johnson has not received the unredacted DCI report or photographs related to this case. The decisions that cleared the officers involved in their son's death were made using evidence this family has never seen.

INDEPENDENT MEDICAL EXPERT OPINION

After identifying that the Medical Examiner's conclusion was not supported by the clinical evidence, the OIPM retained Dr. Victor Weedn, a board-certified forensic pathologist with over 35 years of experience, including specialized experience with in-custody deaths, to conduct an independent review.

The toxicology specimen drawn at the time of Richard Johnson's acute medical crisis showed only inactive cocaine metabolites, not active cocaine. Inactive metabolites are what the body produces after cocaine has already been broken down and processed. They cannot cause an overdose. A death caused by cocaine toxicity would require active cocaine in the blood, along with specific cardiac signs including ventricular arrhythmias and elevated blood pressure. None of those were present. His blood pressure was dangerously low. His cardiac rhythm was non-shockable, meaning his heart's electrical system was functioning but the muscle could not pump.

Dr. Weedn's opinion is that Richard Johnson died from Restraint Cardiac Arrest/Metabolic Acidosis caused directly by police action. When Richard was held face-down with obstruction to his breathing, his ability to breathe at the level his body required was reduced. Research shows prone restraint reduces maximum breathing capacity by approximately 20 to 25 percent. For a person in the physiological state Richard was in following a foot pursuit and prolonged restraint, that reduction is not survivable over time. The acidosis built until the heart muscle could no longer contract. Richard's history of asthma may have made him more susceptible to this condition.

The flutter-kicking, the whole-body thrashing, and the groaning observed during transport are identified by Dr. Weedn as physiological responses to severe respiratory distress, metabolic acidosis, and carbon dioxide buildup - not anger or aggression.

DR. WEEDN'S CONCLUSION: Richard Lee Johnson died from restraint-related cardiac arrest and metabolic acidosis directly caused by police action. Cocaine may have been a predisposing or contributing factor, but was not the cause of death. But for the police actions, Richard Johnson would not have died. Because the cause of death resulted from the volitional actions of officers restraining Richard Johnson in the prone position, the manner

of death should be classified as homicide. This is a forensic and medical classification. It does not mean the officers planned to kill Richard Johnson. It means that another person's actions caused his death.

The Dane County Medical Examiner classified the manner of death as accidental. The District Attorney declined to bring charges and PSIA cleared all three officers based substantially on the Medical Examiner's finding. Dr. Weedn states that the Medical Examiner's conclusion is a common and understandable error, as Prone Restraint Cardiac Arrest does not leave obvious markers in an autopsy and is not widely known even among medical examiners. If the Medical Examiner's determination is incorrect, every institutional decision built upon it must be re-examined.

RECOMMENDATIONS

The OIPM issues the following recommendations:

1. Immediate meeting between MPD leadership, OIPM, and Dr. Weedn to receive a presentation on Prone Restraint Cardiac Arrest, its warning signs, and why existing protocols were insufficient to prevent this death.

2. Review of the official cause and manner of death, consistent with Dr. Weedn's independent forensic findings.

3. Mandatory medical transport following any incident involving a foot pursuit, physical struggle, or prone restraint.

4. Mandatory communication of force and restraint information to EMS, in policy and in practice.

5. Protocol for silence during transport: when a subject who has been making noise goes suddenly silent, that silence must be treated as a medical emergency.

6. Formal adoption of the 2024 Police Executive Research Forum recommendations on Fifteen Principles for Reducing the Risk of Restraint-Related Death.

7. Updated Medical Care Standard Operating Procedure establishing an affirmative obligation to monitor and respond to the medical condition of every person in custody from the moment of arrest through transfer.

8. Full disclosure of the unredacted DCI report and all photographic evidence to the Johnson family, to the full extent permitted by law.

9. Specific, formal review of Officer Lewis's conduct throughout this incident and her willful indifference in the health,care,safety and life of Richard Johnson.

10. Disciplinary action of officer Gonzales, after review of his use of force and disciplinary history.

STATEMENT FROM GLORIA JOHNSON

Gloria Johnson, Richard's mother, filed the complaint that initiated this investigation. She is the reason this report exists. When asked what justice looks like for her family, Ms. Johnson said:

"We want them to be held accountable for what they did, and he can have justice. Some type of public apology is something, because they only put it out that he was high and stole a car. They basically tarnished him."

CLOSING STATEMENT

Richard Lee Johnson was 32 years old. He was someone's son, brother, and uncle. He was unhoused while he worked multiple jobs. While he may have struggled with addiction, the addiction did not take his life.

This Office conducted an independent investigation and reviewed all available evidence. Dr. Victor Weedn, a board-certified forensic pathologist with over 35 years of experience, reviewed the same evidence and reached a different conclusion than the Dane County Medical Examiner. In his expert opinion, Richard Johnson died from restraint-related cardiac arrest and metabolic acidosis caused by police action, not cocaine toxicity. Deaths due to the volitional actions of police restraining subjects in the prone position constitute homicides and should be certified as such.

The OIPM calls on MPD leadership, the Dane County Medical Examiner, and the Dane County District Attorney to review these findings and to respond with the transparency, accountability, and action this case demands.

Richard Lee Johnson deserved better. His family deserved the full truth. This community deserves to know that when something like this happens, every institution responsible for care, accountability, and justice will do its job.

Aeiramique Glass

Interim Independent Police Monitor

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Madison General Ordinance §5.19

MEDIA NOTE

The full investigative report including the independent expert report of Dr. Victor Weedn (Appendix A) is available at

/www.cityofmadison.com/independent-police-monitor

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OIPM Case Number: OIPM2025-0009 | Incident Date: December 30, 2024 | Date of Death: December 31, 2024

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