



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 17-5-CJ

Version Type: AMENDED

Report Date: 1/20/2017 9:58 AM

Status: Submitted

Agency/Facility Information

Agency Name: Harris County
Sheriff's Dept.

Agency Address: 1200 Baker Street

Agency City: Houston

Agency State: TX

Agency Zip: 77002

Director Information

Director Salutation: Sheriff

Director First Name: Ed

Director Middle Name:

Director Last Name: Gonzalez

Reporter Name: Ronny Taylor

Reporter Email: ronny.taylor@sheriff.hctx.net

Decedent Information

Identity of Deceased

First Name: Steven

Middle Name:

Last Name: Sharp

Suffix:

Date of Birth: 6/12/1967

Sex: Male

Race: Black or African
American

Age At Time Of Death: 49

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

Date/Time of Custody or Incident: 10/18/2016 3:55
PM

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

Death Date and Time: 1/7/2017 7:16 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:

Hypertensive cardiovascular disease.

Contributory Conditions: Acquired immunodeficiency syndrome, chronic obstructive pulmonary disease.

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: 1200 Baker Street

City: Houston

County: Harris

Zip: 77002

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:

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 Controlled Substance

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: 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?: Yes

Exhibit any mental health
problems?: Yes

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 January 7, 2017, Inmate Steven Sharp (SPN002861726) died in custody at St. Joseph Hospital, located at 1401 St. Joseph Parkway, Houston, Texas 77002. Inmate Sharp was pronounced deceased by attending physician Dr. M. Shin at 07:16 hours. Inmate Sharp, a Black male, 49 years of age had been in the custody of the Harris County Sheriff's Office since his arrest by HPD for POSS CS PG 1 < 1G with a \$15,000 bond. Case #15275470 is assigned to the 262nd District Court.

The following is a synopsis of the death of Inmate Sharp:

On October 18, 2016 @ 20:26, Inmate Sharp was processed into the Harris County Jail for POSS CS PG 1 < 1G, with a bond of \$15,000.

On January 7, 2017, at approximately 06:10 hours, while making rounds, staff discovered Inmate Sharp lying on the floor in 2B1B, curled up in a blanket, unresponsive. Medical staff began chest compressions and attached an AED. Inmate Sharp was transported to the 1200 Medical Clinic, where medical treatment was continued by Dr. A. Huang. At approximately 06:37 hours, HFD, arrived and continued treatment. At approximately 06:55 hours, Inmate Sharp was transported to St. Joseph Hospital by HFD.

On January 7, 2017, at 07:16 hours, Inmate Sharp was pronounced deceased by Dr. M. Shin.

Autopsy pending. (ME #17-00091)