KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	17-292-CJ	Version Type:	AMENDED
Report Date:	11/6/2020 2:04 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Jefferson County Sheriff's Dept.	Agency Address:	PO BOX 3522
Agency City:	Beaumont	Agency State:	TX
Agency Zip:	77704		

Director Information

Director Salutation:	Sheriff	Director First Name:	Zena
Director Middle Name:			
Director Last Name:	Stephens		
Reporter Name:	Zena Stephens	Reporter Email:	sheriffs@co.jefferson.tx.us

Decedent Information

Identity of Deceased

First Name: Howard

Middle Name: Gene

Last Name: Fletcher

Suffix:

Date of Birth: 12/28/1946 Sex: Male

Race: Anglo or White

Age At Time Of Death: 70

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident: 6/4/2017 6:35 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 6/4/2017 7:51 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: Yes, results pending

What was the manner of death? (select only one)

Manner of Death: Pending autopsy results

Medical Cause of Death:

Medical Cause of Death:

Autopsy noted 1) Severe pulmonary emphysema 2) Mucus in airways 3) Hepatic nodules 4) Adrenal nodules 5) Cachexia 6) Pending toxicology, investigation report and medical records review.

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Yes

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Not applicable

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?: Not Applicable

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?: Pre-existing medical condition

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Not applicable, cause of death was illness/natural cause

Location / Custody Information

Where did the event causing the death occur?

Street Address:	5030 Hwy 69 S	City:	Beaumont
County:	Jefferson	Zip:	77705

What location category best describes where the event causing the death occurred?

Location Category:	Law Enforcement Facility

What type of custody/facility was the Decedent in at the time of death:

Type of Custody:	County Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:
Hospital/Infirmary

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:	3/22/2017 11:00 AM

Where did the death occur?

Death Location:	Medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?:	No

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Failure to Register as a Sex Offender

Offense 2:

Offense 3:

Were the Charges:: Convicted

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Other, specify

Type of Offense, Other:

Failure to comply with Sex Offender Registration requirements

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons: No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?: No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	No	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	Exhibit any medical problems?:	Yes

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	No	Resist being handcuffed or arrested?:	No
Physically attempt/assault officer(s):	No	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:	No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

Elderly decedent entered the facility on 3/22/2017 with chronic respiratory (COPD) and circulatory diseases (hypertension). There were several incidents documented in his medical records showing he was not cooperative in obtaining treatment for his medical conditions.

On 6/03/17 at 11:00 p.m. another inmate housed in the infirmary with the decedent noticed the decedent was having trouble breathing and reported it to medical staff. Medical staff attempted to walk the decedent to the area used to provide a breathing treatment. The decedent refused treatment and asked to be returned to his bunk. His request was granted by medical staff.

On 6/04/17 at 4:00 a.m. decedent was assisted with taking a shower after soiling his clothes and bed linen. At 4:30 a.m. the decedent refused the breakfast offered. At 6:35 a.m., the decedent was found unresponsive in his bunk. CPR was initiated by medical staff and continued by EMS when they arrived. Decedent was transported to the Medical Center of Southeast Texas Hospital where he was pronounced deceased at 07:51 a.m.

On 6/05/17, Dr. Ami Murphy, D.O. conducted the autopsy as ordered by Justice of the Peace Tom Gillam. Her findings
were as follows:
1. Severe Pulmonary emphysema
2. Mucus in airways
3. Hepatic nodules
4. Adrenal nodules
5. Cachexia
6. Pending toxicology, investigation and medical records review

Preliminary cause of death: Pending
Preliminary manner of death: Pending