KEN PAXTON
ATTORNEY GENERAL of TEXAS

# CUSTODIAL DEATH REPORT

## Agency Information

| | | | |
|---|---|---|---|
| CDR Number: | 22-1360-C | Version Type: | AMENDED |
| Report Date: | 11/30/2022 6:30 AM | Status: | Submitted |

### Agency/Facility Information

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|---|---|---|---|
| Agency Name: | Houston Police Dept. | Agency Address: | 1200 Travis, 16th Floor |
| Agency City: | Houston | Agency State: | TX |
| Agency Zip: | 77002 | | |

### Director Information

| | | | |
|---|---|---|---|
| Director Salutation: | Chief | Director First Name: | Troy |
| Director Middle Name: | | | |
| Director Last Name: | Finner | | |
| Reporter Name: | Kimberly Fowler | Reporter Email: | kimberly.fowler@houstonpolice.org |

## Decedent Information

### Identity of Deceased

First Name: Burrell

Middle Name:

Last Name: Thomas

Suffix:

Date of Birth: 9/17/1955

Sex: Male

Race: Black or African American

Age At Time Of Death: 67

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

Date/Time of Custody or Incident: 9/26/2022 5:01 PM

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

Death Date and Time: 9/27/2022 3:01 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: Suicide

## Medical Cause of Death:

Medical Cause of Death:

Toxic effects of metformin and ethanol

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

Medical Treatment: Not Applicable

## 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: Drug overdose

# Location / Custody Information

## Where did the event causing the death occur?

| | | | |
|---|---|---|---|
| Street Address: | 5317 Kenilwood | City: | Houston |
| County: | Harris | Zip: | 77033 |

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

Location Category: Residence/Home

## What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Police Custody (pre-booking)

## Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel subsequent to arrest

## 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:

Felony Warrant-Agg Assault-FV

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: Medical / Mental Health assistance call

## 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?: 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 09/26/2022, Officers were dispatched to 5317 Kenilwood Dr. in regards to a Suicide-Just Occurred call. Officers arrived to find medics with the Houston Fire Department providing medical aid to Burrell Thomas inside the living room of the residence. Officers were advised by a witness that Mr. Thomas had taken pills earlier in the day and he had been drinking alcohol with the pills. The witness called for help after finding Mr. Thomas unresponsive Mr. Thomas had a history of depression and had attempted suicide a few years prior. Officers completed a criminal history check on Mr. Thomas as medics were administering aid and Officers found Mr. Thomas to have an active felony warrant for Aggravated Assault for Aggravated Assault-Family Violence. Officers confirmed the warrant and accompanied medics along with Mr. Thomas to the hospital. Medics provided CPR to Mr. Thomas while enroute to the hospital and he was unresponsive the entire time officers maintained custody. Mr. Thomas was pronounced deceased by doctors at the hospital while in custody for the felony warrant.