



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 17-435-CJ

Version Type: ORIGINAL
VERSION

Report Date: 8/28/2017 9:00 AM

Status: Submitted

Agency/Facility Information

Agency Name: Brazos County
Sheriff's Office.

Agency Address: 1700 Hwy. 21 West

Agency City: Bryan

Agency State: TX

Agency Zip: 77803

Director Information

Director Salutation: Sheriff

Director First Name: Christopher

Director Middle Name:

Director Last Name: Kirk

Reporter Name: Kevin Stuart

Reporter Email: kstuart@brazoscountytexas.gov

Decedent Information

Identity of Deceased

First Name: Darryl

Middle Name: Gustavis

Last Name: Williams

Suffix:

Date of Birth: 9/15/1963

Sex: Male

Race: Black or African
American

Age At Time Of Death: 53

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

Date/Time of Custody or
Incident: 8/23/2017 7:15 PM

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

Death Date and Time: 8/24/2017 5:39 PM

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:

Stroke

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: 1835 Sandy Point
Rd

City: Bryan

County: Brazos

Zip: 77807

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: 5/18/2017 12:56
PM

Where did the death occur?

Death Location: Elsewhere, specify

Death Location Elsewhere:

Hospital

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:

Writ of Commitment for Child Support

Offense 2:

Offense 3:

Were the Charges:: Convicted

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:

Civil Commitment/Child Support

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:

On Wednesday, August 23, 2017, Darryl Williams was assigned to a direct supervision housing unit at the Brazos County Detention Center. At approximately 1915hrs inmates in the housing unit notified the officer that Mr. Williams was not well. Mr. Williams told the officer that he was fine but the officer could tell something was wrong and immediately notified the medical department. Medical staff arrived in the dorm within 45 seconds and began evaluating Mr. Williams. Mr. Williams became unresponsive and had a high blood pressure reading. An ambulance was called and Mr. Williams was transported to the hospital. After being evaluated at the hospital we learned that Mr. Williams had a brain bleed that could not be operated on. After Mr. Williams' family members arrived throughout the night and next day he was removed from life support and passed away on August 24, 2017 at 1739hrs. An autopsy was ordered and performed the morning of August 25, 2017. The cause of death was determined to be Stroke.