KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	22-291-CJ	Version Type:	AMENDED
Report Date:	9/11/2024 7:24 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Tarrant County Sheriff's Office	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:	Clifton Shelton	Reporter Email:	cjshelton@tarrantcounty.com

Decedent Information

Identity of Deceased

First Name: James

Middle Name: Carrell

Last Name: New

Suffix:

Date of Birth: 12/17/1941 Sex: Male

Race: Anglo or White

Age At Time Of Death: 80

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

Date/Time of Custody or Incident: 12/20/2020 2:05 AM

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

Death Date and Time: 2/19/2022 3:34 PM

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:

Recovering from COVID 19, Chest Pain, Hypothermia

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?: Could not be determined

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:	100 N. Lamar St.	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:
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:	12/20/2022 2:05 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:

Aggravated Assault with Deadly Weapon

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: Violent Crime Against Persons

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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Leg Shackles

Summary of Incident

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

Summary:

Notification of the death while in custody of James Carrell New (W/M 12-17-1941 TCSO CID #0968641 TX DL #04519714) on Saturday, February 19, 2022 at 3:34 pm. Inmate New was brought to the custody of the Tarrant County Sheriff on December 20, 2020 at 2:00 am on an Aggravated Assault with a Deadly Weapon charge from the Arlington Police Department. Inmate New had a set bond amount of $25,000.00 by Magistrate Calzada on December 22, 2020 and was booked into custody while at the Medical City Arlington Hospital. During the current custodial trip to the hospital, Inmate New was transferred to the John Peter Smith Hospital (JPSH) on January 28, 2022 for Hypothermia with chest pain. Inmate new tested positive for COVID on January 20, 2022 and tested non-infectious on February 14, 2022. Dr. Mahatavani of JPSH pronounced Inmate New deceased at 3:34 pm on January 19, 2022. Detectives responded to the hospital to conduct the initial investigation and contacted the Tarrant County Medical Examiner’s Office (TCME), who advised that an autopsy would not be conducted on Inmate New. Detective K. Williams has been assigned to conduct the death investigation for TCSO, Service #2022-02209. The outside agency death investigation will be conducted by the Fort Worth Police Department Major Case Unit supervised by Sergeant J. Phillips.

Outside review complete as of Sep 11, 2024. Investigation complete and closed as natural death.