

#226

Reply Id: Blog44R

WI Prison Psychologists Falsely Accused Me of Misconduct & Diagnosed Me As Narcissistic to Punish Me for Helping Mistreated Inmates File Complaints & Lawsuits by Nate A. Lindell, created 27 June 2016

Some prison psychologists understand the senseless degradation that prisons inflict on prisoners.^{1*} They don't last long, unless they put on blinders to that reality.²

Most prison psychologists I've known either delude themselves into believing that prisons aren't senselessly sadistic, like a good wife who is oblivious to her husband's molestation of their daughter, or the psychologists are also sadists & support the senseless degradation.

While at the Waupun Correctional Institution (W.C.I.) in 2013, I witnessed all sorts of outrageous abuse of prisoners, most being clearly mentally or emotionally disturbed.³ I helped everyone there I could to file complaints & lawsuits about that abuse, told Psychology Services Unit (P.S.U.) staff about prisoners who were too mentally ill to seek help for themselves.⁴

It was a madhouse there, mainly because the prisoners deemed too mentally ill to be kept in solitary confinement here at W.S.P.F. were sent to W.C.I.'s seg. unit & kept in solitary confinement there. Many of those inmates threw piss & shit at each other while caged up next to each other in the recreation bunkers. Some smeared their shit &/or blood on their windows.⁵ Many yelled out their doors - threats, insults - and pounded on their walls & doors so those around them couldn't sleep. They had nothing constructive to do (e.g. paint therapy), nothing to lose, nothing to gain, and guards who projected hate, disgust on them, constantly. Clearly staff wanted that environment, & they got it.

Once a week psychologists walk past each cell in the seg. unit. Like politicians they'd say things, but fixed nothing. Three of the psychs were women, one a supposedly gay & clearly effeminate man; all were White. Many of the inner-city Blacks shouted at the women like they

* See the end of this article to read the #id footnotes

Please re publish this elsewhere. Just cite my blog as the source

were strippers. One psychologist, Ms. ^{Courtney} Endres (not a Ph.D.) always, every walk through, wore black stretch pants + her "thick ass" and "fat pussy" always became the topic of conshoutations between her fans, which Ms. Endres didn't mind, seemed to relish, even though it violated her code of ethics.⁶ I'd ignore Ms. Endres, as it was clear to me that she was at best indifferent to her patients + she fed off the attention of men in cages.

Several months after my arrival at W.C.I. I tried to speak with Ms. Endres, for the first time, about inmate James Dehler, who'd been smearing shit on his window + getting himself into senseless conflicts with staff + inmates, suggesting that he had Borderline Personality Disorder, or the like, which staff treated by threatening + beating him.

"Do you have something about yourself that you want to talk about?" she asked me with irritation.

"Nope," I said, + she swished her glutes on down the hall.

Next came a psychologist named Ms. McLaren. She was less than five feet tall, had a high, protruding bum, like midgets have. Her build was medium, breasts + face at best plain. Although she wasn't physically attractive, I saw her as a decent person.

Due to Ms. McLaren's disproportionately large rear, inner city Blacks got on her like piranhas on meat, yelling things like, "let me see yo' ass bitch!" + "She ugly but got a nice ass!"

Ms. McLaren clearly didn't like those comments + that day she was wearing a ridiculously too-large purple sweater, which covered her butt. Instead of talking about her butt, the peanut gallery yelled that "she looks like an Oompa Loompa!" (Actually she looked like the girl who swelled up like a blueberry on Charlie + the Chocolate Factory.) Someone yelled out that she was ugly.

When she came by my door, I figured I'd be nice, + help her laugh at the situation (you all know how humor helps me cope). She always had multiple colors in her dark, chopped short hair, which made it interesting (+ told me she was a lesbian - LGBTQs use a rainbow flag, the color purple + a triangle as their symbols), the only visually interesting thing about her.

"Your hair looks nice," I said to her. "But that purple sweater does make you look like an Oompa Loompa."

Although Ms. Endres had never rebuked the multitudes who'd commented on her butt & beaver, nor the guys who were disrespecting Ms. McLaren, Ms. Endres marched to my cell, stared daggers at me & said, "I heard that! And if she doesn't write you up I will!"

Attached as Exhibit 2 is the Conduct Report (C.R.) that Endres wrote, C.R.# 2342016, which she embellished by falsely saying that I said to Ms. McLaren, "I like your ass" & was yelling.

Not once in my then over 13^{years} in prison had I been accused of making a sexual comment, crude or smooth, to prison staff. And I did not like Ms. McLaren's ass - I do not like big asses!

I sent several Psychological Service Requests (P.S.R.s) to my then assigned psychologist, rationally explaining that Ms. Endres lied about me in the C.R. - they're attached as Exhibits 3, 4 & 5 - & why her accusation wasn't even rational. That was a waste of time, as was the complaint that I filed with WI's Dept. of Licensing & Registration⁷ about Ms. Endres's ethics violations.

Although McLaren said at my disciplinary hearing that she didn't hear me yell or comment on her ass & another prisoner said I never said what Endres accused me of saying, I was found guilty & given 180 days in punitive seg. status. The action was upheld on appeal.

That incident discouraged me from speaking with P.S.U. staff. Instead I sent them P.S.R.s⁸ describing specific inmates & how they were being denied proper psych. care. I spent 24/7 around those guys, knew their symptomology better than P.S.U. staff could hope to know.

But abuse & psych. neglect of prisoners around me continued, as did W.C.I. guards avalanche of C.R.s meant to discourage me from writing complaints & lawsuits. Some of the C.R.s were based on a guard's lie - e.g. C.R.# 2400902 & C.R.# 2345593, attached, respectively as Exhibits 6 & 7. Many of those C.R.s show on their face that WCI staff were targetting me for my litigation (Exhibit 6 shows that a guard's petty lies were used to deny me use of the law library, while Exhibit 7 reveals that a guard's lies about what I said while talking

with another prisoner about my lawsuit were used to give me 180 more days in punitive segregation.) and my complaints (as shown in a previous post on my blog, March 2016, "Wisconsin Punishes Prisoners who Make PREA Complaints..."; WCI's security ^{director} wrote me up for lying about Cpt. Olson in a PREA complaint, when I never made such a complaint about Cpt. Olson - yet I was sentenced to 360 days in punitive seg. for that false C.R. The supervisor of W.C.I.'s seg. unit, Brian Greff, wrote a C.R. that falsely accused me of forging another prisoner's signature on a group complaint - even though the prisoner said at the disciplinary hearing that it was his signature, I was found guilty, had to wait over a month for the warden to dismiss the decision on appeal.)

None of the C.R.s accused me of violent behavior, but they were used to give me a total of over five years in punitive seg.

With the Security Director & unit supervisor lying about me in C.R.s, I knew I was in a situation where I wasn't going to get justice. The word of a guard or other staff was golden; I could present 12 prisoners' statements saying staff were lying & it wouldn't matter.

Even IF a judge would intervene & protect me from being harassed for exercising my First Amendment right to Petition for Redress, it'd take at least a year to get to that point in a lawsuit.

Feeling trapped by guards & supervisors who had zero problem lying about me & were sexually & physically abusing inmates around me had my P.T.S.D. blowing up. I was always in fight or flight mode.

A new psychologist came on the scene that summer, Sandra Johnston, Ph.D. She seemed sincerely concerned about the welfare of prisoners, & was assigned to my case. She was small, slim, athletically built, intelligent, attractive for her age (at least five years older than me) & seemed to like me.

But she worked for the WDOC, for WCI, & WCI's administration was trying to crush me.

Dr. Johnston presented herself as an oasis of decency in that desert of self-righteous sadism. She once slipped a humble brag into our chat, saying that she distributed shoes to poor kids in rural Wisconsin & was

open about being an ^{Evangelical} Christian.

Several times I went to meet with Dr. Johnston in the attorney visiting booth, shatter-resistant glass separating us, me in handcuffs, behind my back. She told me that she was starting a group for prisoners with P.T.S.D. & wanted to evaluate me for inclusion. I agreed.

During those meetings I told her about the brutal treatment of prisoners by staff, that it was aggravating my PTSD. I also explained how P.S.U. staff were ignoring clearly mentally ill inmates, which guards treated, futilely, with tazers, beatings, restrictions & other punishments. She wasn't disturbed by that, which disturbed me.

Having once been an Evangelical Christian myself, I knew that they typically blindly respected & obeyed government agents, based on The Bible, Romans 13:1-6, which says that all authority figures have been appointed by God & must be respected as such. (Hitler? Stalin? W. Bush? I know). That doctrine no doubt soothed her conscience, allowed her to turn a blind eye to guards breaking the arms of prisoners who were handcuffed to doors, stick^{ing} their fingers in the anuses of prisoners in handcuffs, shackles, surrounded by guards, with a tazer put to their neck, etc.

I told Dr. Johnston that staff were issuing me false C.R.s because I persisted in helping abused inmates file complaints with the WDOC & in court. At first she'd just listen. Then she subtly suggested that I stop my activities, doing so very carefully, not directly saying "stop helping others file complaints & guards will stop filing C.R.s on you."

Her, to me, cowardly & immoral suggestion that I let staff's abuse of others go on without me at least trying to end it - it made me suspicious. When I saw her quietly listening to Brian Greff as he spoke to her, alone, for around a half an hour, I became really suspicious. When she said in our PTSD group that "Prison doesn't cause P.T.S.D." I knew she was the WDOC & WC I's bitch.

Being around guards who are breaking arms, unnecessarily tazing prisoners over 10 times, & crazy people around you are cutting their arteries with dried toenails certainly is traumatic enough to cause P.T.S.D.! (Psych's reading this, go ahead & explain.)

Of course to say that prison conditions could (& W.C.I. was) cause P.T.S.D. would threaten to make illegal (violation of the American's with Disabilities Act, for starters) the brutal treatment of prisoners that W.C.I. staff were set on continuing.

Hoping that Dr. Johnston really was decent, just misguided, I tried to reason with her during a 29 July 2013 meeting. "Would Jesus want you to turn a blind eye?", "Look at the Catholic Church - was it right for them to ignore child rapists in their midst?" Her response was a mindless smile (she was too smart for that) & to switch the subject to how I'm going to get out of segregation.

The message was clear, & I decided to review my P.S.U. files to see what she was saying about me - I learned from "Dr" Salter's bogus psychopath report, explained in the preceding post, that WDOC psych's could whoop me with their pens.

That's what I discovered she'd done. This is what she wrote⁹ in her Psychological Services Clinical Contact (P.S.C.C.) report for that 29 July 2013 meeting:

1) under "Relevant History"; she repeated Dr. Salter's bullshit conclusion in her PCL-R report, explained in my preceding blog post, saying I'm an untreatable psychopath;

2) under "Patient Report" she wrote:

"He tried to express his empathy for others who he wants to help/rescue from injustice. He continues to see himself as a type of hero to those who he believes are less intelligent or less fortunate than him."

In that PSCC Dr. Johnston first noted that there were "Narcissistic Features" to the "Antisocial Personality Disorder" I'd long been "diagnosed" with; apparently my disgust at & compulsion to end the "injustice" inflicted on mentally ill prisoners was a symptom of Narcissism!?

That's why I'm writing & documenting this. It's so absurd to anybody who understands psychology that you'd think I made it up if I didn't support it with copies from my records.

Having empathy for others isn't possible for psychopaths, or for those with an antisocial personality. So, my empathy - disgust at the brutal

treatment of mentally disabled inmates who couldn't defend themselves — was just evidence that I was a narcissist & not evidence that the psychopath & antisocial diagnosis were bullshit.

Antisocial Personality Disorder (A.S.P.D.) is bad enough, but a Narcissistic Personality Disorder (N.P.D.), which she said I had features of, is ugly, as Julie Brand explained in her book A Mother's Touch. A Narcissist has, "[a] pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, & lack of empathy...." ¹⁰

One might think, "That's you Nate!" because I am utterly confident in my own abilities (& have no sympathy for those who attack me, inmates or prisoncrats), but "grandiosity" is such confidence "without commensurate achievements." ¹⁰

Dr. Johnston's malicious mis-diagnosis gives us insight into WDOC staff's view of inmates, including me — they don't want to accept that some prisoners may actually be great in some ^{way}, especially intellectually great, especially when that intellectually great prisoner legitimately criticizes their systemic degradation, dehumanizing of prisoners, some of whom are inevitably going to be great.

It's easier to justify systematically degrading people who have no admirable qualities — fewer people care.

Because I'm aware of my intellectual capabilities, I must be delusional.

Read my blog & judge for yourself whether or not my confidence in my wit is justifiable. Consider also that I've won two state court appeals, three federal appeals in my own cases (the ones I lost were controversial & judges ignored the facts or law to justify dismissing ^{them}), and four cases I litigated for other prisoners.

I'm not pretty, but I'm smart, especially with logic, reason & words.

So I know & can demonstrate how what the WDOC is doing is not logical, reasonable or smart. Obviously I'm a Narcissist..¹¹

A WDOC-hired psychologist already said I'm a psychopath. Now one was adding Narcissism to the mix, while smiling in my face & praising Jesus.

I was baffled & pissed off. She had to be psychopathic herself

to smile in my face while poison penning me behind my back. To gain my trust the lady went so far as to tell me about how she got PTSD, from her uncle anally sexually assaulting her (& her sister) when she was a child. You have to have ice for blood to tell someone that & then misdiagnose someone as a Narcissist, & keep smiling in their face.

Before I reviewed my P.S.U. files & found out about Dr. Johnston's misdiagnosis, I continued to tell her about guards harassing me because I was helping brutalized prisoners complain. See Exhibit 8, a copy of a PSR I sent her on 9 July 2013, with her 11 July response. Notice that she says "I would like to continue as your 'bridge' with the staff" — she wanted to know what I was up to, so she could tell them.

During a meeting we had, after she labelled me a narcissist but before I found out, I told her that the organized retaliation of staff was stressing me out to the point that I was fighting down the impulse to stab them. She prescribed that I "stop helping other prisoners for one week, see if staff treat you better."

I looked at her, thinking, You really think all prisoners are retarded, don't you?, while smiling at her. I told her "okay," then went back to my cell & wrote a lawsuit for another prisoner.

Exhibit 9 is a PSCC from the 23 Sept. 2013 meeting I had with Dr. Johnston, after I learned that she was labelling me as a Narcissist. You'll notice that, bizarrely, she saw my anger as a "breakthrough," did not note that it was because she mislabelled me as a Narcissist, and continued the misdiagnosis. "He appeared to misunderstand something I had said," she wrote — right, cause I'm just a dumb-ass inmate. She also notes advising me to not help inmates file complaints so I'm not framed for forging their signatures.

As Exhibit 10 shows, I continued writing PSRs explaining that there were clearly mentally-ill inmates in seg & they were just being transferred from one seg unit to another "instead of housing them in less punitive, more therapeutic environs!" Dr. Johnston's 11 Oct. 2013 reply: "Keep taking care of yourself..." — not a lot of empathy

from her, for those guys.

In a 19 Sept. 2013 PSR I wrote to Dr. Johnston:

"I've been very reluctant to leave my cell. I don't know if I will anymore, as some staff have a real attitude towards my advocacy for mentally ill (er) neighbors whom they (some) don't understand + severely neglect or abuse."

Her response was:

"It is important to take care of you, + allow others to deal with their issues in a manner that they choose. I do understand that you believe in your mission to help others!"

A psychologist must know better than to think that mentally/emotionally ill people "choose" to act in self-destructive, self-degrading ways. More of that Christian ideology, no doubt: we all supposedly have free will, so God is just for torturing "sinners" for eternity. I wrote her back, said I wasn't a Blues Brother, wasn't on a mission, + that no one chooses to be mentally ill, as she should know. (See, "Do we Really Have a Choice?", old post)

Gotta give her credit for continuing to smile in my face + believe she was on the side of right, like a German under Hitler.

That December I was sent to federal custody. The night before I was supposed to leave I busted the brass nozzle off my sink + used it to bust out the cell's outside window + knock chunks of concrete out of the walls + desk. They couldn't use that cell for weeks. ¹¹

When I came back to WSPF in 2015, I heard that seg. staff at WCI wear body cameras due to the numerous complaints of staff's abuse.

Notes:

1. See Exhibit 1, a Psychological Services Clinical Contact (P.S.C.C.) report, dated 29 Nov. 2006, Dr. Gage's notes under "Relevant History"

2. Dr. Randy Gage + Dr. Charles Junghans were relieved of their jobs at W.S.P.F. Both freely agreed that the WDOC in general + WSPF in particular inflicted purposeless misery on prisoners + undermined rehabilitation. See also www.thedailypage.com/isthmus/article.php?article=2271 ("Supermax: Psychologist Alleges Dept. of Correction Retaliation")

3. Some of the abuse was described in earlier posts on my blog: "Prisoners Civil-Rights Attorney Needed..."; posted Feb. 2013; "Ongoing

Abuse of Prisoners In W.C.I.'s Segregation Unit," posted 5 July 2013;
+ "Continuing Abuse of Prisoners in W.C.I.'s Segregation Unit," posted
5 Jan. 2014.

4. E.g., James Dehler, who smeared his shit + blood on his window, cussed staff + inmates alike out + had no body or fighting skills to back it up didn't believe he was mentally ill, even though a case of his on W.C.I.'s law computer noted that he had a partial labotomy, etc. Jeremiah Felton, whom I met at W.S.P.F (he was in a cell across from me, where I saw him poop in his shoe, his hand, smear his shit everywhere, live in a piss soaked room, talk incoherently, + worse), didn't even know what was going on or seem to care. Tony Peters pulled his toenails out, dried 'em, cut his arteries with them, + when he ran out of toenails started with his fingernails, + had seizures daily.

5. See Note 4, above. Multiple prisoners were smearing stuff on their windows.

6. Wis. Admin. Code § Psy 5.01 Professional Conduct, sub. (14) prohibited "Engaging in... behavior which could reasonably be construed as seductive, romantic... or exploitive, with... (a) A client."

7. I.e. Complaint # 13 PSY 023. Wis. Admin. Code § Psy 5.01 (7) prohibits "Reporting distorted, erroneous, or misleading psychological information."

8. As I've waived confidentiality, anyone may request my WDOC PSU files under §19.35, stats., including those P's B's.

9. Because I'm indigent + PSU won't give me a free copy of the 29 July 2013 P.S.C.C., I couldn't attach a copy. But, as noted above, any interested party may purchase it for 15¢, under Wis. Stats. §19.35

10. Quoted from the DSM-IV-TR's diagnostic criteria for N.P.D., which you may read in full on www.behavenet.com/capsules/disorders/narcissisticpd.htm.

11. As revealed in a previous post on my blog, ^{posted 8 Aug. 2012} "A Genius Behind Bars... And?" W.S.P.F.'s former head psychologist scored my Full-Scale I.Q. at 144. As explained in a later post, "Comment Response," posted 11 Nov. 2012, some hater out there tried to steal my sunshine, + my I.Q. is actually higher. You only need an I.Q. of 130 to get into MENSA. I could join the Prometheus Society. (look it up)

How do you think some prison psychologists might react to having a patient who's smarter than them?

PSYCHOLOGICAL SERVICES CLINICAL CONTACT

OFFENDER NAME LINDELL, NATHANIEL			SOURCES OF INFORMATION <input checked="" type="checkbox"/> Clinical Interview <input checked="" type="checkbox"/> PSU file <input type="checkbox"/> Social Services File <input type="checkbox"/> HSU chart <input type="checkbox"/> Psychological Testing <input type="checkbox"/> Other	
DOC NUMBER 303724	INSTITUTION WSPF	DATE 11/29/2006		

REASON FOR CONTACT
 Met with Mr. Lindell in the attorney's booth at his written request to be seen.

RELEVANT HISTORY/ OFFENDER'S REPORT
 See file for thorough documentation of relevant history.

Mr. Lindell appeared to be seeking some degree of consensual validation regarding his perception of prison as oppressive, rigid, and colorless place of futility which responds meagerly, if at all, to positive advancements and improved adjustment. Mr Lindell's remarks were akin to those of many others who highlight the tremendous ratio strain which exists in the prison setting, (i.e., despite the obvious and compelling improvement an I/M might demonstrate, the application of either positive or negative reinforcers are often extremely few and far in between). Despite the overall content of our conversation, Mr. Lindell appeared to be demonstrating to me his intact mental status and positive adjustment to prolonged segregation. He continues to write papers on the exigencies regarding the travails of incarceration, especially lock-down status.

MENTAL STATUS
 Alert, composed, cooperative, articulate, socially appropriate, and engaging. No indications of cognitive, emotional or behavioral disturbance. No indications of heightened suicidal risk.


DIAGNOSES

Axis I 304.8 Polysubstance Dependence (ICE)

Axis II 301.9 PDNOS with Antisocial and Paranoid Features Axis III (If Relevant)

TREATMENT PLAN/FOLLOW UP
 Explained that Dr. Beech, with whom Mr. Lindell had engaged in therapy for the past 7 months, no longer works at WSPF. Offered to continue to see Mr. Lindell if he so chooses. Requested that he contact me in writing with any subsequent request to be seen; otherwise, will see him briefly at cell front weekly during clinical rounds.

MH code has changed MH code has not changed

<input checked="" type="checkbox"/> MH-0 No MH need	<input type="checkbox"/> MH-1 MH need (not *SMI)	<input type="checkbox"/> MH-2 Diagnostic SMI or Functional SMI	<input type="checkbox"/> MH-3 Mental Retardation
CLINICIAN SIGNATURE  PH.D. <i>Ph.D.</i>			DATE SIGNED 11/29/06
SUPERVISOR'S SIGNATURE (If Needed)			DATE SIGNED

* SMI - Serious Mental Illness
DISTRIBUTION: Original – PSU Record (DOC-3370A); Copy – HSU (file in DOC-3370); Copy – Social Services File

Exhibit 2

ADULT CONDUCT REPORT

DEPARTMENT OF CORRECTIONS
Division of Adult Institutions
DOC-9 (Rev. 1/02)

WISCONSIN
Administrative Code
Chapter DOC

CONDUCT REPORT NUMBER

PLEASE PRINT OFFENDER'S NAME

OFFENDER NAME - Last Lindell First Nathaniel MI DOC NUMBER 303724 INST. CODE 02

2342016

OFFENDER LIVING QUARTERS SEG A range LOCATION OF INCIDENT A-range DATE OF INCIDENT (MM/DD/YY) 03/18/13 TIME OF INCIDENT 1 AM 2 PM

IF PERSON INJURED-SPECIFY STATUS (Staff, Offender, Visitor) CONTRABAND INVOLVED Yes No IF WEAPON INVOLVED - WHAT

RULE ALLEGEDLY VIOLATED			FINDING OF GUILT	
Rule Number	Rule	Guilty	Not Guilty	
1 303	<u>2 5</u> <u>Disrespect</u>	<input checked="" type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2 303	<u>2 8</u> <u>Disruptive Conduct</u>	<input checked="" type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3 303		<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4 303		<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>

DESCRIPTION OF INCIDENT (Include Detailed Facts upon which Charges are based, sources of information, evidence, statement of other staff members and, if appropriate, cell or shop assignment number.)

While doing rounds on A-range in the seg building, I and another officer was speaking to an inmate when I heard and observed inmate Lindell in the next cell yelling to Dr. McClaren "I like your ass, but when you wear that purple suit you look like an compa loompa!" I looked directly at Mr. Lindell and told him he would be getting a conduct report. He stated "what, for talking about compa loompas?" He then began loudly singing about "compa loompas" and it was disruptive to my rounds as it made difficult to hear.

ACTIVITY AT TIME OF INCIDENT Clinical rounds TYPE OF HANDLING Full SIGNATURE OF STAFF MEMBER COMPLETING REPORT [Redacted] DATE COMPLETED 3/26/13

SECURITY DIRECTOR'S REVIEW (Complete only if no summary disposition was made)

DECISION ON CONDUCT REPORT Proceed Dismiss Return for Investigation IS OFFENDER IN TLU Yes No TYPE OF HEARING PROCEDURE Minor Offense 303.75 Major Offense 303.76

IF A MAJOR HEARING, INDICATE WHY:
 The alleged violation is designated as a Major Offense by DOC 303.68(3) OR
 The offender has previously been found guilty of the same or a similar offense (consideration given to how often and how recently)
 The offender has recently been warned about the same or similar conduct
 The alleged violation created a risk of serious disruption at the institution or in the community
 The alleged violation created a risk of serious injury to another person
 The value of the property involved (if alleged violation was actual or attempted damage and/or misuse of property, possession of money, gambling, unauthorized transfer of property, soliciting staff or theft)

SIGNATURE OF SECURITY DIRECTOR [Redacted] DATE SIGNED 3/26/13

DATE COPY GIVEN TO OFFENDER 3/26/13 TIME COPY GIVEN TO OFFENDER 12:45 P.M. SIGNATURE OF STAFF MEMBER DELIVERING COPY TO OFFENDER [Redacted]

RECORD OF SUMMARY DISPOSITION

SUMMARY DISPOSITION

SHIFT SUPERVISOR'S SIGNATURE OF APPROVAL OFFENDER'S SIGNATURE OF AGREEMENT

RECORD OF CONDUCT REPORT DISPOSITION

DATE OF DISPOSITION (MM/DD/YY) 4-11-13 MAJOR DISPOSITION Yes No DISPOSITION(S) 180 DAYS Dis. SRP
REFERRED TO PROGRAM REVIEW 1 Yes 2 No 3 Not Known

PSYCHOLOGICAL SERVICE REQUEST

- THIS FORM IS INTENDED FOR THE PSYCHOLOGICAL SERVICES UNIT (PSU).
- IF YOUR REQUEST IS RELATED TO PSYCHIATRIC MEDICATION OR THE PSYCHIATRIST, USE THE BLUE DOC-3035 HEALTH SERVICE REQUEST.
- PLACE COMPLETED FORM IN THE DESIGNATED COLLECTION LOCATION. DO NOT SEPARATE THE FORM OR KEEP ONE OF THE COPIES.
- PRINT CLEARLY

LAST NAME Lindell		FIRST NAME Nate	DOC NUMBER 303724
FACILITY WCI	HOUSING UNIT Seg	CELL NUMBER A-210	TODAY'S DATE

REQUEST FOR:

- PSYCHOLOGICAL SERVICES
 REVIEW MY PSYCHOLOGY RECORD
 INFORMATION
 OTHER: _____

FOLD THIS REQUEST OVER TO THE LINE BELOW SO THAT INFORMATION REMAINS CONFIDENTIAL

DO NOT USE THIS FORM IF YOUR MENTAL HEALTH NEED IS AN EMERGENCY, SPEAK TO STAFF DIRECTLY.

IN THE LINED AREA BELOW, WRITE DOWN WHAT YOUR REQUEST IS ABOUT. BE AS SPECIFIC AS YOU CAN.

Dr. [redacted] Today I received a C.R. from Dr. [redacted] which accuses me of saying to you "I like your [ass] but when you wear that purple sweater you look like an ompa loompa." I know I never said "ass" nor have ever said that to you or even about you, although many others have. We know I made the ompa loompa comment, but I ask that you clarify what I really said, about your "hair", not your "ass." Frankly, I meant no harm in the

I WOULD LIKE TO SEE PSYCHOLOGY STAFF
 I DO NOT NEED TO SEE PSYCHOLOGY STAFF *ompa loompa comment*

DO NOT WRITE BELOW THIS LINE - TO BE FILLED IN BY STAFF ONLY

TRIAGED BY	DATE RECEIVED	ACTION	STAFF INITIALS
<input checked="" type="checkbox"/> PSU	MAR 27 2013	<input type="checkbox"/> Direct Response	[redacted]
<input checked="" type="checkbox"/> HSU		<input checked="" type="checkbox"/> Refer to PSU (routine)	[redacted]
NOTES (IF NEEDED)		<input type="checkbox"/> Delegate to _____ <input type="checkbox"/> Other (specify in notes below)	

RESPONSE

- A psychology appointment is scheduled for the following time frame: _____
 Your request has been referred to the Psychiatrist within the Health Service Unit
 Your request has been referred to the Health Services Unit for medical issues
 A record review appointment will be scheduled

Other: **Forwarded to Dr. [redacted] 3/28/13 Cf**
Copy provided to Dr. [redacted] for reference
I think we addressed this on the other 2 PSRs on the topic.

STAFF SIGNATURE [redacted]	DATE SIGNED 3-29-13	PRINT STAFF NAME Dr. [redacted]
-------------------------------	-------------------------------	---

PSYCHOLOGICAL SERVICE REQUEST

- THIS FORM IS INTENDED FOR THE PSYCHOLOGICAL SERVICES UNIT (PSU).
- IF YOUR REQUEST IS RELATED TO PSYCHIATRIC MEDICATION OR THE PSYCHIATRIST, USE THE BLUE DOC-3035 HEALTH SERVICE REQUEST.
- PLACE COMPLETED FORM IN THE DESIGNATED COLLECTION LOCATION. DO NOT SEPARATE THE FORM OR KEEP ONE OF THE COPIES.
- PRINT CLEARLY

LAST NAME Lindell	FIRST NAME Nate	DOC NUMBER 303724
FACILITY WCI	HOUSING UNIT Seg.	CELL NUMBER A-210
TODAY'S DATE		

REQUEST FOR:

PSYCHOLOGICAL SERVICES INFORMATION

REVIEW MY PSYCHOLOGY RECORD OTHER: _____

FOLD THIS REQUEST OVER TO THE LINE BELOW SO THAT INFORMATION REMAINS CONFIDENTIAL

DO NOT USE THIS FORM IF YOUR MENTAL HEALTH NEED IS AN EMERGENCY, SPEAK TO STAFF DIRECTLY.

IN THE LINED AREA BELOW, WRITE DOWN WHAT YOUR REQUEST IS ABOUT. BE AS SPECIFIC AS YOU CAN.

Dr. Tobiasz & Baird: Recently your Dr. Endres falsely accused me of telling Dr. McClaren, "I like your ass" when I actually said, "I like your hair" (it is interestingly colored - purple, black, maybe some red). This seems to me to be a) a sort of jealous Freudian slip, because I've never said such to other staff with asses I find more appealing; b) retaliation against me for asking PSU to provide proper care for mentally ill inmates around me, which Dr. Endres took great offense to. It is also bizarre, given that Dr. Endres is always dressed in tight bottoms, which elicit constant comments about her rear.

I WOULD LIKE TO SEE PSYCHOLOGY STAFF I DO NOT NEED TO SEE PSYCHOLOGY STAFF

DO NOT WRITE BELOW THIS LINE - TO BE FILLED IN BY STAFF ONLY

TRIAGED BY	DATE RECEIVED	ACTION	STAFF INITIALS
<input checked="" type="checkbox"/> PSU		<input type="checkbox"/> Direct Response <input type="checkbox"/> Delegate to _____	[REDACTED]
<input checked="" type="checkbox"/> HSU		<input checked="" type="checkbox"/> Refer to PSU (routine) <input type="checkbox"/> Other (specify in notes below)	
NOTES (IF NEEDED)	MAR 27 2013		

RESPONSE

A psychology appointment is scheduled for the following time frame: _____

Your request has been referred to the Psychiatrist within the Health Service Unit

Your request has been referred to the Health Services Unit for medical issues

A record review appointment will be scheduled

Other: Letter forwarded to Dr. [REDACTED] 3/28/13 Cf

Mr. Lindell

I wasn't present during this interaction so obviously I don't have much input to that, however, after reading all three of your PRs on the subject it seems clear that some

STAFF SIGNATURE: _____ DATE SIGNED: _____ PRINT STAFF NAME: _____

inappropriate comments were made. Additionally, your added comments were about Dr. Endres's clothing & body area, appropriate with men who consent with mental health, not to be critiqued about our appearance

PSU Record, Inmate Correspondence Section

PSYCHOLOGICAL SERVICE REQUEST

- THIS FORM IS INTENDED FOR THE PSYCHOLOGICAL SERVICES UNIT (PSU).
- IF YOUR REQUEST IS RELATED TO PSYCHIATRIC MEDICATION OR THE PSYCHIATRIST, USE THE BLUE DOC-3035 HEALTH SERVICE REQUEST.
- PLACE COMPLETED FORM IN THE DESIGNATED COLLECTION LOCATION. DO NOT SEPARATE THE FORM OR KEEP ONE OF THE COPIES.
- PRINT CLEARLY

LAST NAME Lindell	FIRST NAME Nate	DOC NUMBER 303724
FACILITY WCI	HOUSING UNIT Seg.	CELL NUMBER A-210 A-210
REQUEST FOR:		TODAY'S DATE 19 March 2013

REQUEST FOR:

PSYCHOLOGICAL SERVICES

REVIEW MY PSYCHOLOGY RECORD

INFORMATION *It's not a very good lie, given that a) I have no sex cases b) have no c.r.'s for comments like that*

OTHER:

FOLD THIS REQUEST OVER TO THE LINE BELOW SO THAT INFORMATION REMAINS CONFIDENTIAL

DO NOT USE THIS FORM IF YOUR MENTAL HEALTH NEED IS AN EMERGENCY, SPEAK TO STAFF DIRECTLY.

IN THE LINED AREA BELOW, WRITE DOWN WHAT YOUR REQUEST IS ABOUT. BE AS SPECIFIC AS YOU CAN.

Dr. [redacted] - Just to let you know, I may be suing you for your libel in C.R. 2342016. I've never told Dr. [redacted] "I like your ass," but have told her several times I liked her hair coloring. I've never told you I liked your ass, though your figure is popularly deemed better, based on the comment of many prisoners who tell you so. And you always wear tight pants/bottoms, which you must know will elicit such comments from male prisoners. I'm curious, why did you falsely accuse

I WOULD LIKE TO SEE PSYCHOLOGY STAFF

I DO NOT NEED TO SEE PSYCHOLOGY STAFF *me of saying I liked the person's ass*

DO NOT WRITE BELOW THIS LINE - TO BE FILLED IN BY STAFF ONLY

TRIAGED BY	DATE RECEIVED	ACTION	STAFF INITIALS
<input checked="" type="checkbox"/> PSU	MAR 27 2013	<input type="checkbox"/> Direct Response <input type="checkbox"/> Delegate to _____	[redacted]
<input checked="" type="checkbox"/> HSU		<input checked="" type="checkbox"/> Refer to PSU (routine) <input type="checkbox"/> Other (specify in notes below)	

NOTES (IF NEEDED)

By _____

RESPONSE

- A psychology appointment is scheduled for the following time frame: _____
- Your request has been referred to the Psychiatrist within the Health Service Unit
- Your request has been referred to the Health Services Unit for medical issues
- A record review appointment will be scheduled

Other: Forwarded to Dr. [redacted] 3/28/13 Cf

Mr. Lindell, Dr. Endres were provided an opportunity to read this, but as your clinician I will respond. you know what your legal rights & procedure are. I think you're also aware that what you wrote here is largely inappropriate. Discussion of staff's

STAFF SIGNATURE [redacted]	DATE SIGNED 3-29-13	PRINT STAFF NAME Dr. [redacted]
-------------------------------	------------------------	------------------------------------

appearance, even in the manner you put it here, is not ok. This type of interaction isn't helping you get your needs met here.

ADULT CONDUCT REPORT

CONDUCT REPORT NUMBER

PLEASE PRINT OFFENDER'S NAME

Exhibit 6

2400902

OFFENDER NAME - Last: LINDELL, NATHANIEL First: MI: DOC NUMBER: 303724 INST. CODE: 02

OFFENDER LIVING QUARTERS: 5E6 B-224 LOCATION OF INCIDENT: 5E6 B-224 DATE OF INCIDENT (MM/DD/YY): 07-30-13 TIME OF INCIDENT: 1 AM 2 PM 2:56

IF PERSON INJURED-SPECIFY STATUS (Staff, Offender, Visitor): N/A CONTRABAND INVOLVED: Yes No IF WEAPON INVOLVED - WHAT:

RULE ALLEGEDLY VIOLATED			FINDING OF GUILT	
Rule Number	Rule	Guilty	Not Guilty	
1 303	<u>2 5</u> DISRESPECT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 303	<u>2 8</u> DISRUPTIVE CONDUCT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3 303	<u>4 7</u> POSSESSION OF CONTRABAND - MISCELLANEOUS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4 303		<input type="checkbox"/>	<input type="checkbox"/>	

DESCRIPTION OF INCIDENT (Include Detailed Facts upon which Charges are based, sources of information, evidence, statement of other staff members and, if appropriate, cell or shop assignment number.)
ON THE ABOVE DATE AND APPROXIMATE TIME I, CO KLEMMER, WAS WORKING MY ASSIGNED POST AS 5E6 4 OFFICER IN THE SEPARATION COMPLEX. WHILE REMOVING INMATE LINDELL, NATHANIEL (DOC #303724) FOR DAILY LEGAL REC, WHO WAS CURRENTLY HOUSED IN CELL B-224, I OBSERVED INMATE LINDELL REMOVE A PEN INSERT WRAPPING AND DROP IT DOWN HIS RIGHT PANT LEG. ONCE RESTRAINTS WERE APPLIED AND DOOR B-224 WAS OPENED I CONDUCTED A PAT SEARCH. I DISCOVERED THE PEN INSERT WRAPPING INSIDE INMATE LINDELL'S PANT LEG WHICH WAS TUCKED INSIDE HIS RIGHT SOLE. I INFORMED INMATE LINDELL HIS CONDUCT MAY WARRANT A REFUSAL FOR LEGAL REC. INMATE LINDELL THEN BELAUGES DISRUPTIVE AND STATED, "I DON'T NEED YOUR FUCKING LEG, BITCH. YOU WONDER WHY CO'S GET PISS AND SHIT THROWN ON THEM. I INFORMED INMATE LINDELL THAT DUE TO HIS DISRUPTIVE CONDUCT, DISRESPECT AND ATTEMPT TO BRING CONTRABAND TO LEGAL REC, HIS LEGAL REC WOULD BE REFUSED FOR THE DAY. THE PEN WRAPPING WAS A BLUE PLAYING CARD ROLLED INTO A TUB. NO FURTHER INCIDENTS OCCURRED. EOR.

ACTIVITY AT TIME OF INCIDENT: Full SIGNATURE OF STAFF MEMBER COMPLETING REPORT: [Redacted] DATE COMPLETED: 07-30-13

SECURITY DIRECTOR'S REVIEW (Complete only if no summary disposition was made)

DECISION ON CONDUCT REPORT: Proceed Dismiss Return for Investigation IS OFFENDER IN TLU: Yes No TYPE OF HEARING PROCEDURE: Minor Offense 303.75 Major Offense 303.76

IF A MAJOR HEARING, INDICATE WHY:
 The alleged violation is designated as a Major Offense by DOC 303.68(3) OR
 The offender has previously been found guilty of the same or a similar offense (consideration given to how often and how recently)
 The offender has recently been warned about the same or similar conduct
 The alleged violation created a risk of serious disruption at the institution or in the community
 The alleged violation created a risk of serious injury to another person
 The value of the property involved (if alleged violation was actual or attempted damage and/or misuse of property, possession of money, gambling, unauthorized transfer of property, soliciting staff or theft)

SIGNATURE OF SECURITY DIRECTOR: Capt [Redacted] DATE SIGNED: 7/31/13

DATE COPY GIVEN TO OFFENDER: 7-31-13 TIME COPY GIVEN TO OFFENDER: 9:23 P.M. SIGNATURE OF STAFF MEMBER DELIVERING COPY TO OFFENDER: [Redacted]

RECORD OF SUMMARY DISPOSITION

SUMMARY DISPOSITION

SHIFT SUPERVISOR'S SIGNATURE OF APPROVAL: OFFENDER'S SIGNATURE OF AGREEMENT:

RECORD OF CONDUCT REPORT DISPOSITION

DATE OF DISPOSITION (MM/DD/YY): 8-6-13 MAJOR DISPOSITION: 180 DAYS DIS. STR DISPOSITION(S):
 REFERRED TO PROGRAM REVIEW: 1 Yes 2 No 3 Not Known Yes No

ADULT CONDUCT REPORT

Exhibit 7

PLEASE PRINT OFFENDER'S NAME

CONDUCT REPORT NUMBER

OFFENDER NAME - Last LINDRLL	First NATHANIEL	MI	DOC NUMBER 303724	INST. CODE 02	2345593
OFFENDER LIVING QUARTERS SEG B224	LOCATION OF INCIDENT SEG B224		DATE OF INCIDENT (MM/DD/YY) 08/05/13	TIME OF INCIDENT 3:15	1 <input type="checkbox"/> AM 2 <input checked="" type="checkbox"/> PM
IF PERSON INJURED-SPECIFY STATUS (Staff, Offender, Visitor) N/A			CONTRABAND INVOLVED Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		IF WEAPON INVOLVED - WHAT N/A

RULE ALLEGEDLY VIOLATED

Rule Number	Rule	FINDING OF GUILT	
		Guilty	Not Guilty
1 303	DISRESPECT	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 303	DISRUPTIVE CONDUCT	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 303		<input type="checkbox"/>	<input type="checkbox"/>
4 303		<input type="checkbox"/>	<input type="checkbox"/>

DESCRIPTION OF INCIDENT

(Include Detailed Facts upon which Charges are based, sources of information, evidence, statement of other staff members and, if appropriate, cell or shop assignment number.)

ON THE ABOVE DATE AND APPROXIMATE TIME I, CO CHRISTINA, WAS DISPENSING MEDICATION ON UPPER B RANGE AS PART OF MY SEG 5 OFFICER DUTIES. AS I APPROACHED CELL B224, WHICH HOUSES INMATE LINDRLL, NATHANIEL (30324), I HEARD HIM TALKING ABOUT THE RESULT OF A JOHN DOE PETITION HE HAD FILED. WHEN I GOT CLOSER TO THE CELL, I HEARD AND OBSERVED INMATE LINDRLL LOUDLY TELL "I AM GOING TO APPEAR IT SO THAT WE CAN GET THAT FAT BIRTH, PEDOPHILE MOUNGED ON RECORD. I ASKED LINDRLL IF

ACTIVITY AT TIME OF INCIDENT TYPE OF HANDLING FULL SIGNATURE OF STAFF MEMBER COMPLETING REPORT [Redacted] DATE COMPLETED **08/05/13**

SECURITY DIRECTOR'S REVIEW (Complete only if no summary disposition was made)

DECISION ON CONDUCT REPORT: Proceed Dismiss Return for Investigation
IS OFFENDER IN TLU: Yes No
TYPE OF HEARING PROCEDURE: Minor Offense 303.75 Major Offense 303.76

IF A MAJOR HEARING, INDICATE WHY:

- The alleged violation is designated as a Major Offense by DOC 303.68(3) OR
- The offender has previously been found guilty of the same or a similar offense (consideration given to how often and how recently)
- The offender has recently been warned about the same or similar conduct
- The alleged violation created a risk of serious disruption at the institution or in the community
- The alleged violation created a risk of serious injury to another person
- The value of the property involved (if alleged violation was actual or attempted damage and/or misuse of property, possession of money, gambling, unauthorized transfer of property, soliciting staff or theft)

SIGNATURE OF SECURITY DIRECTOR [Redacted] DATE SIGNED **8-6-13**

DATE COPY GIVEN TO OFFENDER **08/06/13** TIME COPY GIVEN TO OFFENDER **12:05 P.M.** SIGNATURE OF STAFF MEMBER DELIVERING COPY TO OFFENDER **CO IROSS**

RECORD OF SUMMARY DISPOSITION

SUMMARY DISPOSITION

SHIFT SUPERVISOR'S SIGNATURE OF APPROVAL _____ OFFENDER'S SIGNATURE OF AGREEMENT _____

RECORD OF CONDUCT REPORT DISPOSITION

DATE OF DISPOSITION (MM/DD/YY) **8-12-13** MAJOR DISPOSITION Yes No
DISPOSITION(S) **180 DAYS DIS, SUP.**
REFERRED TO PROGRAM REVIEW: 1 Yes 2 No 3 Not Known

ADULT CONDUCT REPORT Continued

OFFENDER NAME Last	First	MI	INSTITUTION	CONDUCT REPORT NUMBER
LINDZELL	NATHANWICZ		02	2345593

DESCRIPTION OF INCIDENT - Continued

HE WAS REFFERING TO GO MOUNGED AND HE STATED "YES AND TOUR A FAT BITZH TOO, GO AHEAD AND GIVE ME A TICKET FOR THAT NOW." I TOLD HIM I WOULD BE WRITING A CONDUCT REPORT FOR DISRESPECT. A COPY OF THE INMATES WARNING CARD ACCOMPANIES THIS REPORT. -EOR-

[REDACTED]

OFFICER

08/05/13

Served by

9/ [REDACTED]

08/06/13 @ 12:05 pm

Exhibit 8

DEPARTMENT OF CORRECTION
Division of Adult Institutions
DOC-3035B (Rev. 9/2008)

WISCONSIN

PSYCHOLOGICAL SERVICE REQUEST

- THIS FORM IS INTENDED FOR THE PSYCHOLOGICAL SERVICES UNIT (PSU).
- IF YOUR REQUEST IS RELATED TO PSYCHIATRIC MEDICATION OR THE PSYCHIATRIST, USE THE BLUE DOC-3035 HEALTH SERVICE REQUEST.
- PLACE COMPLETED FORM IN THE DESIGNATED COLLECTION LOCATION. DO NOT SEPARATE THE FORM OR KEEP ONE OF THE COPIES.
- PRINT CLEARLY

LAST NAME <u>Lindell</u>		FIRST NAME <u>Nate</u>	DOC NUMBER <u>303724</u> <i>notes</i>
FACILITY <u>WCI</u>	HOUSING UNIT <u>Seg</u>	CELL NUMBER <u>C-216</u>	TODAY'S DATE <u>9 July 2013</u>

REQUEST FOR:

PSYCHOLOGICAL SERVICES INFORMATION

REVIEW MY PSYCHOLOGY RECORD OTHER: _____

FOLD THIS REQUEST OVER TO THE LINE BELOW SO THAT INFORMATION REMAINS CONFIDENTIAL

DO NOT USE THIS FORM IF YOUR MENTAL HEALTH NEED IS AN EMERGENCY, SPEAK TO STAFF DIRECTLY.

IN THE LINED AREA BELOW, WRITE DOWN WHAT YOUR REQUEST IS ABOUT. BE AS SPECIFIC AS YOU CAN.

Dr. [redacted] I lost my mind for a moment. P.O. Moungey has severely physically & sexually abused several prisoners here, one of whom just received the suit I wrote for him today. Moungey's mere presence already makes me sick & very angry! When he came to my door to take me out to rec. he cut me with the handcuffs, pinched me so hard it bled. When I yanked my hands back in & asked him WTF he's doing, he denied me rec. Every time he's around me he does some b.s. I got so mad my head hurts still. Thought I'd tell you, as you're my bridge. Also enclosed is the carbon for an article I did for The Nation. Thought you might be interested. Sorry for typos. Please return when done with it. Thanks

I WOULD LIKE TO SEE PSYCHOLOGY STAFF I DO NOT NEED TO SEE PSYCHOLOGY STAFF

DO NOT WRITE BELOW THIS LINE - TO BE FILLED IN BY STAFF ONLY

TRIAGED BY	DATE RECEIVED	ACTION	STAFF INITIALS
<input type="checkbox"/> PSU		<input type="checkbox"/> Direct Response <input type="checkbox"/> Delegate to _____	
<input type="checkbox"/> HSU		<input type="checkbox"/> Refer to PSU (routine) <input type="checkbox"/> Other (specify in notes below)	

NOTES (IF NEEDED)

RESPONSE

- A psychology appointment is scheduled for the following time frame: _____
- Your request has been referred to the Psychiatrist within the Health Service Unit
- Your request has been referred to the Health Services Unit for medical issues
- A record review appointment will be scheduled

Other: Mr. Lindell, I would like to continue as your "bridge" with the staff and thank you for writing. It is important that matters be handled carefully. How do you perceive my accomplishing this at this time? You are normally full of suggestions for the direction of the

STAFF SIGNATURE <u>Dr. [redacted] PJP</u>	DATE SIGNED <u>7-11-13</u>	PRINT STAFF NAME <u>Dr. [redacted]</u>
--	-------------------------------	---

Best merit. Thank you!

PATIENT

Exhibit 9

WISCONSIN

DEPARTMENT OF CORRECTIONS
Division of Adult Institutions
DOC-3473 (REV. 7/2010)

PSYCHOLOGICAL SERVICES CLINICAL CONTACT

COPY

PATIENT NAME Lindell Nathaniel				Sources of Information <input checked="" type="checkbox"/> Clinical Interview <input type="checkbox"/> Social Services File <input type="checkbox"/> Psychological Testing <input type="checkbox"/> Other <input type="checkbox"/> PSU File <input type="checkbox"/> HSU Chart	
DOC NUMBER 303724	FACILITY WCI	LOCATION HSC/Out of Cell	DATE OF SERVICE 9/23/2013		
CURRENT MENTAL HEALTH CLASSIFICATION (SMI=seriously mentally ill) <input checked="" type="checkbox"/> MH-0 No MH Need <input checked="" type="checkbox"/> MH-1 MH need, not SMI <input type="checkbox"/> MH-2A Axis I SMI <input type="checkbox"/> MH-2B Axis II SMI					CURRENT SPECIAL CLASS <input checked="" type="checkbox"/> DD

REASON FOR CONTACT
At inmate's request

RELEVANT HISTORY
Mr. Lindell has a history of violent behavior including a conviction of murder and assaulting another inmate. Results of psychological testing identified several above average cognitive abilities, particularly among the verbal subtests.

PATIENT'S REPORT
The I/M complained about harrassment by security staff. He also wanted me to know that I/Ms pretend to get along with PSU staff, but talk about us behind our backs, particularly toward Dr. [redacted]. He then discussed wanting to get off "A" range, and to communicate with staff better. He stated he would sacrifice that to continue angering staff by writing complaints on behalf of other I/Ms, though. We discussed a number of strategies he could take to move off "A" range including 1) not making comments out the cell door that apply to other I/Ms when staff are on the range and may mistakenly think he is talking about them, 2) continuing to appropriately advocate for himself and others, and 3) not appearing to forge the signature of other I/Ms on documents. He did become angry with me briefly, which led to a breakthrough, and his becoming more serious about focusing on his own issues rather than side-stepping them and talking about other I/Ms. He was able to answer screening questions for me which indicated that he can qualify for a diagnosis of PTSD and inclusion in the PTSD group, although I had already made the diagnosis based upon reading his file and my clinical observations.

MENTAL STATUS: MSE WNL, except
Today the I/M became angry for the first time. The I/M has not slept well since being moved to "A" range and appeared over-tired. He appeared to misunderstand somethings I had said, and became defensive and aggressive. He quickly regained control of his emotions, and appeared tired and spent at that point. At that point he appeared to be more honest and self-disclosing. He was able to concentrate and focus on treating his own symptoms rather than hiding them behind a mask of joviality.

DIAGNOSIS
Axis I PTSD; Adjustment Disorder with Depression
Axis II Antisocial Personality Disorder with Narcissistic Features
Axis III (If Relevant)

TREATMENT PLAN/FOLLOW-UP
The I/M received active listening, empathy, and psychoeducation pertaining to the trauma process. He also received CBT (thought reframing). We made a short list of things he can do to get along with security staff better, and which he will implement during the next week. The I/M was also screened for the seg trauma group, and qualifies for trauma treatment according to the protocol.

MENTAL HEALTH CLASS OR SPECIAL CLASS CHANGE
 MH code has changed Date: 7/16/2005 Added DD

MH CLASS
 MH-0 No MH Need MH-1 Need, not SMI MH-2A Axis I SMI MH-2B Axis II SMI
SPECIAL CLAS DD

PSU STAFF SIGNATURE [redacted] Ph.D. Psychological Services
DATE SIGNED 9/26/13

SUPERVISOR'S SIGNATURE (If needed) [redacted]
DATE SIGNED 10/2/13

Exhibit 10

DEPARTMENT OF CORRECTION
Division of Adult Institutions
DOC-3035B (Rev. 9/2008)

WISCONSIN

PSYCHOLOGICAL SERVICE REQUEST

- THIS FORM IS INTENDED FOR THE PSYCHOLOGICAL SERVICES UNIT (PSU).
- IF YOUR REQUEST IS RELATED TO PSYCHIATRIC MEDICATION OR THE PSYCHIATRIST, USE THE BLUE DOC-3035 HEALTH SERVICE REQUEST.
- PLACE COMPLETED FORM IN THE DESIGNATED COLLECTION LOCATION. DO NOT SEPARATE THE FORM OR KEEP ONE OF THE COPIES.
- PRINT CLEARLY

LAST NAME <i>Lindell</i>	FIRST NAME <i>Note</i>	DOC NUMBER <i>303724</i>
FACILITY <i>WCI</i>	HOUSING UNIT <i>Seg.</i>	CELL NUMBER <i>A208</i>
		TODAY'S DATE <i>26 Sept. 2013</i>

REQUEST FOR:

- PSYCHOLOGICAL SERVICES INFORMATION
 REVIEW MY PSYCHOLOGY RECORD OTHER: _____

FOLD THIS REQUEST OVER TO THE LINE BELOW SO THAT INFORMATION REMAINS CONFIDENTIAL

DO NOT USE THIS FORM IF YOUR MENTAL HEALTH NEED IS AN EMERGENCY, SPEAK TO STAFF DIRECTLY.

IN THE LINED AREA BELOW, WRITE DOWN WHAT YOUR REQUEST IS ABOUT. BE AS SPECIFIC AS YOU CAN.

Dr. [redacted] There's a bunch of crazy people on this tier who not only are driving me crazy with their constant noise, but do not belong in seg. - Mr. Miller, Mr. Pelton, & a bunch of others.

The DOC seems to be juggling these nuts instead of housing them in less punitive, more therapeutic ~~environs~~ environs. Will you please explain why this is? Is there no room, no \$, or are these cats deemed sane or forgotten for harsh treatment?

- I WOULD LIKE TO SEE PSYCHOLOGY STAFF I DO NOT NEED TO SEE PSYCHOLOGY STAFF

DO NOT WRITE BELOW THIS LINE - TO BE FILLED IN BY STAFF ONLY

TRIAGED BY	DATE RECEIVED	ACTION	STAFF INITIALS
<input checked="" type="checkbox"/> PSU		<input type="checkbox"/> Direct Response <input type="checkbox"/> Delegate to _____	[redacted]
<input checked="" type="checkbox"/> HSU		<input checked="" type="checkbox"/> Refer to PSU (routine) <input type="checkbox"/> Other (specify in notes below)	[redacted]

NOTES (IF NEEDED)

RESPONSE

- A psychology appointment is scheduled for the following time frame: _____
 Your request has been referred to the Psychiatrist within the Health Service Unit
 Your request has been referred to the Health Services Unit for medical issues
 A record review appointment will be scheduled

Other: *Mr. Lindell, it sounds as though you are experiencing some symptoms related to trauma. Keep taking care of yourself until you move to a different tier. You have some excellent coping tools! I will speak with you out at the unit Monday.*

STAFF SIGNATURE [redacted]	DATE SIGNED <i>10/1/13</i>	PRINT STAFF NAME <i>Dr. [redacted]</i>
-------------------------------	-------------------------------	---

PATIENT