



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-1335-C

Version Type: AMENDED

Report Date: 11/10/2020 11:09
AM

Status: Submitted

Agency/Facility Information

Agency Name: Lago Vista Police
Dept.

Agency Address: 5901 Municipal
Complex Way

Agency City: Lago Vista

Agency State: TX

Agency Zip: 78645

Director Information

Director Salutation: Chief

Director First Name: Robert

Director Middle Name: D

Director Last Name: Smith

Reporter Name: Frank Allocca

Reporter Email: frank.allocca@pd.lagovistatexas.gov

Decedent Information

Identity of Deceased

First Name: Duncan

Middle Name: Robert

Last Name: Stewart

Suffix:

Date of Birth: 1/22/1994

Sex: Male

Race: Anglo or White

Age At Time Of Death: 25

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

Date/Time of Custody or
Incident: 1/12/2020 5:39 PM

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

Death Date and Time: 1/12/2020 7:38 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: Suicide

Medical Cause of Death:

Medical Cause of Death:

Toxic Effects of Bupropion, Aripiprazole, Dextromethorphan, Diphenhydramine, Hydroxyzine 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: Yes

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?: Pre-existing medical condition

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: 20709 Henry
Avenue

City: Lago Vista

County: Travis

Zip: 78645

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:

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: 11/10/2020 11:01
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?: 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:

Aggravated Assault with a Deadly Weapon

Offense 2:

Burglary of a Habitation

Offense 3:

Burglary of a Habitation

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: 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: Yes, mark all that apply

Decedent Display or Use Weapon Details: Used other weapon, specify:

Specify Weapon Used:

Double sided axe/hatchet used to strike mother in the head and shoulder area causing injury

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

Attempt to Injure Others?: Yes (select all that apply)

Ways Decedent Attempted To Injure Others: Injured civilian(s) or other inmate(s)

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?: Unknown

Exhibit any mental health problems?: N/A

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?: Yes

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: Yes, mark which restraint devices were used

Type of restraint

Type of Restraint: Handcuffs

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

01-12-2020, deceased was reported by parents to be "out of control". It was determined through investigation that deceased had struck his mother in the head with an axe causing injury. Deceased became engaged in a physical confrontation with his father who was attempting to stop deceased from taking prescription meds he had already taken. Deceased ran from the residence after the assaults and forced entry into two homes in the neighborhood, running through the residences yelling "I need knives" as he went through the kitchen of one, causing residents to call 911. Deceased jumped off the back balcony of the second residence he forced entry

into, which is perched on a cliff. Officers located deceased coming out of the woods near this second residence. As deceased approached the street he stopped and went to the ground, facedown with one arm under him. As officers secured deceased with handcuffs, he resisted and was non-compliant. Once deceased was secured in handcuffs officers placed him in a sitting position. Officers saw that deceased had cuts/scratches on him and officers requested EMS. Deceased was asked twice if he had taken anything (drugs) and he answered both times saying that he took "everything". Deceased began using his legs to push away from officers and roll back and forth as they attempted to stand him up. Because of this, deceased was laid on his side and EMS began to evaluate him. During this time, EMS attempted to place soft restraints on deceased, but he continued to resist so officers held his legs in place as EMS tried to secure him with soft restraints so handcuffs could be removed. EMS determined that deceased should be sedated for transport to the ER with soft restraints on. Before this could be done deceased stopped resisting. A second evaluation was done by EMS and CPR was then started. Deceased was transported to the ER and about (2) two hours later reporting agency was notified that he was pronounced deceased.