## NONPRECEDENTIAL DISPOSITION

To be cited only in accordance with FED. R. APP. P. 32.1

## United States Court of Appeals

For the Seventh Circuit Chicago, Illinois 60604

Submitted January 5, 2023\* Decided February 20, 2023

## **Before**

DIANE S. SYKES, Chief Judge

DAVID F. HAMILTON, Circuit Judge

CANDACE JACKSON-AKIWUMI, Circuit Judge

No. 22-1992

CHRISTOPHER A. GOODVINE,

Plaintiff-Appellant,

Appeal from the United States District Court for the Eastern District of Wisconsin.

v.

No. 21-CV-45

ERIC J. SEVERSON, et al., *Defendants-Appellees*.

Stephen C. Dries, *Magistrate Judge*.

## ORDER

Christopher Goodvine, a Wisconsin state prisoner, appeals from summary judgment on his claim that jail officials and health care providers were deliberately indifferent to his medical needs. The district court granted the defendants' motion for summary judgment on the ground that Goodvine failed to exhaust his administrative

<sup>\*</sup>We have agreed to decide the case without oral argument because the briefs and record adequately present the facts and legal arguments, and oral argument would not significantly aid the court. FED. R. APP. P. 34(a)(2)(C).

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remedies with respect to his claim that jail officials ignored his inability to eat or drink. We affirm the judgment in that respect. But the defendants concede that they did not submit evidence with respect to Goodvine's claims that the medical defendants—the jail doctor, the doctor's supervisor, and the jail's medical provider—failed to adequately treat his other health conditions, and so we remand for further proceedings on those claims.

When Goodvine arrived at the Waukesha County Jail in the summer of 2020, he was placed on suicide watch because, he alleged, he was experiencing high stress and "despondency." Because of his mental state and his gastroesophageal reflux disease (GERD), Goodvine did not eat or drink anything in his first week at the jail. Ten days later, he again fasted for at least a week. While fasting, he experienced dehydration and malnutrition, and several times he sought medical care from the health services unit. After he informed health services that he had lost his appetite, a nurse came by his cell, told him that they could only monitor him, and encouraged him to eat or drink. When he tried to eat, he immediately began vomiting and experienced a rapid heartbeat. He soon regained his appetite, but after several more days he again stopped eating and drinking. He again contacted the health services unit, which responded that staff would resume monitoring his food and liquid intake. Goodvine alleged that he lost ten pounds around this time.

Some time later (a month or so after arriving at the jail), Goodvine woke up feeling weak and experiencing a racing heart. He was sent to the hospital and diagnosed with hypoglycemia, dehydration, and a GERD flare-up. The hospital doctors rehydrated him, prescribed him GERD medication, and instructed him to avoid certain medications like ibuprofen, which inhibit the efficacy of his GERD medication. He was then returned to the jail.

Over the next two months, his health issues persisted. Not only did he continue to struggle with his GERD, but he also experienced severe pain in his arms from neuropathy and plantar fasciitis (inflammation-caused foot pain) that led him to seek medical treatment. For the pain in Goodvine's feet and the nerve pain in his arms, the jail's physician, Dr. Trotman, gave Goodvine over-the-counter medications like ibuprofen (despite his hospital records instructing otherwise). Goodvine repeatedly told Dr. Trotman that ibuprofen exacerbated his GERD symptoms and did not relieve his other pain, and he asked for alternative treatment—nerve therapy and orthopedic shoes—that had proven effective at other corrections facilities. But Dr. Trotman informed Goodvine that she could provide only over-the-counter medication for relief.

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When Goodvine's hospital-prescribed GERD medication was delayed, Dr. Trotman provided him only with over-the-counter antacids that he said were ineffective. Over three months, Goodvine filled out many health service requests, informing Dr. Trotman and the health services administrator, Jim Matthews, about his ongoing symptoms and lack of relief from Dr. Trotman's treatment.

In early 2021, Goodvine brought this deliberate-indifference suit against Dr. Trotman, Matthews, Wellpath Health Services LLC (the jail's medical provider), Waukesha County, the county sheriff, and two jail administrators. *See* 42 U.S.C. § 1983. The magistrate judge screened the complaint and allowed Goodvine to proceed with claims that the jail's staff ignored his dehydration and malnutrition; that Dr. Trotman ineffectively treated his GERD and his chronic pain; that Matthews knew Dr. Trotman's treatment was ineffective and did nothing; and that Waukesha County, Sheriff Severson (in his official capacity), and Wellpath maintained a policy, practice, or custom of providing the cheapest and least effective form of treatment to prisoners.

The defendants moved for summary judgment, arguing that Goodvine failed to exhaust his remedies under the Prison Litigation Reform Act, see 42 U.S.C. § 1997e(a), because he did not file any grievance "regarding his inability to eat or drink."

The magistrate judge granted the defendants' motion and entered summary judgment on Goodvine's claims. The judge explained that it was undisputed that Goodvine did not complete the jail's grievance process because he took no steps beyond attempting to resolve informally concerns he had with his treatment for his dehydration and malnutrition. The judge added that even if Goodvine did not realize until after leaving the jail that the defendants were deliberately indifferent to these matters, he still had ample time—the two months between his hospitalization and his transfer from the jail—to complete the grievance process and to notify the defendants of the harms caused by their inaction. As for Dr. Trotman, the court determined that Goodvine provided no evidence that her care harmed or exacerbated his conditions. Lastly, because his claims against individual defendants failed, the judge ruled that his Monell claims must fail too. But see Glisson v. Indiana Dep't of Corr., 849 F.3d 372, 378 (7th Cir. 2017) (en banc) ("[A]n organization might be liable even if its individual agents are not...if institutional policies are themselves deliberately indifferent to the quality of care provided."); Howell v. Wexford Health Sources, Inc., 987 F.3d 647, 655 (7th Cir. 2021); Whiting v. Wexford Health Sources, Inc., 839 F.3d 658, 664 (7th Cir. 2016).

On appeal, Goodvine maintains that he should be excused from exhausting his administrative remedies regarding his claim that the defendants were deliberately

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indifferent to his dehydration and malnutrition because he did not learn of the inadequacy of the defendants' treatment until months after he left the jail. But even if we assume that his delay in discovering any constitutional violation allowed him to restart the clock to file a grievance, *see United States v. Norwood*, 602 F.3d 830, 837 (7th Cir. 2010), he never filed a grievance. Prisoners must comply with the requirements of the state's prison grievance system. *Woodford v. Ngo*, 548 U.S. 81, 95 (2006). Goodvine failed to follow the state's requirement that he file an appropriate grievance at his current institution, *see* WIS. ADMIN. CODE DOC § 310.07(9), and so summary judgment on this claim was proper.

Next, Goodvine challenges the summary judgment ruling on his remaining claims. The appellees concede that they did not present any evidence that Goodvine did not exhaust his claims against the health care defendants (Dr. Trotman, Matthews, and Wellpath). We accept the appellees' concession of error and agree that the case must be remanded to the district court for further proceedings on these claims—that Dr. Trotman inadequately treated Goodvine's chronic pain and GERD; that Matthews oversaw inadequate treatment and did nothing to stop it; and that Wellpath had a policy, practice, or custom of failing to provide effective or expensive medical care when needed. The appellees do not address the outstanding claim that Waukesha County and Sheriff Severson (in his official capacity) are similarly liable for having a policy, practice, or custom of failing to provide adequate medical care, and so this claim should also be addressed on remand.

Therefore, we AFFIRM the judgment with regard to Goodvine's claim that the defendants were deliberately indifferent to his inability to eat or drink. But we VACATE the judgment with regard to Goodvine's remaining deliberate-indifference claims against Dr. Trotman, her supervisor (Matthews), Wellpath, Sheriff Severson, and Waukesha County, and REMAND for further proceedings in accordance with this order.