KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-925-PF	Version Type:	ORIGINAL VERSION
Report Date:	9/25/2018 2:09 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Wichita Falls Police Dept.	Agency Address:	610 Holliday St.
Agency City:	Wichita Falls	Agency State:	TX
Agency Zip:	76301		

Director Information

Director Salutation:	Chief	Director First Name:	Manuel
Director Middle Name:			
Director Last Name:	Borrego		
Reporter Name:	Ginger Gilmore	Reporter Email:	ginger.gilmore@wfpd.net

Decedent Information

Identity of Deceased

First Name: Shane

Middle Name: Jabar

Last Name: Clement

Suffix:

Date of Birth: 8/3/1974 Sex: Male

Race: Black or African American

Age At Time Of Death: 44

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

Date/Time of Custody or Incident: 1/10/2014 1:44 AM

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

Death Date and Time: 8/31/2018 1:10 AM

Manner / Cause of Death

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

Medical Examiner/Coroner Evaluation?: No, evaluation not planned

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

Manner of Death: Alcohol/Drug Intoxication

Medical Cause of Death:

Medical Cause of Death:

Anoxic brain injury from drug overdose

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

Medical Treatment: Not Applicable

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?: 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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1200 Ridgeway Dr.
City: Wichita Falls
County: Wichita
Zip: 76306

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

Location Category: Roadway/highway/street/sidewalk

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

Type of Custody: Private Facility

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:

Entry Date Time N/A: ☑

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:

Possession of a Controlled Substance PG 1 >=4G < 200G

Offense 2:

Offense 3:

Were the Charges:: Not filed at time of death

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

Type of Offense: Alcohol / drug offense

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): Yes

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:	Yes
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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs

Summary of Incident

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

Summary:

On 01-10-14 at approximately 0144 hours, an officer of the Wichita Falls Police Department initiated a traffic stop on a vehicle. The vehicle came to a stop in the parking lot of an apartment complex. The driver, later identified as Shane Jabar Clement, jumped out of the driver's seat of the vehicle and fled on foot. The officer pursued Clement on foot, caught him, tackled him and handcuffed him. Clement began saying he couldn't breathe. The officer summoned an ambulance to the scene. Clement became unconscious. He was transported to the emergency room. The assessment of Clement in the ER indicated the following: respiratory failure, multi-drug overdose, status post cardiac arrest, anemia, leukocytosis, and severe metabolic acidosis. His drug screen was positive for methamphetamine, benzodiazepine, opiates, and cannabinoids. Medical records indicate that there were no injuries to Clement and CT scans of his brain, chest and abdomen were unremarkable. Clement was diagnosed with anoxic encephalopathy which left him in a persistent vegetative state from which he never recovered. He died on 08-31-18 under hospice care.