KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-689-CJ	Version Type:	AMENDED
Report Date:	2/11/2020 9:03 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Upshur County Sheriff's Dept.	Agency Address:	405 N. Titus
Agency City:	Gilmer	Agency State:	TX
Agency Zip:	75644		

Director Information

Director Salutation:	Sheriff	Director First Name:	Larry
Director Middle Name:	M		
Director Last Name:	Webb		
Reporter Name:	Larry Webb	Reporter Email:	larry.webb@countyofupshur.com

Decedent Information

Identity of Deceased

First Name: Omega

Middle Name: Lynn

Last Name: McCellon

Suffix:

Date of Birth: 7/30/1953 Sex: Male

Race: Anglo or White

Age At Time Of Death: 65

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

Date/Time of Custody or Incident: 3/4/2019 6:00 PM

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

Death Date and Time: 7/12/2019 12:41 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: Natural

Medical Cause of Death:

Medical Cause of Death:

Autopsy results determined the Decedent death was caused by natural causes.

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: 700 E Marshall AVE

City: Longview

County: Gregg

Zip: 75601

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

Location Category: Business

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: 3/4/2019 6:00 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/ F-1 (count 1)

Offense 2:

Aggravated Sexual Assault of a Child/ F-1 (count 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?: No

Exhibit any medical problems?: No

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:

On July 11, 2019 at approx. 2315 hrs. the Upshur County Jail Staff was notified that an inmate was not feeling well by other inmates in his cell. Jail staff responded to the inmate’s location to assist him. While the jail staff was evaluating the inmate to determine what was wrong, he become unresponsive. A call was made for EMS to respond to the jail for and unresponsive inmate. An Upshur Deputy, who is also a certified EMT, was at the jail for an unrelated incident. The Deputy/ EMT assisted the jail staff with emergency medical treatment of the inmate until EMS arrived. Once EMS arrived they started treating the inmate and transported him to Good Shepherd Hospital in Longview, Texas where he died. The inmate’s family has been notified of the incident. The inmate is identified as 65 year old Omega Lynn McCellon. Mr. McCellon was being held in the Upshur County Jail for two counts of Aggravated Sexual Assault of a Child. Gregg County JP1 BH Jameson responded to the hospital performing an inquest and ordered an autopsy. The Texas Rangers are investigating the incident.