

1 told Mr. that if he was returned to the IMU, he would start self-
2 harming again. *Id.* Mr. Troupe continued his cycle of self-harm, return
3 to MHU, return to IMU, and self-harm again, over the next few months.
4 ECF No. 118 at 83-84.

5 On June 27, 2011, Mr. Troupe had a particularly bad incident of
6 self-harm. ECF No. 118 at 84. It was his second incident in 72 hours
7 and it required Mr. Troupe to have 13 stiches. *Id.* It was on this day
8 where Mr. assessed Mr. Troupe as a suicide risk. ECF No. 118 at
9 84-85 & 89. Mr. listed Mr. Troupe as an "extreme suicide risk,"
10 and ordered that he continue on the restraint bed. *Id.* This
11 contradicts Mr. s declaration where he stated that he "never
12 evaluated Mr. Troupe to be suicidal." See ECF No. 86 at 3.

13 A month later, Dr. , Mr. Troupe's treating
14 psychologist, conducted a psychological evaluation of Mr. Troupe and
15 clarified Mr. Troupe's condition for the mental-health staff at the
16 MHU. See ECF No. 118-1 at 124. In that report, Dr. declared Mr.
17 Troupe a "low" risk of self-harm. *Id.* However, he did note that Mr.
18 Troupe's use of minor self-harm as a manipulation tactic could lead to
19 accidental serious injury. *Id.* Dr. thought that the current
20 pattern of short, intermittent stays in the MHU provided Mr. Troupe
21 with the attention he wanted with relatively little discomfort. *Id.*
22 This would likely foster repetitious behavior leading to more self-
23 harm. *Id.* His recommendation was that, if a restraint table is
24 necessary, to put Mr. Troupe on the table for longer periods of time.
25 *Id.*
26

1 The pattern of self-harm, and reentry into the MHU, continued
2 for the next year. See ECF No. 118 at 73-84. By December 2011, Mr.
3 believed that Mr. Troupe was not "suicidal" in the mental health sense
4 of the word. *Id.* at 82. Mr. believed that Mr. Troupe "uses" self-
5 harm to create a scene, affect his housing placement, and ensure his
6 removal from IMU. *Id.* He noted that Mr. Troupe's mental-health care
7 providers needed to come up with a different solution or "the current
8 revolving door of IMU placement, misbehaviors, minor self-harm, MHU
9 placement and return to IMU will continue infinitum." *Id.* In short,
10 Mr. believed that Mr. Troupe was not a suicide risk but, instead,
11 used his self-harm as a manipulation tactic.

12 On May 9, 2012, Mr. Troupe was again admitted to the MHU after
13 an incident of self-harm. ECF No. 118 at 75. According to Mr. the
14 only difference between this time and the previous times was the
15 length of time Mr. Troupe spent on the restraint bed. *Id.* Mr. Troupe
16 was placed on the restraint table for 13 days. *Id.* On May 21, 2012,
17 Ms. expressed to Mr. that she wanted to release Mr.
18 Troupe. *Id.* She told Mr. that she and the medical staff believed
19 that continued restraint of the bed would cause more harm than it was
20 preventing. *Id.* Mr. agreed with Ms. they released Mr. Troupe
21 to a seclusion room. *Id.* NO. TO IMU'S.

22 Mr. Troupe claims that Mr. told him that they were releasing
23 him because Ms. and Mr. were mad at Mr. Troupe. ECF
24 No. 10 at 4. He also claims that he repeatedly told the mental-health
25 care providers that he would immediately begin self-harming if
26 released from the table. In his report, Mr. stated that he

1 believed any potential self-harm would likely be minor and there was a
2 chance that no self-harm would occur. ECF No. 118 at 75.

3 Mr. Troupe was then released to a seclusion room prior to his
4 admittance to the IMU where he immediately began cutting himself. He
5 was again placed on the restraint table where he stayed for another
6 eighteen days. ECF No 118 at 74. Mr. Troupe claims that while he was
7 cutting himself in the seclusion room, Mr [redacted] walked past the window
8 of the room was able to see Mr. Troupe, and did nothing to help him.

9 The decision to release Mr. Troupe on May 21, 2012, and the
10 failure to act after Mr. Troupe began cutting himself again are what
11 Mr. Troupe claims are Eighth Amendment violations. ECF No. 10. Mr.
12 claims that he did not act with deliberate indifference and that the
13 decision to release Mr. Troupe was made with Mr. Troupe's best
14 interest in mind. As stated above, in order for Mr [redacted] to succeed in
15 his summary-judgment motion, he must show that, based on the facts
16 taken in the light most favorable to the Plaintiff, no reasonable jury
17 could find that he 1) placed Mr. Troupe in conditions posing a
18 substantial risk of harm and 2) did so knowing and disregarding that
19 risk.

20 The Court does not believe that Mr. [redacted] has met this burden and
21 declines to grant summary judgment. While it is possible for a jury to
22 find that Mr [redacted] acted properly, a reasonable jury could also find
23 that Mr [redacted] disregarded clear signs that Mr. Troupe was a continued
24 danger to himself and released him anyway, ignoring that risk.

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2 On May 21, 2012, was a Mental Health Program
3 Manager at the MHU. ECF No. 83 at 2. Ms. had numerous and
4 significant contacts with Mr. Troupe over the years prior. See ECF No.
5 83 at 2-8. Ms. had the same understanding of Mr. Troupe's
6 medical condition as Mr. did and her evaluation of Mr. Troupe was
7 also that he used self-harm as a manipulation tactic to get what he
8 wanted. *Id.*

9 Ms. was on Mr. Troupe's treatment team on May 21, 2012.
10 She and the team agreed that Mr. Troupe had a low risk of self-harm
11 and should be released. ECF No. 83 at 11. The team also agreed that
12 keeping Mr. Troupe on the restraint bed any longer would expose Mr.
13 Troupe to harm resulting from staying on the bed too long such as bed
14 sores and muscle deterioration. *Id.*

15 Mr. Troupe claims that Ms. acted with deliberate
16 indifference in recommending to Mr. that he be released from the
17 restraint bed. ECF No. 10. Mr. Troupe also claims, as he does with Mr.

18 that after he was released to the seclusion room Ms. walked
19 by the holding cell window and did not help Mr. Troupe even after Ms.
20 was able to see that he had begun cutting himself again.

21 Because Ms. , just like Mr. was part of the decision-
22 making team that chose to release Mr. Troupe from the restraint bed,
23 the Court cannot grant Ms. s summary-judgment motion. As with
24 Mr a jury could find that Ms. acted in Mr. Troupe's best
25 interest. But a jury could also find that Ms. disregarded a
26 substantial risk of harm in releasing Mr. Troupe.