LCLE – DEATH IN CUSTODY REPORTING ACT

The Death in Custody Reporting Act of 2013 requires states that receive allocations under specified provisions of the Omnibus Crime Control and Safe Streets Act of 1968 to report certain information regarding the death of any person in law enforcement custody. This may include individuals who are detained, arrested, en route to incarceration, or incarcerated in state or local facilities or a boot camp prison.

Reporting deadlines are listed below. However, you may complete the form any time during the quarter in which a death occurred, instead of waiting until due date.

Program Reports Due	Reporting Period	Quarter
January 10	October 1 – December 31	1st
April 10	January 1 – March 31	2nd
July 10	April 1 – June 30	3rd
October 10	July 1 – September 30	4th

If you have any questions or issues completing this form, please contact **Linda Gautier** at 225.342.1703.

Agency Name *

Claiborne Parish Detention Center

Contact Name *

Roxanne
First

Aubrey
Last

Contact Phone Number *

(318)-927-4201

Contact Email *

roxanne.aubrey@claibornesheriff.org

Reporting Year *

2021

Select the Reporting Period *

- (●) 1st Quarter: October 1 - December 31
- ( ) 2nd Quarter: January 1 - March 31
- ( ) 3rd Quarter: April 1 - June 30
- ( ) 4th Quarter: July 1 - September 30

Decedent Information

Please provide the following decedent information. If you have multiple deaths in custody, you will report one at a time.

CPSO038

First Name *

Rodney

Middle Name

L

Last Name *

Gilbert Jr.

Gender *

- (•) 1. Male
- ( ) 2. Female
- ( ) 3. Other gender identity

Race (Select all that apply) *

- [ ] 1. American Indian or Alaska Native
- [ ] 2. Asian
- [x] 3. Black or African American
- [ ] 4. Native Hawaiian or Other Pacific Islander
- [ ] 5. White
- [ ] 6. Unknown

Ethnicity *

- ( ) 1. Hispanic, Latino, or Spanish Origin
- ( ) 2. Not of Hispanic, Latino, or Spanish Origin
- (•) 3. Unknown

Birth Year (YYYY) *

1976

If unknown, please enter "9999"

Date of Death *

10/19/2021

Time of Death *

17:30

Location of Death - Location Name (if not applicable, enter N/A) *

Claiborne Memorial Medical Center

This could be the name of a facility, place of business, or other designation for the location of death.

Location of Death - Street Address *

620 East College Street

Location of Death - City *

Homer

Location of Death - State *

LA

Zip Code *

71040

If event causing the death occurred in any of the following facilities, please indicate the appropriate facility below. If the event causing the death did not occur in one of the facilities listed below, please use the "None of the above" answer choice.

- 1. Municipal or county jail
- 2. State prison
- 3. State-run boot camp prison
- 4. Contracted boot camp prison
- 5. Any state or local contract facility
- 6. Other local or state correctional facility (to include any juvenile facilities)
- (•) 7. None of the above

Please list the name of the department or agency that detained, arrested, or was in the process of arresting the deceased. *

Claiborne Parish Detention Center

Please indicate the manner of death (Mark only one). *

- A. Execution
- B. Accident
- C. Death attributed to use of force by a law enforcement or corrections officer
- D. Homicide (e.g., an incident between two or more incarcerated individuals resulting in a death)
- E. Natural causes
- F. Suicide
- (•) G. Unavailable, investigation pending
- H. Other

If manner of death is unavailable, please report the agency conducting the investigation and an approximate end date. *

Claiborne Parish Detention Center

Please provide a brief description of the circumstances leading to the death (e.g., details surrounding an event that may have led to the death, the number and affiliation of any parties involved in an incident, the location and characteristics of an incident, other context related to the death, etc.). *

On Tuesday, October 19th, 2021 at approximately 1612, offender Rodney Gilbert, DOC#379738 was playing basketball and collapse on the basketball court. Several offenders immediately knelt over Gilbert to see what was wrong. Security staff arrived at 1613 placed Gilbert in a wheelchair with the assistance of several offenders and took him up to medical. After trying to get a response from Gilbert and being unable to, Nurse Rosylne Smith started CPR on Gilbert and requested to call 911. CPR was continuously performed on Gilbert until Pafford Ambulance arrived at approximately 1622 and began their care of Gilbert. Pafford Ambulance left the facility at 1644 with Gilbert and arrived

1065 of 5000 max characters.

Submit

WordPress Theme | Square by HashThemes

CPSO040

Form C-05-001-X
14 May 2018

Louisiana Department of Public Safety and Corrections
Standardized Death Report Format

Unit Name: Claiborne Parish Detention Center

DATE OF REPORT: October 19th, 2021

TO: James M. Le Blanc
Secretary

FROM: Warden Dusty Williams
Claiborne Parish Detention Center

RE: Gilbert, Rodney
DOC # 379738

Age: 45

Manner of Death: (Please check one of the following boxes)

☐ Expected ☒ Unexpected

Autopsy: Pending

Medical Diagnosis: Pending Autopsy

NARRATIVE:

On Tuesday, October 19th, 2021, at approximately 1612, offender Rodney Gilbert, DOC# 379738 was playing basketball and collapse on the basketball court. Several offenders immediately knelt over Gilbert to see what was wrong. Security staff arrived at 1613, placed Gilbert in a wheelchair with the assistance of several offenders and took him to medical. After trying to get a response from Gilbert and being unable to, Nurse R. Smith started CPR on Gilbert and requested to call 911. CPR was continuously performed on Gilbert until Pafford Ambulance arrived at approximately 1622 and began their care of Gilbert. Pafford Ambulance left the facility at 1644 with Gilbert and arrived at Claiborne Memorial Medical Center at 1652. ER staff at CMMC worked on Gilbert until 1725 at which time Doctor Mark St. Cyr pronounced him dead. Coroner Dr. Mark Haynes was contacted, and an autopsy was ordered. Dr. St. Cyr said he did not see any signs of trauma on Gilbert. Security cameras clearly show Gilbert collapsed while playing basketball outside on the court.

94,321.82

Cash Balance
301,229.22
6/30/21

Investment Balance
153,506.80

10016D

DATE: 10/19/21 DPS&C CORRECTIONS SERVICES TIME: 17:3
AMENDED: 08/06/21 MASTER RECORD PAGE 1

---------- D E S C R I P T I O N ----------

DOC #..: 00379738 CURRENT LOC: CLAIBORNE DET CTR AN
NAME: GILBERT, RODNEY L JR B/M DOB.....: 01/06/1976

SID NUMBER: 001613484 FBI NUMBER: [redacted] SOC.SEC....: [redacted]
DRIVER LIC: - STRIKE.....: NO
HGT.....: 5`09 WEIGHT....: 160 HAIR.....: BLACK
EYES.....: BROWN COMPLEXION: MEDIUM BROWN SHOE SIZE.:

********** R E L E A S E I N F O R M A T I O N **********

DN DNA: Y
OFFENDER CLASS: 02 GT ACT.: ACT1099 TEST DATE: 05/29/2002
WRED: 09/24/2026
PED: 11/18/2021 DS ...: 07/14/2027 FTD: 01/15/2032
ECC DATE: / / ADJUSTED.: 09/24/2027

PB ACTION..: TOTAL SENTENCE
MS ON TOTAL LOSS OF GT 030YRS/ 00MTH/ 00DA
TYPE ACTION: 122 TO DATE: 0225
ACTION DATE: 01/13/2022 RESTORED: 0
CTRP Release Factor: 153 DAYS
COMMENTS: PED CHANGED PER ACT 122 OF 2021

DETAINER: N DETAINER INFO:

---------- O F F E N S E I N F O R M A T I O N ----------

SEX OFFENDER: Y
SOAP..:

DOCKET NUMBER	PAR CON	HW CR	SENTENCE DATE	MOD1&2	STATUTE	CNT	TERM YYYMMDD	HW CR	REV FLG	GT ACT	AP JC
243915	RAP	NA	02/04/02	/	CARNAL KNOWLEDGE-	001	0020000	NA	X	138	00
ORIG.SENT.			03/17/97	PROB	TECH ABSCONDED			ON	02/14/02		
252391002	RAP	CS	05/20/02	CRM/	MANU COCAINE	001	0050000	NA		280	00
252456002	RAP	CS	05/20/02	/	PWID COCAINE	001	0050000	NA		280	00
264319	RAP	CC	08/06/02	/	ARMED ROBBERY	001	0300000	CC		099	02
264319	RAP	CC	08/06/02	/	AGGRAVATED BATTER	001	0100000	CC		099	02

ALIAS

LEE		GILBERT		01/06/76
RODNEY	L	GILBERT	JR	01/06/76

EMERGENCY CONTACT

EMERGENCY CONTACT: [redacted]
EMERGENCY ADDRESS: [redacted]
EMERGENCY ZIPCODE: [redacted]
RELATION.....: MOTHER
EMER.CITY/ST: ALEXANDRIA
EMERGENCY PHONE: [redacted]

PERSONAL DATA

ADDRESS..:UNKNOWN PINEVILLE, LA 71360
BIRTH CITY: ,LOUISIANA CITIZEN..: YES
MARITAL ST: CHILDREN: RELIGION..:
EDUCATION.: 09 YRS. ELOC....: 1 GOVT ASST.:
OCCUPATION: NOT IN LABOR FORCE-UNEMPLOYED
MOTHER`S NAME: [redacted] FATHER`S NAME: [redacted]

SCARS - MARKS - TATTOOS

MARK/INFIRMITY.1: TAT LU ARM LITERAL: G
MARK/INFIRMITY.2: LITERAL:
MARK/INFIRMITY.3: LITERAL:
MARK/INFIRMITY.4: LITERAL:
MARK/INFIRMITY.5: LITERAL:

TRANSFER INFORMATION

ASSIGNED LOCATION	PHYSICAL LOCATION	FROM DATE	TYPE SUPV
ALEXANDRIA DISTRICT	ALEXANDRIA DISTRICT	03/17/97	B
ALEXANDRIA DISTRICT	ABSCOND	11/24/97	B
ALEXANDRIA DISTRICT	RAPIDES DC 1	01/15/02	B
OAS/NORTH JAILS	RAPIDES DC 1	02/14/02	A
OAS/NORTH JAILS	VERNON CORRECTIONAL F	01/12/03	A
WCC/FTW-WRDC	WCC/FTW-WRDC	07/16/04	A
WINN CORR CTR	WINN CORR CTR	08/16/04	A
WINN CORR CTR	POLLOCK BOP	08/29/08	A
WINN CORR CTR	WINN CORR CTR	09/05/08	A
OAS/NORTH JAILS	WINN CORRECTIONAL CEN	08/01/16	A
OAS/NORTH JAILS	CLAIBORNE DET CTR AND	05/29/19	A

CPDC01
PRINTED BY 10/19/21

CLAIBORNE PARISH DETENTION CENTER

1415 Highway 520 Homer, Louisiana 71040 Office: 318-927-4201 Fax: 318-927-6278

Sam Dowies, *Sheriff* Dusty Williams, *Warden* Steve Risner, *Deputy Warden*

Most Called : [redacted]
(Possibly GF)

Mother : [redacted]

CPSO044

Record of Death

Provided by LA Department of Public Safety and Corrections on 03/29/2022

2021

Offender Name: Rodney Gilbert

DOC #: 379738

Age / Race: 45 / Black

Admit Date: 2/14/2002

Sentence: 30 years

Admit Date at Last Facility: 5/29/2019

Facility / Housing Unit: Local/ Claiborne DC / B2

Date of Death: 10/19/2021

Cause of Death: Cardiac arrest

Category of Death: Pending

Expected / Unexpected: Unexpected

Autopsy Ordered: Yes

Location: Claiborne Medical Memorial Center