KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number:	PA16270CJ	Report Date:	6/29/2016 10:21 AM
Status:	Submitted		

Agency/Facility Information

Department ID:	361	Department Type:	SHERIFF
Agency Name:	Harris County Sheriff's Office	Agency Number:	TX1010000
Agency Phone:	7137557341	Agency Address:	1200 Baker Street
Agency City:	Houston	Agency County:	Harris
Agency State:	TX	Agency Zip:	77002

Director Information

Director Salutation:

Sheriff

Director First Name:

Ron

Director Middle Name:

Director Last Name:

Hickman

Reporter Name:	Ronny R. Taylor, Captain	Reporter Email:	ronny.taylor@sheriff.hctx.net

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1200 Baker Street Jail

City: Houston

County: Harris

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 - detox cell

Custody Type Facility:

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: 6/13/2016 11:43 AM

Where did the death occur?

Death Location: At medical facility

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Christopher

Middle Name:

Last Name: Hendricks

Suffix:

Date of Birth: 6/7/1979 Sex: Male

Ethnicity: Anglo

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

Death Date and Time: 6/27/2016 1:30 PM

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

Date/Time of Custody or Incident:

6/13/2016 11:43 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

Manner of Death Description:

Death Reason:

Not applicable

Medical Cause of Death:

Medical Cause of Death:

Complications of asphyxia by hanging

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?:

Not applicable; cause of death was suicide, intoxication or illness/natural causes

Death Causer Other:

If a weapon caused the death, what type of weapon caused the death? (mark all that apply)

Type of Death Weapon:

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

General Information

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:

Assault Bodily Injury / Family Violence

Offense 2:

Offense 3:

Were the Charges::

Filed

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by NA

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs): No

Exhibit any mental health problems?:

Exhibit any medical problems?:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Threaten the officer(s) involved:	No	Resist being handcuffed or arrested?:	No
Try to escape/flee from custody:	No	Grab, hit or fight with the officer(s):	No

Other Behavior:

Specify Other Behavior:

Use weapon threaten/assault officer(s): 0

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 June 13, 2016, Inmate Christopher Hendricks (SPN # 01846651) was booked into the Harris County Jail on a felony charge of Assault Bodily-Injury/Family Member and a misdemeanor charge of Driving While License Invalid. After intake processing, Inmate Hendricks was housed in the 1200 Baker Street medical infirmary, dormitory MD1, for detoxification treatment. On June 17, 2016, at 2005 hours, inmates in MD1 alerted staff members that Inmate Hendricks was hanging by his neck from a sheet tied to a shower head. Staff members entered MD1, utilized a cut-down tool to free Inmate Hendricks from the sheet, and immediately began CPR. At 2015 hours, Houston Fire Department personnel arrived at the 1200 Baker Street clinic and took over CPR from jail medical staff. At 2043 hours, HFD transported Inmate Hendricks to St. Joseph’s Hospital where he was placed on life support in the Neuro Intensive Care unit. On June 25, 2016 @ 1:22 PM the charges against Inmate Hendricks were dismissed and Inmate Hendricks subsequently On June 27, 2016, at 1:30 p.m. Inmate Hendricks was pronounced deceased by Doctor Barriga.