

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-881-P

9/20/2021 12:54 Report Date:

Version Type: AMENDED

Status: Submitted

Agency/Facility Information

TDCJ/Office of the Agency Name:

Inspector General

Agency City: Huntsville

Agency Zip: 77320

1012 Veterans Agency Address: Memorial Parkway

Agency State: TX

Director Information

Director Salutation: Director Director First Name: Cris

Director Middle Name:

Director Last Name: Love

Ashley Reporter Name: Reporter Email: oig_custodial_death_reports@tdcj.texas.gov Gutierrez

Decedent Information

identity of Deceased				
First Name:	Ricky			
Middle Name:				
Last Name:	Hernandez			
Suffix:				
Date of Birth:	8/9/1993	Sex:	Male	
Race:	Hispanic or Latino			
Age At Time Of Death:	26			
Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):				
Date/Time of Custody or Incident:				
Date/Time of Death (mm/do	d/yyyy hh:mm AM/PM):			
Death Date and Time:	5/22/2020 2:17 AM			
Manner / Cause of Death				
Has a medical examiner or coroner conducted an evaluation to determine a cause of death?				
Medical Examinor/Coroner Evalution?:				

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

Manner of Death: Suicide

Medical Cause of Death:				
Medical Cause of Death:				
Hanging				
Had the decedent been red after admission to your jail	ceiving treatment for the medical condition that caused the death s jurisdiction?			
Medical Treatment:	Not Applicable			
If death was an accident, h	omicide or suicide, who caused the death?			
Who caused the death?:	Decedent			
who caused the death?.	Decedent			
If a weapon caused the dea	ath, what type of weapon caused the death? (Hold CTRL to select			
Type of weapon that caused	Net Applicable			
death?:	Not Applicable			
Was the cause of death the	a result of a pro-existing modical condition or did the decodent			
Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?				
	Not Applicable;			
Pre existing medical condition?:	cause of death was accidental injury, intoxication, suicide			
	or homicide			
If death was an accident, homicide or suicide, what was the means of death?				
n dedui nde din decident, i	oministra of calcius, mat mas the means of acath.			
Means of Death:	Hanging, strangulation			

Location / Custody Information

Where did the event causir	ng the death occur?			
Street Address:	2661 FM 2054	City:	Tennessee Colony	
County:	Anderson	Zip:	75880	
What location category has	st describes where the event causing the	a daa	th occurred?	
what location category bes	it describes where the event causing the	s uca	in occurred:	
Location Category:	Law Enforcement			
Location Category.	Facility			
What type of custody/facilit	y was the Decedent in at the time of dea	ath:		
Type of Custody:	Penitentiary			
Specific type of custody/fac	cility:			
	Specific Type of Custody/Facility:			
TDCJ, specify				
	TDCJ - Specify Unit:			
Coffield				
What was the time and date of the deceased's entry into the law enforcement facility where				
the death occurred (mm/dd	l/yyyy hh:mm AM/PM):			
	12/1/2017 12:00			
Entry Date Time:	AM			
Where did the death occur	2			
where did the death occur	:			
Death Location:	Medical facility			

General Information

Other Agencies Respond?:	No
What were the most seriou charged with at the time of	s offense(s) with which the deceased was (or would have been) death?
	Offense 1:
Harassment of public servant	
	Offense 2:
	Offense 3:
	Offense 3:
Were the Charges::	Convicted
What were the types of cha	arges or reason for contact? (Hold CTRL to select all that apply)
	Violent Crime
Type of Offense:	Against Persons
At any time during the incic display or use a weapon?	dent and/or entry into the law enforcement facility, did the decedent
Decedent display/use of	NI ₂
weapons:	No
According to the design	
At any time during the incid	dent and/or entry into the law enforcement facility, did the decedent:
Attempt to Injure Others?:	No
At any time during the incic	dent 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?: No

Did any other law enforcement agencies respond to calls for service related to this incident?

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

Barricade self or initiate Resist being handcuffed or No

No standoff?: arrested?:

Physically attempt/assault Gain possession of officer's No

officer(s): weapon:

Verbally threaten other(s) Escape or attempt to No No including law: escape/flee custody:

Attempt gain possession No officer's weapon:

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 May 22, 2020, at approximately 0138 hours, Offender Ricky Hernandez, TDCJ #2165195, was discovered unresponsive and hanging in his cell. The offender was pronounced deceased by medical staff.