



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 23-847-CJ

Version Type: ORIGINAL
VERSION

Report Date: 7/13/2023 2:03 PM

Status: Submitted

Agency/Facility Information

Agency Name: Bexar County
Sheriff's Office

Agency Address: 200 N. Comal

Agency City: San Antonio

Agency State: TX

Agency Zip: 78207

Director Information

Director Salutation: Sheriff

Director First Name: Javier

Director Middle Name:

Director Last Name: Salazar

Reporter Name: Crystal Esquibel

Reporter Email: crystal.esquibel@bexar.org

Decedent Information

Identity of Deceased

First Name: Jose

Middle Name: Trinidad

Last Name: Barrera

Suffix:

Date of Birth: 5/6/1963

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 60

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

Date/Time of Custody or
Incident: 6/1/2023 9:24 AM

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

Death Date and Time: 7/7/2023 2:33 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:

Complications of Intraventricular Hemorrhagic Stroke

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?: 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?: Could not be determined

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: St. Luke's Baptist
Hospital 7930 Floyd
Curl Dr.

City: San Antonio

County: Bexar

Zip: 78229

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: 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: 6/1/2023 9:24 AM

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:

Terrorist Threat of Family

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: Violent Crime
Against Persons

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: Unknown

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

Attempt to Injure Others?: Unknown

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?: Unknown

Exhibit any mental health
problems?: Unknown

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?: Unknown

Resist being handcuffed or
arrested?: Unknown

Physically attempt/assault officer(s): No

Gain possession of officer's weapon: No

Verbally threaten other(s) including law: Unknown

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, June 28, 2023, a Code 1 Blue (Medical Emergency) was initiated for inmate Barrera, Jose #335835, at the Bexar County Adult Detention Center, Annex. Inmate was transported to St. Luke's Baptist where he remained until his death on July 7, 2023. On Friday, July 7, 2023, at approximately 1235 hours, inmate was transported from his assigned hospital room to the operating room to prepare for organ harvesting surgery. At 1328 hours, inmate was removed from the ventilator. At 1403 hours, it was reported that the inmate stopped breathing. At 1433 hours, inmate was pronounced deceased per Dr. Francisco Guarjardo, while RN Olivia Goush was present. At the time of death, surgery commenced. The procedure was reported as completed at 1622 hours. The inmate was transported to the mortuary at 1711 hours.