



**Commission of
Correction**

**Final Report of the
New York State Commission of Correction:**

**In the Matter of the Special Investigation into the Care and Treatment
Provided to**

**David Radcliffe,
an incarcerated individual of the
Tompkins County Jail**

September 24, 2025

**To: Sheriff Derek Osborne
Tompkins County Sheriff's Office
779 Warren Road
Ithaca, New York 14850**

Allen Riley
Chairman



Yolanda Canty
Commissioner

Elizabeth Gaynes
Commissioner

GREETINGS:

WHEREAS, the Medical Review Board has reported to the NYS Commission of Correction pursuant to Correction Law, section 47(1)(e), regarding the care and treatment provided to David Radcliffe, which occurred while an incarcerated individual in the custody of the Tompkins County Sheriff at the Tompkins County Jail, the Commission has determined that the following final report be issued.

FINDINGS:

1. David Radcliffe was a 45-year-old male who died on 6/1/24 at the Cayuga Medical Center from a methamphetamine intoxication that occurred on 5/29/24 while in the custody of the Tompkins County Sheriff at the Tompkins County Jail (CJ). Radcliffe remained in the Intensive Care Unit and was released from the custody of the Tompkins County Sheriff on 5/30/24. Radcliffe was moved to comfort care, and on 6/1/24 Radcliffe was pronounced dead. The Medical Review Board has found that Radcliffe showed signs of prolonged intoxication that exceeded 12 hours but was never referred to a physician as required by minimum standards. The Board opines that had Radcliffe been promptly transferred to a hospital for care, his death may have been prevented.
2.  In the instant offense, Radcliffe was returned on a warrant for charges of Burglary 3rd Degree and Petit Larceny. Radcliffe had not been arraigned and these charges were abated by his death.
3. Radcliffe was born in Auburn, NY. Radcliffe received a GED but was unemployed at the time of his arrest. Radcliffe was widowed. Radcliffe was survived by his mother and a sister who he did not have a relationship with for approximately 10 years.
4. 
5. On 5/28/24 at 10:15 p.m., Radcliffe was received at the Tompkins CJ. Radcliffe was placed in holding cell number one. During an interview with Commission staff, CO S.P. stated that he conducted the initial pat search of Radcliffe upon him entering the facility. CO S.P. reported that Radcliffe appeared to be under the influence of something. Radcliffe was alert, talking, following orders but was not able to appropriately answer questions and was deemed not bookable at that time. Radcliffe was placed into the holding cell. CO S.P. reported that Radcliffe initially sat down on the holding cell bench and was provided a mattress. CO S.P. indicated that the oncoming shift was briefed

regarding Radcliffe and the reason why he had not been booked into the facility.

6. At 11:28 p.m., CO K.M. documented in the logbook that Sergeant (Sgt.) S.H. attempted to get Radcliffe to booking. Radcliffe was documented as not being bookable at that time as he would not even sit up. During an interview with Commission staff, CO K.M. stated that Radcliffe had come into the facility on the previous shift and remained unbookable due to the condition he was in. CO K.M. stated that she was unable to have a clear and concise conversation with Radcliffe. Radcliffe presented as being very tired but was not observed detoxing. The Medical Review Board finds that Radcliffe's condition warranted an immediate evaluation by medical staff and facility staff failed to comport with the requirements of 9 NYCRR §7010.2(c) which states:
Every inmate who at the time of admission appears to be physically incapacitated due to drug or alcohol intoxication shall be examined immediately by a physician.
7. At 11:32 p.m., Radcliffe was documented as being booked into the facility. During an interview with Commission staff, CO K.M. stated that she was unable to book Radcliffe into the facility due to his condition but entered Radcliffe into the Black Creek system in order to start his file and to document his property. CO K.M. stated that she maintained the logbook and that CO R. and Sgt. S.H. informed her that they attempted to communicate with Radcliffe, but Radcliffe was not bookable. Radcliffe remained in holding cell number one.
8. On 5/29/24 at 12:20 a.m., a housing area logbook entry indicated that Radcliffe was changed over into a jail uniform and was angry.
9. Documentation of observations of Radcliffe continued through the night as documented in the holding cell logbook at approximate 15-minute intervals.
10. On 5/29/24 at 11:15 a.m., Radcliffe was removed from the holding cell for booking with CO J.P. At 11:32 a.m., CO J.P. completed Radcliffe's suicide prevention screening and initial risk assessment. Radcliffe scored a '3' as he reported having a significant loss of a friend a couple months prior, heroin and methamphetamine use the previous morning and showing signs of drug withdrawal. Radcliffe indicated that he was coming down from heroin and methamphetamines. CO J.P. notified the supervisor and referred Radcliffe to medical and mental health. CO J.P. documented on the initial risk assessment that Radcliffe answered questions, was cooperative, but had issues walking in a straight line and had feelings of weakness. During an interview with Commission staff, CO J.P. stated that nothing alarmed him about Radcliffe's mental health. CO J.P. reported that Radcliffe was very cooperative, was verbally responsive and did not appear that he was heavily under the influence. CO J.P. stated that he did not know when Radcliffe came into the facility and did not know that Radcliffe had previously been deemed unbookable. The Medical Review Board opines that Radcliffe was still showing signs of intoxication but was not immediately seen by medical staff. This is a violation of 9 NYCRR §7010.2(d) which state:
Every inmate who at the time of admission appears to be intoxicated by alcohol or drugs shall be subject to increased supervision as determined pursuant to section 7003.3(h) of this Title. If, after 12 hours from admission, the inmate still appears to be intoxicated by alcohol or drugs, the inmate shall be immediately examined by a physician.
11. At 11:50 a.m., Radcliffe was returned to holding cell number one.

12. [REDACTED]
13. [REDACTED] This is a violation of 9 NYCRR §7010.2(j), which states:
(j) Adequate health service and medical records shall be maintained which shall include but shall not necessarily be limited to such data as: date, name(s) of inmate(s) concerned, diagnosis of complaint, medication and/or treatment prescribed. A record shall also be maintained of medication prescribed by the physician and dispensed to a prisoner by a staff person.
14. Observations of Radcliffe in the holding cell were documented until 2:15 p.m. when it was noted that Radcliffe was to be housed in "F-3". Radcliffe was housed in a non-standard housing unit for over twelve hours. As per Tompkins CJ's Maximum Facility Capacity that was established on 5/22/24, holding cells 1,2, and 3 are nonstandard housing units and cannot hold an individual for more than 12 hours.
15. During an interview with Commission staff, CO J.P. stated that he escorted Radcliffe to the "F-Block" housing area. CO J.P. reported that Radcliffe had a limp and stated that his toe was infected but that he was able to self-ambulate.
16. On 5/29/24 at 6:53 p.m., documentation indicated that CO C.N. heard an incarcerated individual kick the door and say, "I think he's having a seizure." CO C.N. documented that she ran to F-Block and to cell '#3' where Radcliffe was observed on his bunk on his left side actively seizing. CO C.N. called for assistance via a facility radio. CO K.B. and Sgt. G.A. responded with the medic bag followed by CO S.P. and Sgt. J.S. Radcliffe was moved to the floor and CO K.B. performed a sternum rub which elicited a response from Radcliffe. CO K.B. recorded that Radcliffe's vital signs were a blood pressure of 156/73 and a heart rate of 47. CO C.N. reported that Radcliffe went in and out of responsiveness, opened his eyes, and began to move his arms and legs. Sgt. J.S. contacted Doctor (Dr.) [REDACTED] for a consultation and instructions. Radcliffe was asked if he was on or had any drugs on him. Radcliffe responded that he was going through withdrawal but did not have any drugs on him. Sgt. G.A. maintained constant supervision of Radcliffe.
17. At 7:12 p.m., Dr. [REDACTED] returned the call to Sgt. J.S. During an interview with Commission staff, Sgt. J.S. stated that Radcliffe was slurring his words, and that she could not understand what Radcliffe was saying. Sgt. J.S. stated that she talked with Dr. [REDACTED] via the phone and informed the doctor that Radcliffe had a seizure and that she could not understand what Radcliffe was saying. [REDACTED]
 [REDACTED] Radcliffe was placed on additional supervision. The Medical Review Board opines that the jail physician erred in the decision to not have Radcliffe immediately transferred to a hospital. As intoxication can mask the symptoms of acute illness and without the benefit of having any medical assessment or patient history completed, the potential seriousness of a witnessed seizure should have prompted an immediate emergency

hospital transfer.

18. At 7:19 p.m., CO C.N. documented completing a tour of the housing area and indicated that all inmates appeared to be okay. Radcliffe appeared to be laying on his mattress.
19. On 5/29/24 at 7:22 p.m., CO C.N. documented that she heard an incarcerated individual kick the door and say, "he's seizing again." CO C.N. responded and radioed for assistance. CO C.N. observed that Radcliffe was blue in the face and unresponsive. COs C.N. and B.K. entered Radcliffe's cell and CO B.K. made a radio transmission to activate Emergency Medical Services (EMS). During an interview with Commission staff, CO B.K. stated that he made the call for EMS as Radcliffe was having a medical emergency and needed to be transported immediately. CO K.B. documented that Radcliffe's breathing was abnormal when he was on his back but improved after he was placed on his side in the recovery position. Sgt. J.S., Sgt. G.A. and CO S.P. arrived with the medic bag and restraint chair. Radcliffe was lifted onto the restraint chair, placed unrestrained, and moved from F-block to await transport via ambulance. CO S.P. documented that while pushing Radcliffe in the restraint chair down the facility hallway, he observed that Radcliffe's lips were beginning to turn blue, and his chest was no longer rising. CO K.B. stated that Radcliffe was not breathing, and CPR was needed. Radcliffe was placed on the floor and at 7:27 p.m., CPR began. At 7:28 p.m., the automated external defibrillator (AED) was applied and at 7:29 p.m., the first shock was advised and delivered. CO K.B. administered two doses of Narcan without the desired effect. A bag valve mask (BVM) was utilized to provide rescue breaths to Radcliffe. At 7:34 p.m., a second shock from the AED was advised and delivered.
20. At 7:38 p.m., Lansing Rescue arrived and assumed care of Radcliffe. [REDACTED]
21. [REDACTED]
22. After the incident, CO C.N. documented the following late entries into the housing area logbook:
 - 6:53 p.m., I, CO C.N. called for medical emergency for inmate listed
 - 7:03 p.m., Dr. [REDACTED] called for inmate listed
 - 7:22 p.m., I, CO C.N. radio call for second seizure for inmate listed
 - 7:23 p.m., CO K.B. radio call for ambulance for inmate listed
 - 7:27 p.m., CPR started on inmate listed
 - 7:28 p.m., AED attached to inmate listed
 - 7:29 p.m., Control advised to tell dispatch this is a full arrest
 - 7:29 p.m., first AED shock advised and delivered to inmate listed
 - 7:38 p.m., Lansing Rescue on location for inmate listed
 - 7:41 p.m., Bangs Ambulance on location for inmate listed
 - 7:43 p.m., Captain B. called for inmate listed
 - 8:01 p.m., Bangs loading patient (Cardiac arrest protocol) inmate listed
 - 8:04 p.m., Inmate listed going on stretcher with Bangs
 - 8:06 p.m., Bangs clear from PSB, Inmate listed out to CMC

23. CO C.N. was not available for an interview with Commission staff as they no longer work for Tompkins CJ.

24. [REDACTED]

25. [REDACTED]

26. Radcliffe's mother was contacted by facility staff, and she was provided contact information [REDACTED]

27. [REDACTED]

28. [REDACTED]

ACTIONS REQUIRED:

TO THE OFFICE OF THE TOMPKINS COUNTY SHERIFF:

The Sheriff shall conduct a review with jail administration regarding:

1. The compliance with the requirements of the Maximum Facility Capacity and that non-standard housing holding cells are not authorized to be utilized beyond 12 hours.
2. The compliance with 9 NYCRR §7010.2(c) & (d) regarding when a person is incapacitated at their admission, facility staff are to be immediately referred to medical and if they still appear to be intoxicated after 12 hours, they are to be immediately referred to medical.

A comprehensive report with the findings and any corrective actions taken shall be provided to the Medical Review Board upon completion.

In a response dated July 22, 2025, the Tompkins County Sheriff indicated that the requested reviews were completed with jail administration. Verification of compliance with cited minimum standards will occur at a later scheduled facility evaluation by the Commission.

TO THE MEDICAL DIRECTOR OF TOMPKINS COUNTY JAIL:

The Medical Director shall conduct a comprehensive quality assurance review of the care provided to Radcliffe regarding why the documentation of the medical encounters by the facility's Registered Nurse and Forensic Mental Health Counselor were not documented or maintained in compliance with 9 NYCRR §7010.2(j).

A comprehensive report with the findings and any corrective actions taken shall be provided to the Medical Review Board upon completion.

In a response dated August 4, 2025, to the Commission's preliminary report, the jail physician indicated the requested review was completed with corrective counseling provided to the facility nurse. Verification of corrective actions taken will occur at a later scheduled health services evaluation by the Commission.

TO THE CHAIR OF THE TOMPKINS COUNTY LEGISLATURE:

As the appointing authority for the delivery of jail incarcerated individual health services pursuant to Correction Law section 501, the County Legislature shall review the above findings and conduct an inquiry into the fitness of the designated provider.

ACTIONS REQUIRED:

WITNESS, HONORABLE YOLANDA CANTY, Commissioner, NYS Commission of Correction, Alfred E. Smith State Office Building, 80 South Swan Street, 12th Floor, in the City of Albany, New York 12210 on this 24th day of September 2025.



Yolanda Canty
Commissioner
Commission of Correction

YC:MB:vc
2024-S-0003
September 24, 2025