KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-1130-CJ	Version Type:	AMENDED
Report Date:	7/29/2019 10:48 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Tarrant County Sheriff's Dept.	Agency Address:	200 Taylor St., Plaza Bldg. 7th Floor
Agency City:	Fort Worth	Agency State:	TX
Agency Zip:	76196		

Director Information

Director Salutation:	Sheriff	Director First Name:	Bill
Director Middle Name:			
Director Last Name:	Waybourn		
Reporter Name:	Michael Gravitt	Reporter Email:	mlgravitt@tarrantcounty.com

Decedent Information

Identity of Deceased

First Name: Clinton

Middle Name: Don

Last Name: Simpson

Suffix:

Date of Birth: 8/30/1942 Sex: Male

Race: Anglo or White

Age At Time Of Death: 76

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

Date/Time of Custody or Incident: 7/10/2018 2:00 PM

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

Death Date and Time: 11/7/2018 3:09 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 are available

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

Manner of Death: Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Blunt Force Trauma

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

Medical Treatment: No

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

Who caused the death?: Other detainee(s)

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?: Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

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

Means of Death: Other, specify

Means of Death Other: Inmate was struck and kicked repeatedly with a closed fist and foot

Location / Custody Information

Where did the event causing the death occur?

Street Address:	600 W Weatherford	City:	Fort Worth
County:	Tarrant	Zip:	76196

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:
Jail - multiple occupancy cell

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:	7/10/2018 1:46 PM

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?: Yes

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:

Aggravated Sexual Assault of a Child

Offense 2:

Offense 3:

Were the Charges:: Filed

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

Type of Offense: Crimes Against Child(ren)

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?: Yes

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:

Clinton Don Simpson W/M 8/30/1942 CID #0716153 was booked into the Tarrant County Jail on 7/10/2018 at 1346 hrs. Mr. Simpson was Bench Warranted back from Big Spring State Hospital to finish TCSO charges for Aggravated Sexual Assault of a Child. Mr. Simpson was housed in the Lon Evans Facility in the infirmary housing area 74A Cell #10. Mr. Simpson was classified by MHMR as "suicidal prevention classification" Additionally, inmate David Flores W/M 11/12/75 CID #0554420 was also classified "suicidal prevention classification" and was housed in 74A Cell #10 with Mr. Simpson.

On 11/7/18 Officer Tina Myles #75452 performed a 10 min SPC check of the housing unit, 74A Cell #10 at 0215 hrs. with no issues discovered. At 0222 hrs. Officer Myles heard noises coming from 74A Cell #10 and went to the cell to check on the inmates. Officer Myles observed Mr. David Flores striking Mr. Clinton Simpson in the facial area. Officer Myles called a Code 6 Sig 4 (inmate fight) over the radio.

Officer responded to the fight and made entry into the cell at 0223 hrs. Mr. Simpson was immediately cared for by medical staff who had responded to the code. Mr. Simpson was subsequently transported to John Peter Smith Hospital in Fort Worth, Texas. At 0309 hrs. Dr. Mann of John Peter Smith Hospital declared Mr. Simpson deceased.

The Department of Public Safety, Texas Ranger Division is conducting the death and criminal investigation.