

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-1035-CJ

10/11/2019 4:07

Report Date: P

Version Type: ORIGINAL VERSION

Status: Submitted

Agency/Facility Information

Agency Name: Midland County Sheriff's Dept.

Agency City: Midland

Agency Zip: 79701

Agency Address: 400 S. Main Street

Agency State: TX

Director Information

Director Salutation: Sheriff Director First Name: Gary

Director Middle Name:

Director Last Name: Painter

Decedent Information

First Name: Savion

Middle Name: Vashon

Last Name: Hall

Suffix:

Date of Birth: 3/30/1989 Sex: Male

Race: Black or African American

Age At Time Of Death: 30

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

Date/Time of Custody or 6/21/2019 10:43

Incident: AM

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

Death Date and Time: 7/19/2019 7:00 PM

Manner / Cause of Death

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

Medical Examinor/Coroner No, evaluation not

Evalution?: planned

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

Manner of Death: Natural Medical Cause of Death: Medical Cause of Death: Unknown, subject was released to hospital custody 07/11/2019 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 Not Applicable death?: 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 Pre-existing medical condition?: condition If death was an accident, homicide or suicide, what was the means of death?

Not applicable, cause of death was Means of Death: illness/natural

cause

Location / Custody Information

Where did the event causing	Where did the event causing the death occur?				
Street Address:		-	Midland		
County:	Midland	Zip:	79702		
What location category best describes where the event causing the death occurred?					
Location Category:	Law Enforcement Facility				
What type of austody/facilit	www.s.tha Dacadant in at the time of da	oth:			
wriat type of custody/facilit	y was the Decedent in at the time of dea	auı.			
Type of Custody:	County Jail				
Specific type of custody/fac	cility:				
ор от то	,				
	Specific Type of Custody/Facility:				
Hospital/Infirmary					
What was the time and dat	e of the deceased's entry into the law er	nforce	ement facility where		
the death occurred (mm/dd	l/yyyy hh:mm AM/PM):				
Entry Date Time:	6/21/2019 11:31				
Entry Date Time:	AM				
Where did the death occur	?				
Death Location:	Medical facility				
General Information					

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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 b	ງeen)
charged with at the time of death?			

charged with at the time of	ueaur:
Violation of Probation	Offense 1:
	Offense 2:
	Offense 3:
Were the Charges::	Convicted
What were the types of cha	rges or reason for contact? (Hold CTRL to select all that apply)
Type of Offense:	Alcohol / drug offense
At any time during the incid display or use a weapon?	ent and/or entry into the law enforcement facility, did the decedent
Decedent display/use of weapons:	No
At any time during the incid	ent and/or entry into the law enforcement facility, did the decedent:
Attempt to Injure Others?:	No
At any time during the incid	ent 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 No

standoff?:

Resist being handcuffed or No

arrested?:

Physically attempt/assault

officer(s):

No

Gain possession of officer's

weapon:

Verbally threaten other(s)

No

Escape or attempt to

including law:

Attempt gain possession officer's weapon:

escape/flee custody:

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:

Subject had breathing problems and was receiving a breathing treatment in the medical unit on July 11, 2019. The jail doctor decided the subject needed to go to the hospital via EMS due to his oxygen levels. Once at the hospital, the subject stopped breathing, but was resuscitated by hospital staff. Jail staff received a court order to release the subject from custody. Subject was released from custody July 11, 2019. On July 19, 2019 we were advised that subject had passed away at another hospital where he had been transferred (in another county).