

**BEFORE THE BOARD OF TRUSTEES OF THE
BLOOMINGTON POLICE PENSION FUND**

IN THE MATTER OF THE)
DISABILITY APPLICATION OF:)
)
OFFICER BRICE STANFIELD,)
)
APPLICANT.)

DECISION AND ORDER

This matter comes before the Board of Trustees of the Bloomington Police Pension Fund (“Pension Board”) upon the disability application of Officer Brice Stanfield (“Applicant” or “Stanfield”). The Pension Board, pursuant to the statutory authority set forth in 40 ILCS 5/3-101 *et seq.*, of the Illinois Pension Code, renders the following decision concerning Applicant’s claim for line-of-duty disability pension benefits, or in the alternative, ordinary disability pension benefits.

A hearing was held before the Pension Board on April 21, 2023. Applicant was duly and properly notified of the hearing and was present for the hearing. At the hearing, Applicant was represented by counsel, Stephen Kelly. Applicant had the opportunity to submit evidence and present testimony during the hearing regarding his claim. Applicant informed the Pension Board that he was amending his application to include an ordinary disability in the alternative. Said motion was allowed by the Pension Board.

In reaching its decision, the Pension Board carefully considered all testimony elicited of witnesses at the hearing and reviewed all exhibits made part of the administrative record. The Pension Board considered all arguments made by Applicant and documentation submitted. To the extent arguments, findings and conclusions submitted by Applicant are in accordance with the findings, conclusions and views stated herein, they have been accepted, and to the extent testimony

of witnesses or documentation submitted is not in accord with the findings herein, such testimony or documentation is not credited.

I. FINDINGS OF FACT

Based upon a preponderance of the evidence in the administrative record, the Pension Board makes the following findings of fact:

Preliminary Matters

1. Applicant was a regular member of the Bloomington Police Department (“Police Department”) holding the rank of patrolman at the time of this application. (Bd. Ex. 1, p. 1).¹
2. Applicant’s salary attached to his rank is \$105,580.00 per year. *Id.*
3. Applicant is currently married and has one (1) dependent child, aged seventeen (17). His child has no mental or physical disabilities. (Tr. 12, 13).
4. Applicant received his probationary appointment to the Police Department on January 29, 2001, and has remained with the Police Department until present. (Bd. Ex. 1, p. 1).
5. On or about November 15, 2021, Applicant submitted to the Pension Board an application for not-on-duty disability pension benefits pursuant to 40 ILCS 5/3-114.2. *Id.* Applicant amended his application on the date of hearing to allege a line-of-duty disability, pursuant to 40 ILCS 5/3-114.1, and in the alternative, a not-on-duty disability. This amendment was allowed by the Pension Board. (Tr. 8).
6. The Pension Board held a hearing on Applicant’s disability application on April 21, 2023. (Tr. 1, 6).

¹ Citations to Board Exhibits will be referenced as “(Bd. Ex. __, p. __)”. Citations to June 13, 2023, Transcript of Hearing will be referenced as “(Tr. __)”.

7. Pension Board Exhibits 1 through 17 were admitted into the administrative record without objection. (Tr. 9). Stanfield submitted Exhibits 1 and 2, which were admitted without objection. *Id.*

8. The City of Bloomington filed a motion to intervene in these proceedings, which was initially granted by the Pension Board. Subsequently, the City of Bloomington withdrew its intervention. (Tr. 7; Bd. Ex. 17). The City of Bloomington did not participate in the substantive hearing held on April 21, 2023.

The February 2, 2012, and October 15, 2017, incidents

9. On February 2, 2012, Applicant was on duty, in a fully marked squad car with his seat belt on and securely fastened. (Tr. 17). He was assigned to a speed detail with the responsibility of pulling over offending drivers that had been observed violating traffic laws. As part of his assignment, he was positioned on a median awaiting further instructions from fellow officers. At that time, a civilian vehicle slammed into the rear of the squad car and pushed it into the squad car positioned in front of Applicant. *Id.*

10. At the time of the accident, Applicant felt a pop in his neck. (Tr. 18).

11. Applicant was stabilized by paramedics and transported to the local hospital. At the hospital, he was examined, radiographic images of his neck were taken, and he was told to take the prescribed pain medication as needed. (Tr. 19). No additional medical intervention or treatment was prescribed by treating medical personnel nor sought by Applicant. He returned to work the following Monday per doctor's release. *Id.*

12. Applicant continued to work his regular scheduled assignments for the next several years and did not report any further difficulty or discomfort related to the neck injury he sustained on February 2, 2012.

13. On October 15, 2017, Applicant was again on patrol, in a fully marked squad car, and performing assigned police duties. (Tr. 20). Applicant observed a vehicle run a red-light. He engaged in pursuit. While attempting a U-turn to continue the pursuit, Applicant was involved in a serious vehicle accident after hitting another squad car similarly engaged in hot pursuit. While the Applicant did not feel injured or seek additional treatment after this incident, the event was documented and reported. *Id.*

14. Applicant continued to work and perform his assigned duties until December 20, 2020, without incident. On that day, he began to feel numbness in his extremities and weakness in his legs and with his left hand. (Tr. 21). Applicant went to see a physician regarding these symptoms the next day. (Tr. 22). Applicant returned to work on December 22, 2020, with the expectation of eventual follow-up with this physician, including an MRI. *Id.*

The December 22, 2020, incident

15. On December 22, 2020, Applicant was called out to a Dollar General retail store for a disturbance, reported as a possible retail theft or trespass. Applicant attempted to place the suspected offender into custody. (Tr. 23). Applicant testified the arrestee struggled or “tussled” with the officers before being taken to the ground by Applicant during the arrest. (Tr. 24). Following the struggle, Applicant had difficulty getting up. He carefully ambulated to his squad but recalled having great difficulty in walking both to and from the vehicle. *Id.* He described the feeling as “being unable to walk.” (Tr. 26).

16. Upon taking the arrestee to the hospital, Applicant immediately contacted his specialty physician, Dr. Nardone, who he had seen on December 21. Applicant was able to see Dr. Nardone on December 28, 2020. (Tr. 27). Applicant was examined and an MRI was taken. Dr.

Nardone informed Applicant he observed/diagnosed a bulging disc, neck injury and a bulging disc at C5-6, which had been untreated and caused damage to Applicant's spinal cord. (Tr. 27).

17. Dr. Nardone indicated the Applicant must have surgery within the next few days. If he did not submit to surgery and happened to fall or become involved in a traffic accident, Applicant could become paralyzed. (Tr. 27 – 28). Dr. Nardone told Applicant that while the bulging disc may be repaired, the damage caused to the spinal cord was likely permanent. (Tr. 28).

18. Applicant received the recommended surgery on December 31, 2020, where the bulging disc was removed, and the neck fused. (Tr. 29; Bd. Ex. 3, p. 94, pp. 261 - 262). The surgery was described as a cervical C5-6 anterior decompression with allograft bone fusion and plating and intraoperative monitoring. The postoperative diagnosis was cervical spondylosis with myelopathy. (Tr. 29).

19. Dr. Nardone reported the following description of the surgery:

“The patient was taken to the operating room and after general endotracheal intubation insertion of appropriate lines, he was placed in supine position. The head was slightly extended. The neck was prepped and draped in usual sterile fashion after localizing x-rays was (sic) taken. A left-sided neck incision was cut into the skin sharply and dissection was done with monopolar cautery through the platysma muscle. The plane was developed between the sternocleidomastoid muscle and the carotid sheath laterally and the strap muscle: trachea, and esophagus medially This plane was carried down to the prevertebral fascia that was coagulated, sharply opened, and x-rays was(sic) taken for localization at the level. The edges of the longus colli muscle were coagulated, detached from the bony attachment, and retractor blades were placed underneath them.

MICROSURGICAL PROCEDURE

The C5-C6 disk space was penetrated, evacuated down to the posterior osteophyte was partially drilled and complete decompression was achieved through the posterior longitudinal ligament with Kerrison punches uneventfully. Bleeding points were controlled. Copious irrigation of antibiotic solution was achieved. The 5 mm lordotic allograft bone spacer was inserted uneventfully followed by the insertion of anterior Medtronic plate that was connected with two 15 mm screws in the body of C5, and to the body of C6. X-rays were done and looked good. The retractors were removed. Copious

irrigation with antibiotic solution was achieved. No further bleeding was identified. The platysma was approximated with 3-0 Vicryl. The skin with a 4-0 Vicryl in a subcuticular fashion. Steri-Strips and sterile dressing were applied. The procedure was well tolerated with no apparent complication. The patient was extubated and left the operating room in stable condition.” (Bd. Ex. 3, p. 261-262)

Subsequent medical treatment and attempts to return to duty.

20. Applicant was prescribed post-operative physical therapy and began attending sessions. (Tr. 29)

21. Applicant indicated that he asked to be cleared to return to work but had not received release from Dr. Nardone. *Id.* Applicant continued to experience neurological issues, including spasticity in his legs, as well as his legs locking up at times. He also described experiencing “clonus,” which involved his legs “doing their own thing.” (Tr. 30 -31). Clonus is an abnormal reflex response that involves involuntary and rhythmic muscle contractions. *See* <https://my.clevelandclinic.org/health/symptoms/24822-clonus#:~:text=Clonus%20is%20an%20abnormal%20reflex.treatments%20can%20help%20manage%20clonus.>

22. Applicant traveled multiple times to the Mayo Clinic for a second opinion in an attempt to address these remaining symptoms. It was recommended Applicant continue to participate in physical therapy and take the prescribed medications. (Tr. 31).

23. Applicant continuously expressed his desire to return to full and unrestricted police work to the point Dr. Nardone indicated he would release Applicant to return as long as Applicant’s employer, the City of Bloomington, agreed. Applicant submitted to a Functional Capacity Examination (FCE) and was initially cleared to return to work. Applicant was scheduled for return on October 4, 2021. (Tr. 32).

24. Applicant reported for duty, but was pulled out of the daily briefing and informed the City wanted Applicant to perform another FCE. (Tr. 32).

25. Applicant submitted to the second FCE and while he thought he had passed, he was later informed he had failed. Applicant received notice on August 17, 2022, he was no longer employable by the City of Bloomington as a police officer. (Tr. 34 -35; App. Ex. 1, p. 2).

Applicant's Work and Pay Status

26. From the date of his surgery on December 31, 2020, through August 20, 2022, applicant was either assigned a light-duty position within the police department or used his accrued sick/vacation time. At no point was Applicant on PEDAs or without appointment as a police officer through August 20, 2022. *Id.*

27. Subsequent to August 20, 2022, Applicant has been employed as a civilian evidence technician and does not have police powers.

28. No physician has ever released Applicant to return to his former job as a police officer.

29. Applicant has not been offered a permanent light duty position within the Police Department.

Pension Board's Independent Medical Examinations

30. Pursuant to 40 ILCS 5/3-115 of the Illinois Pension Code, the Pension Board selected three (3) physicians to conduct an independent medical examination ("IME") of Applicant. Those physicians were Dr. David J. Fletcher, M.D. (Bd. Ex. 8 and 15), Dr. Jeffrey Williamson-Link, M.D. (Bd. Ex. 9 and 16), and Dr. George S. Miz, M.D. (Bd. Ex. 10 and 14). The Pension Board forwarded Applicant's treating medical records and related employment records to each of the independent medical examiners prior to examination. All physicians

indicated their opinions were made within a reasonable degree of medical and/or surgical certainty. Finally, all physicians were provided supplemental medical reports, other relevant documents, as well as a video recording of the most recent incident. Each physician found the new information did not alter their original opinions, as reflected below.

IME of Dr. David J. Fletcher, M.D.

31. Dr. Fletcher is licensed to practice medicine in the State of Illinois and is Board Certified by the American Board of Preventive Medicine as well as Board Certified in Occupational Medicine. (Bd. Ex. 8, p. 907). He serves as a Clinical Assistant Professor, University of Illinois College of Medicine, Urbana-Champaign, Illinois. *Id.*

32. Dr. Fletcher examined Applicant on July 8, 2022, and certified him disabled from performing full and unrestricted police duties. (Bd. Ex. 8, p. 891). Dr. Fletcher was asked to review his opinion, as well as additional documents and body-worn camera recordings and provide a supplemental opinion, which he did on January 23, 2023. (Bd. Ex. 15, pp. 1109 – 1112).

33. Dr. Fletcher stated the following regarding whether the Applicant was disabled from performing full and unrestricted police duties:

He is unable to perform unrestricted duties as a police officer. His impairment that makes him disabled is related to his cervical myelopathy condition, which is secondary to his cervical stenosis. He is unable to respond in an emergency situation. He also has features of left ulnar nerve issues. He reports left shoulder discomfort, however, his left shoulder clinical exam was not that remarkable at the time of his exam in July 2022. (Bd. Ex. 15, p. 1109)

34. Regarding the permanence of Applicant's disability, Dr. Fletcher concluded that Applicant's disability was permanent. *Id.*

35. Dr. Fletcher indicated he did not believe additional medical treatment would benefit the Applicant, stating:

“In my opinion to a reasonable degree of medical certainty, he is not going to be able to undergo any treatment that will allow him to recover to allow him to return to full unrestricted police work. His residual neurological deficit (proximal leg weakness) is fixed and will not sustainably improve.” (Bd. Ex. 15, p. 1112; see also Bd. Ex. 8, p. 898)

36. Dr. Fletcher concluded, after “reviewing his history and all the additional information made available (incident reports, body cam footage, and fitness-for-duty evaluations), Mr. Stanfield's pre-existing cervical degenerative condition was aggravated by the two work-related motor vehicle crashes and that the final incident on December 22, 2020 was the straw that broke the camel's back and made his underlying cervical stenosis symptomatic with evidence of cervical myelopathy causing proximal muscle weakness. (Bd. Ex. 15, p. 1111).

37. Dr. Fletcher opined Applicant could perform in a limited, light duty capacity if such a position had light duty or sitting position only, indicating he was aware of Applicant's employment in such a position as an evidence technician. *Id.*

IME of Dr. Jeffrey Williamson-Link, M.D.

38. Dr. Williamson-Link is licensed to practice medicine in the State of Illinois and is board-certified in Occupational Medicine. (Bd. Ex. 9, p. 932). He is a Fellow with the American College of Occupational and Environmental Medicine, is a Certified Medical Review Officer, and is President Elect of the Central States Occupational and Environmental Medicine Association. *Id.*

39. Dr. Williamson-Link examined Applicant on August 4, 2022, and certified him disabled from performing full and unrestricted police duties. (Bd. Ex. 9, p. 924). Dr. Williamson-Link was asked to review his opinion, as well as additional documents and body-worn camera recordings and provide a supplemental opinion, which he did on January 30, 2023. (Bd. Ex. 16, pp. 1114 - 1115).

40. Regarding Applicant's disability, Dr. Williamson-Link concluded as follows:

"As previously stated it is my opinion based on my prior examination of the Officer and review of the records that he is disabled from performing full and unrestricted Police duties. Again the Officer had undergone cervical spine surgery however the Officer had persistent complaints of lower extremity spasticity as well as clonus. He had continued issues with his ability to react quickly, pivot again which would all be important for his ability to perform his duties as a Police Officer. The Officer was diagnosed with cervical stenosis and myelopathy." (Bd. Ex. 16, p. 1114).

41. Dr. Williamson-Link concluded the duration of Applicant's disability is permanent. (Bd. Ex. 9, p. 1114).

42. Regarding disability causation, Dr. Williamson-Link opined:

"The documentation from the February 2012 motor vehicle accident is limited, it appears from the documentation that is present that the officer sustained a neck injury and was seen and treated in the emergency room. That being said the Officer continue[s] to work and started to have symptoms years later. In my opinion one cannot ignore the fact that the Officer did sustain a cervical injury at that time. Again the documentation is very limited. It is my opinion that the injury at that time could have contributed to his current disability with his cervical myelopathy." (Bd. Ex. 9, p. 1115).

43. Dr. Williamson-Link opined Applicant could perform in a limited, light duty capacity if such a position was made available and offered to him. *Id.*

44. Regarding his recommendation for additional medical care or treatment, Dr. Williamson-Link opined:

"I am unaware of any additional reasonable medical care and treatment that the Officer could undergo to enable him to return to full and unrestricted Police duty." *Id.*

IME of Dr. George S. Miz, M.D.

45. Dr. Miz is licensed to practice medicine in the State of Illinois and is board-certified in orthopedic surgery. (Bd. Ex. 10, pp. 943 - 961).

46. Dr. Miz examined Applicant on August 4, 2022, and certified him disabled from performing full and unrestricted police duties. (Bd. Ex. 10, p. 934). Dr. Miz was asked to review

his opinion, as well as additional documents and body-worn camera recordings and provide a supplemental opinion, which he did on January 9, 2023. (Bd. Ex. 14, pp. 1103 - 1107).

47. Regarding Applicant's disability, Dr. Miz concluded as follows:

"In my opinion, Officer Stanfield is disabled from performing full and unrestricted police duties specifically related to his residual findings of spinal cord dysfunction and myelopathy. These preclude his ability to effectively run which, in my opinion, would be a safety issue for him and those he may be trying to protect as a police officer." (Bd. Ex. 10, p. 1106).

48. Dr. Miz concluded Applicant's disability is likely permanent. *Id.*

49. Dr. Miz concluded Applicant did suffer from pre-existing conditions related to his disability, specifically cervical spinal stenosis with progressive myelopathy. (Bd. Ex. 10, p. 1106).

50. Regarding disability causation, Dr. Miz opined it was a direct result of Applicant's most recent incident, stating:

"In my opinion, Officer Stanfield's alleged disability is unrelated to the incidents of February 2, 2012, and October 15, 2017. It is my opinion that the December 22, 2020, incident contributed to the disability considering the fragile state of Officer Stanfield's spine. Records of the actions of the restraining the suspect on that date were, in my opinion, sufficient to aggravate the condition of his progressive cervical myelopathy." (Bd. Ex. 14, p. 1107).

51. Dr. Miz opined Applicant could perform in a limited, light duty capacity if such a position was made available and offered to him. *Id.*

52. Dr. Miz also concluded Applicant cannot undergo any additional medical care or treatment that would reasonably be expected to enable sufficient recovery to return to full and unrestricted police work. *Id.*

53. Dr. Miz made the following observations during his examination of Applicant:

On examination, his stance is unremarkable, however, with his eyes closed, he does have some loss of balance. He has clearly spastic gait. Heel and toe walking is accomplished with some difficulty, however, he is unable to do single legged leg raises due to right greater than left gastrocnemius weakness. On his exam, when attempting to break into a

run from a standing position, he appears off balance and clearly has reaction of clonus when he attempts to push off with either leg". (Bd. Ex. 10, p. 938).

Pension Board's Final Conclusions of Fact

54. The Pension Board voted 4-0 to award Applicant a line-of-duty disability pension benefit effective August 20, 2022.

55. The Pension Board finds Applicant is disabled from full, unrestricted police duties as a result of an "act of duty."

II. APPLICABLE STATUTORY PROVISIONS

The following provisions of the Illinois Pension Code have application:

40 ILCS 5/3-114.1 Disability pension – Line of Duty

(a) If a police officer as the result of sickness, accident or injury incurred in or resulting from the performance of an act of duty, is found to be physically or mentally disabled for service in the police department, so as to render necessary his or her suspension or retirement from the police service, the police officer shall be entitled to a disability retirement pension equal to the greatest of (1) 65% of the salary attached to the rank on the police force held by the officer at the date of suspension of duty or retirement, (2) the retirement pension that the police officer would be eligible to receive if he or she retired (but not including any automatic annual increase in that retirement pension), or (3) the pension provided under subsection (d), if applicable.

A police officer shall be considered "on duty" while on any assignment approved by the chief of the police department of the municipality he or she serves, whether the assignment is within or outside the municipality.

40 ILCS 5/5-113 Act of Duty

"Act of duty": Any act of police duty inherently involving special risk, not ordinarily assumed by a citizen in the ordinary walks of life, imposed on a policeman by the statutes of this State or by the ordinances or police regulations of the city in which this Article is in effect or by a special assignment; or any act of heroism performed in the city having for its direct purpose the saving of the life or property of a person other than the policeman.

III. ANALYSIS OF CLAIM

Legal Standards To Be Used

The purposes of laws for police officer's pension is beneficial in nature and such statutes should be liberally construed in favor of the police officer to be benefited. *Peifer v. Bd. of Trustees of Police Pension Fund of Vill. of Winnetka*, 57 Ill. App. 3d 102, 106 (1st Dist. 1978). The burden of proving the entitlement to any kind of disability pension rests with the applicant. *Daily v. Bd. of Trustees of the Springfield Police Pension Fund*, 251 Ill. App. 3d 119 (4th Dist. 1993); *Wall v. Police Pension Bd. of Vill. of Schaumburg*, 178 Ill. App. 3d 438 (1st Dist. 1988); *Evert v. Firefighters' Pension Fund of Lake Forest*, 180 Ill. App. 3d 656 (2d Dist. 1989). Due to their personal knowledge of the peculiar physical and emotional demand of the job, the members of the pension board are in the best position to determine pension questions. *Sanders v. Bd. of Trustees of City of Springfield Police Pension Fund*, 112 Ill. App. 3d 1087, 1091 (4th Dist. 1983).

Applicant's Line-of-Duty Disability Claim

Applicant has the burden of proving he is disabled, and that the disability occurred in the line-of-duty. *Wall v. Police Pension Bd. of Vill. of Schaumburg*, 178 Ill. App. 3d 438, 443 (1st Dist. 1988). The elements a police officer must prove in order to obtain a line-of-duty disability pension under 40 ILCS 5/3-114.1 are as follows:

1. He or she is a police officer;
2. An accident, injury or sickness was incurred in or resulted;
3. From the performance of an act of duty;
4. The officer is found to be physically or mentally disabled; and
5. The disability renders necessary his or her suspension or retirement from police service.

The Pension Board finds Applicant has sustained his burden of proof and established each of the necessary elements to obtain a line-of-duty disability pension under 40 ILCS 5/3-114.1.

1. **Applicant is disabled from full and unrestricted police duties.**

Applicant was a City of Bloomington police officer during all relevant times, and at the time he applied for line-of-duty disability pension benefits. Applicant suffered multiple injuries resulting from traumatic automobile accidents as well as an incident involving the arrest of a suspect. The objective medical evidence shows Applicant has undergone a career ending surgery necessitated by the injuries suffered during these events. Further, the unanimous opinions of all three (3) independent medical examiners as well as the medical experts hired by the City of Bloomington concluded Applicant is disabled from full and unrestricted police duty as a result of his neck injury and subsequent need for surgery. There is no objective medical evidence contained in the administrative record that concludes Applicant can return to full and unrestricted police duties. In addition, the Pension Board finds no permanent light duty position exists within the Police Department. As such, Applicant's disabling neck injury and the required surgery renders necessary his suspension or retirement from police service.

2. **Applicant is disabled as a result of an "act of duty."**

Applicant incurred his disabling injury from the performance of an act of duty. The term "act of duty" for purposes of Article 3 of the Illinois Pension Code should be construed in accordance with the definition contained in Article 5 of the Pension Code. Article 5 defines an act of duty as "any act of police duty inherently involving special risk, not ordinarily assumed by a citizen in the ordinary walks of life, imposed on a policeman by the statutes of this State or by the ordinances or police regulations of the city in which this Article is in effect or by a special assignment; or any act of heroism performed in the city having for its direct purpose the saving of the life or property of a person other than the policeman." 40 ILCS 5/5-113.

In Illinois, an officer does not perform an "act of duty" merely by being in uniform and on duty. *Sarkis v. City of Des Plaines*, 378 Ill. App. 3d 833, 837 (1st Dist. 2008); See *e.g.*, *English v.*

Vill. of Northfield, 172 Ill. App. 3d 344, 348 (1st Dist. 1988) (board's decision that police officer was not entitled to duty disability pension for back injury resulting from various on-duty and off-duty incidents was not contrary to manifest weight of the evidence); *Morgan v. Retirement Bd. of the Policemen's Annuity & Benefit Fund*, 172 Ill. App. 3d 273, 275 (1st Dist. 1988) (officer not entitled to duty disability pension for injury sustained when desk chair rolled out from under him as he completed police report); *Filskov v. Bd. of Trustees of Northlake Police Pension Fund*, 409 Ill. App. 3d 66, 72 (1st Dist. 2011) (board's decision that police officer was not entitled to duty disability pension was not clearly erroneous because entering a vehicle did not involve a "special risk, not ordinarily assumed by a citizen in the ordinary walks of life."). It is for the Pension Board to determine whether a disability is caused by a covered act based upon the evidence presented at the hearing. *Jensen v. E. Dundee Fire Prot. Dist. Firefighters' Pension Fund Bd. of Trustees*, 362 Ill. App. 3d 197, 205 (2d Dist. 2005).

The Pension Board finds sufficient evidence supports the conclusion Applicant's disabling neck injury and subsequent need for surgery was incurred in or resulted from the performance of an "act of duty." Applicant suffered a physical injury in the process of arresting a suspect who was reasonably believed to have been involved in a retail theft or trespass to a local merchant. This was clearly within his assigned duties as a Bloomington police officer on December 22, 2020. This conduct, not ordinarily assumed by a citizen in the ordinary walks of life, resulted in Applicant's injuries and ultimate disability. The Pension Board further finds the evidence supports the claim other incidents involving serious motor vehicle crashes while involved in police action created or initiated the damage to Applicant's spinal structure, in effect weakening the Applicant's cervical spine. The Pension Board finds Dr. Nardone's diagnosis Applicant had an untreated bulging disc in his neck when he was injured during the arrest of the suspect on December 22, 2020, supports

at minimum, that the act of duty Applicant engaged in that day aggravated a previously existing injury sustained during other acts of duty.

Therefore, based on the evidence in the administrative record, the Pension Board finds Applicant is disabled from performing full and unrestricted police duties so as to render necessary his suspension from police service. In addition, the Pension Board finds Applicant's disabling injury was incurred in or resulted from the performance of an "act of duty" on December 22, 2020.

IV. CONCLUSIONS

1. The Board of Trustees of the Bloomington Police Pension Fund has jurisdiction over this subject matter.

2. Applicant is entitled to a line-of-duty disability pension benefit pursuant to §3-114.1 of the Illinois Pension Code, effective upon his removal from the municipality's payroll, because he sustained disabling injuries in the performance of an act of duty. The Pension Board concludes Applicant's last day on duty as a sworn police officer was August 20, 2022.

3. Pursuant to §3-114.5 of the Illinois Pension Code, Applicant cannot receive benefits under the Pension Code and the Workers' Compensation Act for the same injury. Applicant shall notify the Pension Board in the event of settlement or receipt of an award from any Workers' Compensation case in order for the Pension Board to determine whether there should be an offset pursuant to §3-114.5 of the Illinois Pension Code, and the Pension Board will retain jurisdiction over this matter for this purpose only. Applicant testified that he had never applied for workers' compensation benefits.

4. The Pension Board finds the Applicant's request for relief in the form of a not-on-duty disability as an alternative to be moot given the award of a line-of-duty disability in this matter.

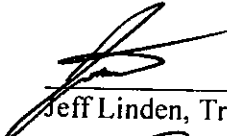
IT IS THEREFORE ORDERED:

That a certificate of payment be issued to Applicant, Officer Brice Stanfield, pursuant to §3-133 of the Illinois Pension Code, stating Applicant's entitlement to a line-of-duty disability pension benefit, effective August 20, 2022.

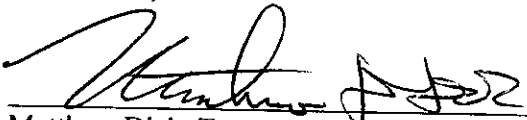
**BOARD OF TRUSTEES OF THE
BLOOMINGTON POLICE PENSION FUND**



Paul Swanlund, President



Jeff Linden, Trustee



Matthew Dick, Trustee



Scott Rathbun, Trustee

DATE: 11/21/2023

THIS IS A FINAL AND APPEALABLE DECISION. THIS DECISION CAN BE REVIEWED IN THE CIRCUIT COURT BY FILING A COMPLAINT FOR ADMINISTRATIVE REVIEW WITHIN 35 DAYS FROM THE DATE THAT A COPY OF THIS DECISION WAS SERVED UPON THE PARTY AFFECTED THEREBY.

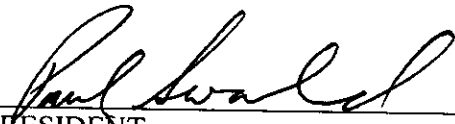
**BEFORE THE BOARD OF TRUSTEES OF THE
BLOOMINGTON POLICE PENSION FUND**


**IN THE MATTER OF THE)
DISABILITY APPLICATION OF:)
OFFICER BRICE STANFIELD,)
APPLICANT.)**

CERTIFICATE OF PAYMENT

Pursuant to Sections 3-133 and 3-114.1 of the Illinois Pension Code, this certifies Applicant, OFFICER BRICE STANFIELD, is entitled to payment of a Line-of-Duty Disability Pension Benefit equal to 65% of the salary attached to the rank held by him at the time of his removal from the municipality's payroll, less any and all applicable offsets. The effective date of Applicant's line-of-duty disability pension benefit, subject to applicable offsets, is granted and shall be effective as of August 20, 2022. The salary attached to the rank held by Applicant at the date of suspension of duty or retirement is \$105,580.00 per year.

**BOARD OF TRUSTEES OF THE
BLOOMINGTON POLICE PENSION
FUND**

By: 
PRESIDENT


SECRETARY


TREASURER

DATE: 11/21/23

CERTIFICATE OF SERVICE

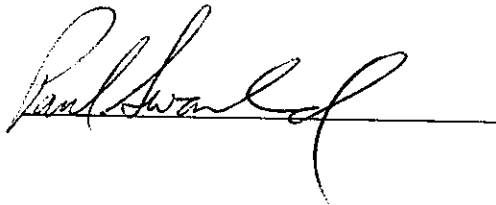
I, Paul Swanlund, a non-attorney, being first duly sworn on oath states that (s)he served copies of the attached Decision and Order, and Certificate of Payment, on the person(s) named below by depositing same this 21st day of December, 2023 in the U.S. mailbox at Bloomington Police Dept. 305 S. East St.:
Bloomington, IL 61701

(X) PRIORITY MAIL SIGNATURE CONFIRMATION (X) FIRST CLASS MAIL/EMAIL

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Amber Bischler
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