



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 17-522-CJ

Version Type: ORIGINAL
VERSION

Report Date: 10/6/2017 8:48 AM

Status: Submitted

Agency/Facility Information

Agency Name: Coleman County
Sheriff's Dept.

Agency Address: 100 Liveoak, Suite
101

Agency City: Coleman

Agency State: TX

Agency Zip: 76834

Director Information

Director Salutation: Sheriff

Director First Name: Les

Director Middle Name:

Director Last Name: Cogdill

Reporter Name: Les Cogdill

Reporter Email: lesc@co.coleman.tx.us

Decedent Information

Identity of Deceased

First Name: Derrek

Middle Name: Quenton Gene

Last Name: Monroe

Suffix:

Date of Birth: 6/29/1989

Sex: Male

Race: Anglo or White

Age At Time Of Death: 28

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

Date/Time of Custody or
Incident: 10/1/2017 8:38 AM

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

Death Date and Time: 10/2/2017 8:49 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Yes, results
Evaluation?: pending

What was the manner of death? (select only one)

Manner of Death: Suicide

Medical Cause of Death:

Medical Cause of Death:

HANGING

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: No

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Decedent

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?: Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Hanging, strangulation

Location / Custody Information

Where did the event causing the death occur?

Street Address: 100 Liveok Street
Suite 101

City: Coleman

County: Coleman

Zip: 76834

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 - single 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: 9/29/2017 1:05 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:

MAN/DEL CS PG1>=4g<200g

Offense 2:

TAMPER/FABRICATE PHYS EVIDENCE W/INTENT TO IMPAIR

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): Unknown

Make suicidal statements?: Yes

Exhibit any mental health
problems?: Yes

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 SUNDAY OCTOBER 1, 2017 AT APPROXIMATELY 8:38 AM, COLEMAN COUNTY JAILER WAS IN THE CELL AREA NEAR CELL 3 (SINGLE CELL) WHEN AN INMATE BECAME VIOLENT IN CELL 3 AND STARTED HITTING THE PHONE AGAINST THE TABLE IN CELL 3. THE INMATE THEN WRAPPED THE PHONE CORD AROUND HIS NECK AND HUNG HIMSELF. AT THE TIME OF THE INCIDENT THERE WAS ONLY ONE JAILER IN THE JAIL. THE JAILER CONTACTED THE SHERIFF, JAIL ADMINISTRATOR, AND ON DUTY DEPUTY. WHEN THE JAIL ADMINISTRATOR ARRIVED AT THE JAIL THE ON DUTY JAILER ENTERED CELL 3 AND BEGAN LIFE SAVING TREATMENT. THE INMATE WAS TRANSPORTED TO COLEMAN COUNTY MEDICAL CENTER EMERGENCY ROOM BY HEART OF TEXAS EMS. THE INMATE WAS LATER TRANSFERRED TO HENDRICK MEDICAL CENTER IN ABILENE, TEXAS, TAYLOR COUNTY. ON MONDAY OCTOBER AT 8:49 PM THE INMATE WAS PROUNCED DEAD AT HENDRICK MEDICAL CENTER.