KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	20-1392-CJ	Version Type:	ORIGINAL VERSION
Report Date:	10/19/2020 10:20 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Bowie County Sheriff's Office	Agency Address:	100 North State Line, BOX 18
Agency City:	Texarkana	Agency State:	TX
Agency Zip:	75501		

Director Information

Director Salutation:	Sheriff	Director First Name:	JAMES
Director Middle Name:	W		
Director Last Name:	PRINCE		
Reporter Name:	Robby McCarver	Reporter Email:	robby.mccarver@bowiecounty.org

Decedent Information

Identity of Deceased

First Name: Charles

Middle Name: V

Last Name: Simmons

Suffix:

Date of Birth: 1/19/1955 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: 3/7/2016 11:20 AM

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

Death Date and Time: 10/18/2020 7:47 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: No, evaluation not planned

What was the manner of death? (select only one)

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Complications of Covid 19

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?:	Deceased developed condition after admission

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:	105 West Front Street	City:	Texarkana
County:	Bowie	Zip:	75501

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

Location Category:	Law Enforcement Facility

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 - multiple occupancy cell

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:	3/7/2016 11:20 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:

Serving Sentence carried out by the Arkansas Department of Corrections

Offense 2:

Offense 3:

Were the Charges:: Convicted

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Other, specify

Type of Offense, Other:

Serving sentence with Arkansas Department of Corrections under contract with our facility

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): No

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:

Charles V. Simmons was in the Bowie County Jail Annex under contract with Arkansas Department of Corrections. He experienced respiratory issues and was diagnosed with Covid 19 while incarcerated in our facility. Simmons was hospitalized on 10-16-2020 at Wadley Regional Medical Facility. Simmons died as a result of Covid 19 and was pronounced by Dr. Farahnaz Haroon at 21:47. The Southwestern Institute of Forensic Sciences at Dallas was contacted due to the Covid 19 concerns and we were advised that they would not accept Simmons for examination (citing his attended death at a medical facility). TX Ranger Joshua Mason was notified for outside agency investigation into the incident.