



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 21-1821-PF

Version Type: AMENDED

Report Date: 2/3/2023 10:33 AM

Status: Submitted

Agency/Facility Information

Agency Name: Aransas Pass
Police Dept.

Agency Address: 600 Cleveland Blvd.

Agency City: Aransas Pass

Agency State: TX

Agency Zip: 78336

Director Information

Director Salutation: Chief

Director First Name: Eric

Director Middle Name:

Director Last Name: Blanchard

Reporter Name: Eric Blanchard

Reporter Email: chief@aptx.gov

Decedent Information

Identity of Deceased

First Name: Willard

Middle Name: Fuston

Last Name: Smith

Suffix:

Date of Birth: 11/6/1955

Sex: Male

Race: Anglo or White

Age At Time Of Death: 65

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

Date/Time of Custody or Incident: 11/20/2021 9:01 AM

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

Death Date and Time: 11/1/2021 12:00 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:

Probable Atherosclerotic Heart 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: 3315 S. Alameda
Street

City: Corpus Christi

County: Nueces

Zip: 78411

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

Location Category: Other, specify

Other Location Category:

Corpus Christi Medical Center Doctors Regional

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

Type of Custody: Private Facility

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:

The subject was under a Peace Officer's Warrant for Mental Health Evaluation. (Texas HSC Chapter 573)

Offense 2:

Offense 3:

Were the Charges:: Not filed at time of death

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): Unknown

Make suicidal statements?: No

Exhibit any mental health problems?: Yes

Exhibit any medical problems?: Unknown

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:

Officers were sent to a problem with a subject call at Willard's trailer. When they arrived, they found Willard completely naked and lying in water from a garden hose he had turned on stating he was trying to wash the poison from his body. Willard was also pulling out chunks of pubic hair from his body. Willard is known to suffer from mental health-related issues and was a known consumer of mental health services to law enforcement. Officers determined that Willard was experiencing a mental health crisis and required inpatient evaluation and treatment. Officers also feared that he may experience hypothermia from being in the water and outside while it was cold.

Tri-County EMS was summoned to respond, took custody of Willard on the mental health peace officer warrant, and transported him to ER 24/7 in Portland, Texas. An officer followed the ambulance to the ER facility and then departed the scene once ER medical staff accepted Willard. It was later learned that Willard was transported to another medical facility for inpatient mental health treatment after he was medically cleared by ER 24/7 Portland. It was there at that next facility while still under the authority of the Peace Officer's Chapter 573 Texas HSC warrant when Willard experienced a major medical event and died.