KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	21-1351-CJ	Version Type:	ORIGINAL VERSION
Report Date:	10/12/2021 3:23 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Haskell County Sheriff's Dept.	Agency Address:	PO BOX 675
Agency City:	Haskell	Agency State:	TX
Agency Zip:	79521		

Director Information

Director Salutation:	Sheriff	Director First Name:	David
Director Middle Name:			
Director Last Name:	Halliburton		
Reporter Name:	Judith Bennett	Reporter Email:	judith@lasallecorrections.com

Decedent Information

Identity of Deceased

First Name: Keith

Middle Name:

Last Name: Howard

Suffix:

Date of Birth: 12/20/1984

Sex: Male

Race: Black or African American

Age At Time Of Death: 36

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

Date/Time of Custody or Incident: 3/5/2021 4:42 PM

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

Death Date and Time: 9/17/2021 1:48 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: Natural

Medical Cause of Death:

Medical Cause of Death:

End stage of liver failure secondary to alcoholic cirrhosis of the liver, acute renal failure

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: 1900 Pine ST
City: Abilene
County: Taylor
Zip: 79601

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

Location Category: Other, specify

Other Location Category:

Hendrick Hospital

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: 3/5/2021 4:42 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:

United States Marshall Service Hold

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: Other, specify

Type of Offense, Other:

United States Marshall Service Hold

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:

Haskell County Sheriffs Office contracts with LaSalle Corrections to hold county inmates, United States Marshall inmates and Immigration inmates. Keith Howard was in custody of the USMS hold for the Western District out of Midland, TX. No local holds.
On Tuesday September 14, 2021 at 1500 hours USMS Keith Howard USMS # 2021035262 was transported by facility van to Hendricks Hospital in Abilene TX. He was admitted into the hospital for end stage liver failure, secondary to alcoholic cirrhosis of the liver, acute renal failure. He also had asthma, hepatic encephalopathy, hypokalemia. USMS Howard passed away on 09/17/2021 at 0148 hrs. LaSalle Corrections Officers present was Sgt. Melvin Wagner and Correction Officer Timothy Hardeman. Unites States USMS service Shannon Moye from the Western District arrived and took scene over and LaSalle officers returned to the unit.