(b)(6)(b)(7)(C)

From: (b)(6)(b)(7)(C)
Sent: Friday, January 31, 2020 2:44 PM
To: Boston ICE; (b)(6)(b)(7)(C)
(b)(6)(b)(7)(C)
Cc: Facility Commanders
Subject: Code Blue in J2-Pod

Good Afternoon,

(J2-Pod) Code Blue (Physical Altercation):

Detainee (b)(6)(b)(7)(C) and Detainee (b)(6)(b)(7)(C) were involved in a physical altercation in J2-Pod (General Population), cell 1 where Detainee (b)(6)(b)(7)(C) resides. Both combatants were removed from the unit, evaluated by medical and placed in Receiving and Discharge pending housing in Restrictive Housing (Lockdown) for their actions. Neither detainee sustained any injuries and neither detainee wanted to press charges. This incident is still under review. Updates to follow.

Thank you

(b)(6)(b)(7)(C)
DONALD W. WYATT DETENTION FACILITY
950 HIGH STREET
CENTRAL FALLS, RI 02863
WORK: (401) 721-(b)(6)(b)(7)(C)
CELL: (401) 644-(b)(6)(b)(7)(C)
(b)(6)(b)(7)(C)WYATTDETENTION.COM

ICE Review of Segregation Cases

Alien Number	Last Name, First Name	Gender	Custody Class.	AOR	Facility
(b)(6)(b)(7)(C)	(b)(6)(b)(7)(C)	M	3	BOS	Donald W. Wyatt Detention Facility

1. **Type of Notification:**

   ☒14-Day*
   ☐30-Day
   ☐Other 30-Day Interval:
   _____

2. **Initial Date of Placement:** ____1/31/2020_____

3. **Date of Disciplinary Proceeding (If Applicable):**
   _____ __1/31/2020_____

4. **Length of Disciplinary Sanction (If Applicable):**
   _____ _____2/25/2020_____

*This form is necessary for a detainee in segregation for more than 14 days only if:

☐The detainee was placed in administrative segregation on the basis of a disability, medical or mental illness, suicide risk, hunger strike, status as a sexual assault victim, or other special vulnerability.

☐Regardless of the reason for the placement in segregation, the detainee has a mental illness or serious medical illness or serious physical disability; or

☐The FOD determines the segregation placement should be reviewed by ICE headquarters.

5. **Reason for Placement:** *(Select Only One)*

☒ Disciplinary
☐ Pending Investigation of Disciplinary Violation
☒ Facility Security: Violent or Disruptive Behavior
☐ Facility Security: Due to Seriousness of Criminal Conviction
☐ Facility Security: Gang Member Status (Not Protective Custody)
☐ Facility Security Threat: Other
☐ Protective Custody: Criminal Offense (i.e. Sex Offender)
☐ Protective Custody: Gang Status
☐ Protective Custody: Victim of Sexual Assault
☐ Protective Custody: Lesbian, Gay, Bisexual, Transgender (LBGT)
☐ Protective Custody: Other Special Vulnerability
☐ Protective Custody: Other
☐ Mental Illness
☐ Medical: TB or Other Infectious Diseases
☐ Medical: Disabled or Infirm
☐ Medical: Detox/Withdrawal Observation
☐ Medical: Other
☐ Hunger Strike
☐ Suicide Risk Placement
☐Other

Provide a detailed description of the reason(s) for the segregation placement, including all relevant facts articulated by the facility in justifying the placement: Subject was placed in segregation for unauthorized physical contact. Specifically, Subject was observed by a correctional officer, willfully walking into another detainee and shoving him out of his way with his shoulder.

6. **Did the detainee request segregation?**

☐YES ☒NO

ICE Review of Segregation Cases

7. **Is the segregation placement in compliance with the requirements of applicable detention standards (including the substantive grounds for placement and the procedural requirements for status reviews)?** See "Standards Reference" tab of the segregation spreadsheet for information about relevant detention standards.

☒YES ☐NO

If no, explain the area(s) of non-compliance:

8. **Does the detainee have a mental illness or serious medical illness or serious physical disability?**

☐YES ☒NO

If yes, provide a general description of the medical or mental issue: Per Dr. Grando, Florence Detention Center ICE Health Service Corps (IHSC) psychologist; [redacted] has a history of schizophrenia and is currently receiving treatment by IHSC staff.

9. **Does the Field Office Director or his/her designee have any concerns regarding the continued placement in segregation?**

☐YES ☒NO

If yes, explain:

10. **Does the Field Office Director or his/her designee recommend alternatives to segregation based on special vulnerabilities, identified concerns, or other factors?** (possible alternatives to segregation include release to general population; transfer to another facility where the detainee can be housed in an environment better suited to the needs of the detainee; transfer to a hospital; or, consistent with the requirements of mandatory detention, public safety, and other immigration enforcement considerations, release from custody.)

☐YES ☒NO

Explain why or why not:

11. **Additional Comment**

12. **Describe the detainee's immigration history and prior criminal history, if applicable:**
Subject is a final order. He is scheduled for escorted removal on 02/22/2020

13. ***Reviewing Supervisory Officer*** (b) (6), (b) (7)(C)

14. **Date:** 2-10-20

PREA INVESTIGATION FILE

Name of Alleged Victim: (b) (6), (b) (7)(C)

Name of Reporting Person if Different: Same

Date of Alleged Offense: November 28, 2021

Date of Report: November 29, 2021

Date of Notification to PREA Team: November 29, 2021

Date of Medical/Mental Health Referral: Victim 11/29/21 Perpetrator Transferred

Date Seen by Mental Health: Victim 11/29/21 Perpetrator Transferred

Date of Plymouth PD Referral (if applicable): Not applicable

Date Investigation Began: November 29, 2021

Date Investigation Concluded: November 30, 2021

Finding:
- ☐ Unfounded
- ☐ Unsubstantiated
- ☒ Substantiated

Date inmate notification sent: December 1, 2021

Date Case Closed: December 1, 2021

Date of 30 day review (if applicable): December 8, 2021

Date of 90 day review (if applicable): February 29, 2022

Comments:

PREA Managers Signature: (b) (6), (b) (7)(C)

☑ Concurrence of results ☐ Incident Closed

Comments:

PREA Coordinators Signature: (b) (6), (b) (7)(C)

The Commonwealth of Massachusetts
County of Plymouth
Sheriff's Office
Plymouth County Correctional Facility

26 Long Pond Road
[redacted]

Joseph D. McDonald, Jr
Sheriff

Accredited by:
American Correctional Association

November 30, 2021

[redacted]
79477
Unit GSE Room 203

Dear Mr. [redacted]

[redacted] Facility has reviewed your allegation and conducted an investigation. Action was taken and the allegation was determined to be substantiated.

Respectfully,

[redacted]
PREA Manager

2020-ICLI-00015 2378

Incident ID: (b)(7)(E)

Informational Report

Report Date	Incident Date	Incident Time
11/30/2021	11/29/2021	10:41

Name/Event: (b)(6)(b)(7)(C) **Booking Number:** (b)(6)(b)(7)(C)
Incident Location: GNE **Housing Location:** GSE / 203 / 1

Persons Involved: (b)(6)(b)(7)(C)
(b)(6)(b)(7)(C)

Report Subject: Inmate Misconduct **Reporting Officer:** (b)(6)(b)(7)(C)

On November 29, 2021 I received a report from Lt. (b)(6)(b)(7)(C) regarding a PREA allegation. ICE Detainee (b)(6)(b)(7)(C) reportedly received multiple, unwanted sexually explicit notes from inmate (b)(6)(b)(7)(C) Inmate (b)(6)(b)(7)(C) was immediately separated from (b)(6)(b)(7)(C) and placed in the Booking Department pending investigation. Following the receipt of this report and the notes provided by (b)(6)(b)(7)(C) a PREA Investigation was initiated.

On November 29, 2021 at approximately 0900hrs I interviewed (b)(6)(b)(7)(C) in the Pod G multi-purpose room. Upon review of the hand written notes (b)(6)(b)(7)(C) provided it was immediately apparent that they were very consistent with the style of writing Inmate (b)(6)(b)(7)(C) used during past harassment complaints. Several of the phrases written on the notes described requests for sexual favors such as:

"At least let me watch u jerk off and I want u to put it in a cup then pass it under ur door to me so I can drink it. >>deal??<<"

"Do u luv me? .....and since you won't kite the hair then I'll settle 4 simply touchin' ur foot 2morrow under ur door: deal?" <>.

(b)(6)(b)(7)(C) reported that he had received several "kites" over the last few days, the most recent one was yesterday evening, November 28, 2021. A review of the video surveillance system confirmed that inmate (b)(6)(b)(7)(C) while out on recreation, took a note from the cell of (b)(6)(b)(7)(C) and delivered it to (b)(6)(b)(7)(C) in cell GNE118. (b)(6)(b)(7)(C) said that he tried to ignore (b)(6)(b)(7)(C) but his notes became more aggressive and threatening. (b)(6)(b)(7)(C) wrote in his last note:

"Wat r u stupid? One way or the other up in ur little dumb azz 19yr old head u must be both dumb and deaf plus blind, clown!!! So iz we friendz or foes.. I RUN SHIT!!!"

"PS: Little wannabe Gotti nor none of theez other street JOKEZ that u slidin all my kites 'n' drawingz 2 can't truly help ya.... Neither can so-called mental health & any other punk azz staff ya simple teenybop azz keep reachin' out 2..... ain't u hip wen a TRUE psychopath simply don' t give thr3 fuccz???"

(b)(6)(b)(7)(C) reported that he became afraid by the increased aggression shown to him by (b)(6)(b)(7)(C) and he reported the situation to Lt. (b)(6)(b)(7)(C) (b)(6)(b)(7)(C) was moved to GSE at his own request as he stated he felt safer there. I ensured (b)(6)(b)(7)(C) knew how to contact a supervisor and the PREA Office if at any time he felt unsafe or had any other incidents, I then ended the interview. Inmate (b)(6)(b)(7)(C) refused to speak with anyone regarding any PREA allegations.

The notes provided by (b)(6)(b)(7)(C) video evidence, and inmate testimony are very consistent with past PREA violations perpetrated by (b)(6)(b)(7)(C) Using the preponderance of evidence as the standard this PREA investigation is determined to be Substantiated.

ADS (b)(6)(b)(7)(C)
PREA Manager

(b)(6)(b)(7)(C)
Officer Name

(b)(6)(b)(7)(C)
FSC Name

Officer Signature **Date:**

Shift Supervisor: (b)(6)(b)(7)(C)

Incident ID: (b)(7)(E)

Informational Report

Report Date	Incident Date	Incident Time	Incident Location
11/29/2021	11/29/2021	06:00	GNE Officer

Report Subject: Other **Reporting Officer:** (b)(6)(b)(7)(C)

	Name	Housing Location	Booking Number
Inmates Involved:	(b)(6)(b)(7)(C)	BOOK / 116 / 1	(b)(6)(b)(7)(C)

Sir,

While assigned as the Unit G Lieutenant on the 2300-0700 shift an incident occurred that resulted in the writing of this report. At approximately 0600 hours an incident occurred, which led to the removal of Plymouth County trial inmate (b)(6)(b)(7)(C) from Unit GNE pending a PREA investigation.

While passing out morning meals in GNE (Ice Detainee) (b)(6)(b)(7)(C) got my attention and stated to me that "he needed to get out of this cell and he can't be in here anymore". At this time I handed the meals to Officer (b)(6)(b)(7)(C) and opened the inmate's cell trap. Officer (b)(6)(b)(7)(C) then applied handcuffs (double locked) and the cell door was opened. Due to all the inmates being awake at time I decided we should escort the inmate out the rec deck. As soon as we got on the rec deck the inmate informed me that he was not suicidal but he needed to get out of the unit because he was being sexually harassed.

I then had Officer (b)(6)(b)(7)(C) escort the inmate into the GW123 Therapy pod so I could interview him. As I closed the office door the inmate stated to me that "he had saved all the kites that inmate (b)(6)(b)(7)(C) had sent him". The inmate then handed me the kites and I immediately started reading them. Once I was done reading what inmate (b)(6)(b)(7)(C) allegedly wrote to him and how sexually explicit they were I immediately notified ADS (b)(6)(b)(7)(C) (PREA Manager). ADS (b)(6)(b)(7)(C) then instructed me to immediately remove inmate (b)(6)(b)(7)(C) out of GNE111 and into a camera cell in the booking department.

At approximately 0635hrs I entered GNE with Officer's (b)(6)(b)(7)(C) and (b)(6)(b)(7)(C) to remove inmate (b)(6)(b)(7)(C) When I got to the cell I opened the cell trap and explained to inmate (b)(6)(b)(7)(C) that we were removing him to the booking department. I asked (b)(6)(b)(7)(C) to place his hands through the trap to which he was very hesitant to do at first, after a brief conversation inmate (b)(6)(b)(7)(C) placed his hands through the trap. Officer (b)(6)(b)(7)(C) then applied handcuffs (double locked) to (b)(6)(b)(7)(C) and then I signaled for the cell door to be opened. Once the door was opened (b)(6)(b)(7)(C) was escorted to G Floor and Leg Irons were placed on him by Officer (b)(6)(b)(7)(C) Once the floor was clear we escorted inmate (b)(6)(b)(7)(C) to the booking department where he was placed in cell R116. Once the restraints were removed we exited the cell and I secured the cell door.

When I got back to Unit G I finished speaking with Detainee (b)(6)(b)(7)(C) and he stated to me that he "wanted to check into protective custody". While speaking to the Detainee you could see that he was visibly shaken by the letters that he had received by inmate (b)(6)(b)(7)(C) I asked the inmate if he felt like he was going to hurt himself to which he stated "no absolutely not". All the letters allegedly written by inmate (b)(6)(b)(7)(C) were handed directly to ADS (b)(6)(b)(7)(C)

Respectfully Submitted,

Lieutenant (b)(6)(b)(7)(C)

(b)(6)(b)(7)(C)	(b)(6)(b)(7)(C)	11/29/21
Officer Name		**Date**
(b)(6)(b)(7)(C)		
FSC Name	**FSC Signature**	**Date**

Shift Supervisor: (b)(6)(b)(7)(C)

Superintendent
(b)(6)(b)(7)(C)
Administrative Captain
(b)(6)(b)(7)(C)
Security Captain
(b)(6)(b)(7)(C)

STRAFFORD COUNTY DEPARTMENT
OF CORRECTIONS
266 County Farm Road
Dover, New Hampshire 03820
Telephone: (603) 742-3310
Fax: (603) 742-2192
e-mail: straffordjail@co.strafford.nh.us

Special Housing Status Review

On **7/18/2023**, I, **Ofc.** (b)(6)(b)(7)(C) conducted a formal review of the Special housing status of ICE Detainee/Inmate (b)(6)(b)(7)(C) Permanent # (b)(6)(b)(7)(C) who is presently in:
Protective Custody Status [ ] Other Administrative Segregation [ ] Disciplinary Segregation [X]

Date Inmate/Detainee was placed in this status: **7/16/2023**

Inmate/Detainee has been in this Segregation status for__days (**24 Hrs/72 Hrs/7 Days/Weekly/30 Days/60 Days/More)**

The following factors were reviewed with the results as indicated:	**YES**	**NO**
1. Does the reason for initial placement remain valid?	[X]	[ ]
2. Does the detainee pose a threat to him/herself?	[ ]	[X]
3. Does the detainee pose a threat to others?	[ ]	[X]
4. Does the detainee pose a threat to property?	[ ]	[X]
5. Does the detainee pose a threat to security?	[X]	[ ]
6. Is the detainee defiant towards authority?	[X]	[ ]
7. Is the detainee unwilling or unable to live in the general population?	[X]	[ ]
8. Is the detainee's habitual conduct, language, or behavior of a type which may provoke or instigate stressful/violent situations amongst the general population?	[X]	[ ]

If any of the above factors are marked "YES", the Inmate/Detainee must continue his/her existing status, unless the reporter determines otherwise. If all factors are marked "NO," the detainee may be released.

DOCUMENT REVIEW

1. Is the detainee being offered three showers/week and taken showers?	[X]	[ ]
2. Is the detainee exercising at least one hour daily, 5 days a week?	[X]	[ ]
3. Is the detainee being offered three meals daily and consuming at least one meal daily?	[X]	[ ]
4. Is the detainee receiving daily visits from medical staff?	[X]	[ ]
5. Are the special housing officers signing and properly filling out the special housing unit record?	[X]	[ ]

Translation into the Spanish or other language provided by: **N/A**

I state that the initial reason for my placement in Protective Custody (PC) no longer remains valid. I am requesting removal from PC status. [ ] Signature_____

I state that the initial reason for my placement in Protective Custody (PC) remains valid. I am requesting to remain on PC status. [ ] Signature_____

Comments: **Inmate (b)(6)(b)(7)(C) was placed in disciplinary segregation after refusing to lock into her cell following her tier time.**

For the reasons above, I recommend / I do not recommend removal from segregation status.

Classifications Officer signature (b)(6)(b)(7)(C) Date/Time: 2/18/23 0850

Strafford County Department of Corrections

Use of Force Incident Form / Disciplinary Segregation Order

Date/Time/Location incident allegedly occurred: __6/5/2023 at approximately 1945 Hrs_____

Names of Inmates Involved: (b)(6)(b)(7)(C) [redacted]

Was a staff member assaulted? Yes ☐ No ☒
Was a hospital transport necessary? Yes ☐ No ☒
Was this Incident reported to the Sheriff's Office? Yes ☐ No ☒
Name of Medical Staff Evaluating Inmate(s):_____ (b)(6)(b)(7)(C) [redacted] _____Comment: __Cleared_____

Incident description (*please check applicable box*)

☐ Assault w/ weapon ☐ Sexual Assault w/ weapon ☐ Attempted Escape
☐ Assault w/o weapon ☐ Sexual Assault w/o weapon ☐ Escape
☒ Disobedience ☐ Other_____

Type of Force used (*please check applicable box*)

☐ Hand Cuffs ☐ Leg shackles ☐ Soft Restraints
☐ O/C ☐ Pepper Ball System ☐ Restraint Chair
☐ Padded cell ☐ Reaction Team ☐ CEW
☐ Other, *If so, describe*:_____

Name of Officer(s) Deploying Force: N/A- Officer (b)(6)(b)(7)(C) [redacted] Escorting (b)(6)(b)(7)(C) [redacted]

Jurisdiction of the Inmate(s) (*please check applicable box*)

☐ Strafford County Inmates ☐ B.O.P Inmate
☐ Federal Marshal's Inmate ☒ I.C.E Inmate (Both)
☐ State Prison Inmate ☐ Other County Inmate:_____

Name of Supervisor Completing Form: _____*Captain* (b)(6)(b)(7)(C) [redacted]

Please forward completed form and a copy of all reports to the Security Captain for review

---

Reviewed By (b)(6)(b)(7)(C) [redacted]*):* (b)(6)(b)(7)(C) [redacted] *Date:* 6/8/2023
Reviewed By [redacted] *Date:* 6/8/2023
Reviewed By [redacted] *Date:*

This Use of Force ***Is*** ***Is Not*** *Justified According to SCDOC Policy and Proce*[redacted] (b)(6)(b)(7)(C) [redacted]

Comments: Housing Channel - FWD TO ICE *Signed:*

Date& Time Released From Disciplinary Segregation: 6/9/2023 @ 1300 (b)(6)(b)(7)(C) [redacted]

Superintendent
(b)(6)(b)(7)(C)
Administrative Captain
(b)(6)(b)(7)(C)
Security Captain
(b)(6)(b)(7)(C)

STRAFFORD COUNTY DEPARTMENT
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Telephone: (603) 742-3310
Fax: (603) 742-2192
e-mail: straffordjail@co.strafford.nh.us

Special Housing Status Review

On **6-6-2023**, I, **Officer** (b)(6)(b)(7)(C) conducted a formal review of the Special housing status of ICE Detainee/Inmate (b)(6)(b)(7)(C) Permanent # (b)(6)(b)(7)(C) who is presently in:
Protective Custody Status [ ] Other Administrative Segregation [ ] Disciplinary Segregation [X]

Date Inmate/Detainee was placed in this status: **6-5-2023**

Inmate/Detainee has been in this Segregation status for__days **(24 Hrs/72 Hrs/7 Days/Weekly/30 Days/60 Days/More)**

The following factors were reviewed with the results as indicated:	**YES**	**NO**
1. Does the reason for initial placement remain valid?	[X]	[ ]
2. Does the detainee pose a threat to him/herself?	[ ]	[X]
3. Does the detainee pose a threat to others?	[X]	[ ]
4. Does the detainee pose a threat to property?	[ ]	[X]
5. Does the detainee pose a threat to security?	[X]	[ ]
6. Is the detainee defiant towards authority?	[ ]	[X]
7. Is the detainee unwilling or unable to live in the general population?	[X]	[ ]
8. Is the detainee's habitual conduct, language, or behavior of a type which may provoke or instigate stressful/violent situations amongst the general population?	[X]	[ ]

If any of the above factors are marked "YES", the Inmate/Detainee must continue his/her existing status, unless the reporter determines otherwise. If all factors are marked "NO," the detainee may be released.

DOCUMENT REVIEW

1. Is the detainee being offered three showers/week and taken showers?	[X]	[ ]
2. Is the detainee exercising at least one hour daily, 5 days a week?	[X]	[ ]
3. Is the detainee being offered three meals daily and consuming at least one meal daily?	[X]	[ ]
4. Is the detainee receiving daily visits from medical staff?	[X]	[ ]
5. Are the special housing officers signing and properly filling out the special housing unit record?	[X]	[ ]

Translation into the Spanish or other language provided by: **N/A**

I state that the initial reason for my placement in Protective Custody (PC) no longer remains valid. I am requesting removal from PC status. [ ] Signature_____

I state that the initial reason for my placement in Protective Custody (PC) remains valid. I am requesting to remain on PC status. [ ] Signature_____

Comments: **Inmate (b)(6)(b)(7)(C) was placed in disciplinary segregation after throwing her cellmates bedding in the toilet and then blocking her from gaining access to the cell.**

For the reasons above I recommend / I do not recommend removal from segregation status.

Classifications Officer signature (b)(6)(b)(7)(C) Date/Time: 6/6/2023

Superintendent
(b)(6)(b)(7)(C)
Administrative Captain
(b)(6)(b)(7)(C)
Security Captain
(b)(6)(b)(7)(C)

STRAFFORD COUNTY DEPARTMENT
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Special Housing Status Review

On 6-8-2023, I, Officer (b)(6)(b)(7)(C) conducted a formal review of the Special housing status of ICE Detainee/Inmate (b)(6)(b)(7)(C) Permanent # (b)(6)(b)(7)(C) who is presently in:
Protective Custody Status [ ] Other Administrative Segregation [ ] Disciplinary Segregation [X]

Date Inmate/Detainee was placed in this status: **6-5-2023**

Inmate/Detainee has been in this Segregation status for__days (**24 Hrs/72 Hrs/7 Days/Weekly/30 Days/60 Days/More**)

The following factors were reviewed with the results as indicated:	**YES**	**NO**
1. Does the reason for initial placement remain valid?	[X]	[ ]
2. Does the detainee pose a threat to him/herself?	[ ]	[X]
3. Does the detainee pose a threat to others?	[X]	[ ]
4. Does the detainee pose a threat to property?	[ ]	[X]
5. Does the detainee pose a threat to security?	[X]	[ ]
6. Is the detainee defiant towards authority?	[ ]	[X]
7. Is the detainee unwilling or unable to live in the general population?	[X]	[ ]
8. Is the detainee's habitual conduct, language, or behavior of a type which may provoke or instigate stressful/violent situations amongst the general population?	[X]	[ ]

If any of the above factors are marked "YES", the Inmate/Detainee must continue his/her existing status, unless the reporter determines otherwise. If all factors are marked "NO," the detainee may be released.

DOCUMENT REVIEW		
1. Is the detainee being offered three showers/week and taken showers?	[X]	[ ]
2. Is the detainee exercising at least one hour daily, 5 days a week?	[X]	[ ]
3. Is the detainee being offered three meals daily and consuming at least one meal daily?	[X]	[ ]
4. Is the detainee receiving daily visits from medical staff?	[X]	[ ]
5. Are the special housing officers signing and properly filling out the special housing unit record?	[X]	[ ]

Translation into the Spanish or other language provided by: **N/A**

I state that the initial reason for my placement in Protective Custody (PC) no longer remains valid. I am requesting removal from PC status. [ ] Signature_____

I state that the initial reason for my placement in Protective Custody (PC) remains valid. I am requesting to remain on PC status. [ ] Signature_____

Comments: **Inmate (b)(6)(b)(7)(C) remains in disciplinary segregation after throwing her cellmates bedding in the toilet and then blocking her from gaining access to the cell.**

For the reasons above, I recommend / I do not recommend removal from segregation status.

Classifications Officer signature (b)(6)(b)(7)(C) Date/Time: 6/8/2023 0800