

PATRICK JACKSON G.08242  
CALIFORNIA STATE PRISON - SAC  
P.O. Box 290066  
REPPESA, CA. 95671  
PLANTIFF IN PROPER.

FILED

JAN 24 2017

CLERK, U.S. DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA  
BY \_\_\_\_\_  
DEPUTY CLERK

*MP*

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT

17 CV 00110

MJS PC

PATRICK JACKSON  
PLANTIFF  
V.  
L. SMALLEY, COR. OFFICER  
et al. DEFENDANTS

CASE No. \_\_\_\_\_  
CIVIL COMPLAINT  
& DEMAND FOR JURY TRIAL

RECEIVED

JAN 24 2017

CLERK, U.S. DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA  
BY \_\_\_\_\_  
DEPUTY CLERK

I. JURISDICTION

THIS IS A CIVIL ACTION AUTHORIZED BY 42 U.S.C. SECTION 1983 TO REDRESS THE DEPRIVATION UNDER COLOR OF STATE LAW, OF RIGHTS SECURED BY THE CONSTITUTION OF THE UNITED STATES. THE COURT HAS JURISDICTION UNDER 28 U.S.C. SECTION 1331 AND 1343 (a) (3). PLAINTIFF PATRICK JACKSON SEEKS DECLATORY RELIEF PURSUANT TO 28 U.S.C. SECTION 1367. PLAINTIFF'S STATE LAW CLAIMS UNDER 28 U.S.C. SECTION 1367.

THE EASTERN DISTRICT OF CALIFORNIA IS AN APPROPRIATE VENUE UNDER 28 U.S.C. SECTION 1391 (b) (2) BECAUSE IT IS WHERE THE EVENTS GIVEN RISE TO THIS CLAIM OCCURED.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

## II PLAINTIFF

PLAINTIFF PATRICK JACKSON WAS AT ALL TIMES HEREIN A PRISONER OF THE CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION. HE IS CURRENTLY CONFINED IN CALIFORNIA STATE PRISON IN SACRAMENTO COUNTY, REBRESA CALIFORNIA.

## III DEFENDANTS

DEFENDANT L. SMALEY IS A CORRECTIONS OFFICER AT NORTH KERN STATE PRISON WHO AT ALL TIMES MENTIONED IN THIS COMPLAINT HELD THE RANK OF PRISON GUARD AND WAS ASSIGNED TO THE A-FACILITY AT NORTH KERN STATE PRISON.

DEFENDANT C. SANTOS IS A CORRECTIONS OFFICER AT NORTH KERN STATE PRISON WHO WAS AT ALL TIMES MENTIONED IN THIS COMPLAINT HELD THE RANK OF SERGEANT AND WAS ASSIGNED TO THE A-FACILITY AT NORTH KERN STATE PRISON.

DEFENDANT S. COPELAND IS A CORRECTIONS OFFICER AT NORTH KERN STATE PRISON WHO WAS AT ALL TIMES MENTIONED IN THIS COMPLAINT HELD THE RANK OF SERGEANT AND WAS ASSIGNED TO THE A-FACILITY AT NORTH KERN STATE PRISON.

1  
2 DEFENDANT JACKSON IS THE APPEALS  
3 COORDINATOR AT NORTH KERN STATE PRISON, AND  
4 AT ALL TIMES MENTIONED WAS RESPONSIBLE  
5 FOR THE COORDINATION OF APPEALS OF THE  
6 NKSP A-FACILITY.  
7

8 DEFENDANT M. GIROUD IS A PSYCHOLOGIST  
9 AT NORTH KERN STATE PRISON AND AT ALL TIMES  
10 MENTION WAS RESPONSIBLE FOR THE  
11 FACILITATION OF MENTAL HEALTH OF  
12 INMATES IN NKSP A-FACILITY.  
13

14 DEFENDANT N. NIKKEL IS A PSYCHOLOGIST  
15 AT NORTH KERN STATE PRISON AND AT ALL  
16 TIMES MENTIONED WAS RESPONSIBLE FOR  
17 ALL FACILITATION OF MENTAL HEALTH  
18 AT NORTH KERN STATE PRISON.  
19

20 DEFENDANT KELLY SANTORO IS THE  
21 WARDEN OF NORTH KERN STATE PRISON  
22 AND AT ALL TIMES MENTIONED WAS  
23 RESPONSIBLE FOR ALL ADMINISTRATION  
24 OF NORTH KERN STATE PRISON.  
25

26 EACH DEFENDANT IS SUED IN THEIR  
27 INDIVIDUAL CAPACITIES. AT ALL TIMES MENTIONED  
28 IN THIS COMPLAINT EACH DEFENDANT ACTED

1  
2 UNDER COLOR OF STATE LAW.

3  
4 IV FACTS

5  
6 IT IS RELEVANT TO THIS CASE THAT BUILDING  
7 4 SERVES AS A DISCIPLINARY BUILDING  
8 AND IS DEVIDED WITH HALF OF  
9 THE BUILDING SERVING AS THE  
10 A-YARD'S DISCIPLINARY HOUSING  
11 DESIGNATED "C STATUS".

12 CORRECTIONS OFFICER AND  
13 DEFENDANT L. SMALEY IS  
14 PRIMARILY IN CHARGE OF THIS  
15 ENTIRE BUILDING.

16  
17 ON NOVEMBER 2ND, 2015, PLAINTIFF  
18 MOVED INTO THE 4 BUILDING DUE TO  
19 CELL-MATE INCOMPATABILITY.

20  
21 ON NOVEMBER 3RD, 2015, PLAINTIFF  
22 MOVED TO THE NON-SEGREGATED SIDE OF  
23 BUILDING 4 CELL # 139.

24  
25 ON NOVEMBER 4TH, 2015, INMATE  
26 MC CLAREN WAS MOVED INTO CELL # 139  
27 DUE TO NEED FOR LOWER BUNK.  
28

1  
2 ON NOVEMBER 5TH, 2015, THE  
3 PLANTIFF AFTER HOURS OF EXTREME  
4 WORKING OUT WAS NOT ALLOWED TO  
5 ENTER THE BUILDING DURING THE  
6 DESIGNATED TIME FOR INLINE.

7 RESPONDING TO PLANTIFF'S  
8 REQUEST TO SPEAK TO THE A-YARD  
9 SERGEANT, A TEAM OF FOUR CORRECTIONS  
10 OFFICERS PLACED THE PLANTIFF IN  
11 HANDCUFFS AND DETAINED THE PLANTIFF  
12 IN A SINGLE MAN CAGE IN THE A-YARD  
13 GYMNASIUM IN A DEMONSTRATION  
14 DESIGNED TO INTIMIDATE THE PLANTIFF.

15 AFTER HOURS OF INAPPROPRIATE  
16 BANTER BACK AND FORTH, THE PLANTIFF  
17 WAS RELEASED BACK TO HIS BUILDING  
18 AND HIS CELL-MATE WAS TAKEN TO  
19 ADMINISTRATIVE SEGREGATION FOR  
20 THREATS ALLEGEDLY MADE TO CORRECTIONAL  
21 OFFICER, DEFENDANT L. SMALLEY.  
22

23 ON NOVEMBER 17TH, 2015, THE  
24 PLANTIFF WAS SERVED A SERIOUS  
25 VIOLATION FOR MANUFACTURING  
26 ALCOHOL. "SEE EXHIBIT A PAGE 1".  
27  
28

1  
2 ON NOVEMBER 22ND, 2015, A  
3 RULE VIOLATION HEARING WAS HELD AND  
4 PLAINTIFF WAS FOUND GUILTY OF A  
5 COMPLETELY MADE UP CHARGE IN  
6 RETALIATION FOR EXERCISING HIS  
7 RIGHT TO SEEK REMEDY FROM A-YARD  
8 SGT. AS ENCOURAGED. \* ~~BY~~ BY ADMINISTRATION.  
9 "SEE EXHIBIT A PAGE 1"

10  
11 ON DECEMBER 4TH, 2015, THE  
12 PLAINTIFF RECEIVED HIS FINAL COPY AND  
13 FILED TIMELY APPEAL. "SEE EXHIBIT A  
14 PAGE 4"

15  
16 ON DECEMBER 11TH, 2015, APPEAL  
17 WAS CANCELLED FOR THE FIRST OF MANY  
18 TIMES AND HARRASSMENT BY DEFENDANT  
19 CORRECTIONS OFFICER L. SMAILEY  
20 BEGAN.

21  
22 ON DECEMBER 19TH, 2015, THE  
23 PLAINTIFF FILED AN INMATE COMPLAINT  
24 AGAINST DEFENDANT CORRECTIONS  
25 OFFICER L. SMAILEY AFTER HAVING  
26 THE DOOR OPENED WHILE PLAINTIFF  
27 WAS ASKED TO RIP PICTURES OFF HIS  
28 WALL.

1  
2 ON DECEMBER 29TH, 2015; THE  
3 PLAINTIFF APPEALED HIS ORIGINAL APPEAL'S  
4 CANCELLATION. "SEE EXHIBIT A PAGE 9"  
5

6 ON JANUARY 8TH, 2016; PLAINTIFF  
7 ATTENDED REVIEW FOR HARASSMENT APPEAL.  
8 DEFENDANT SGT. C. SANTOS INTERVIEWED  
9 THE PLAINTIFF, AND THE PLAINTIFF MADE IT  
10 KNOWN THAT DEFENDANT SGT. C. SANTOS HAD  
11 SUPERVISED DEFENDANT CORRECTIONS  
12 OFFICER L. SMALLEY SINCE THE VERY  
13 BEGINNING OF THIS ISSUE. THUS DEFENDANT  
14 SGT. C. SANTOS WAS INVESTIGATING  
15 HIS OWN CRIMES. "SEE EXHIBIT A PAGE 16"  
16

17 ON JANUARY 29TH, 2016; THE  
18 PLAINTIFF GOT INTO A FIGHT WITH  
19 HIS CELLY DUE TO THE ONGOING  
20 HARASSMENT AFFECTING HIS LIFE AND  
21 PEACE OF MIND. "SEE EXHIBIT A PAGE 2"  
22

23 ON FEBRUARY 11TH, 2016; THE  
24 PLAINTIFF RECEIVED A VIOLATION FROM  
25 DEFENDANT L. SMALLEY FOR REUSING  
26 A CELL-MATE THAT WAS OPENLY  
27 TARGETED FOR ASSAULT ON THE  
28 A-FACILITY. "SEE EXHIBIT A PAGE 3"

1  
2 ON FEBRUARY 19TH, 2016, THE  
3 PLAINTIFF DEMANDED TO BE MOVED OUT  
4 OF BUILDING 4 AFTER DEFENDANT  
5 L. SMALLEY MADE IT OBVIOUS THAT  
6 HARASSMENT WOULD NOT END BY  
7 TOSSING HIS CELL AGAIN. "SEE  
8 EXHIBIT A PAGE 16".

9  
10 ON MARCH 10TH, 2016, THE  
11 PLAINTIFF ATTENDED HIS ANNUAL CLASSIFIC-  
12 ATION MEETING AND IT WAS REVEALED  
13 TO HIM THAT HE WOULD BE  
14 IMMEDIATELY HOUSED IN THE 4  
15 BUILDING FOR THE CONTINUED RULE  
16 VIOLATIONS AND TRANSFERRED TO A  
17 HIGHER CUSTODY PRISON AS A RESULT  
18 OF DEFENDANT L. SMALLEY'S CONTINUED  
19 FALSIFIED VIOLATIONS. "SEE EXHIBIT  
20 B PAGE 1", C-STATUS

21  
22 "AGAIN, BUILDING 4 SERVES AS THE  
23 DISCIPLINARY BUILDING THAT IS  
24 UNDER THE PRIMARY CONTROL OF  
25 DEFENDANT L. SMALLEY."  
26  
27  
28



1  
2 MENTALLY OVERWHELMED, THE PLAINTIFF  
3 DEMANDED TO SPEAK WITH A MENTAL  
4 HEALTH CLINICIAN AND WAS STRIPPED  
5 DOWN AND PLACED INSIDE A VOTING BOOTH  
6 SIZED CAGE AND WAS ALLOWED TO  
7 SPEAK TO DEFENDANT DR. M. GIROUD.

8 THE PLAINTIFF EXPLAINED THE SITUATION  
9 EXPRESSING HIS FEAR FOR HIS LIFE AS  
10 THE HARASSMENT WAS CULMINATING TO  
11 HIS BEING UNDER THE SOLE CONTROL  
12 OF DEFENDANT L. SMALEY. DEFENDANT  
13 DR. M. GIROUD SPOKE WITH ADMINISTRATION  
14 AND THE PLAINTIFF WAS PLACED IN  
15 ADMINISTRATIVE SEGREGATION. "SEE EXH.  
16 B ~~OVER~~ "ENTIRETY"

17 ON MARCH 15TH, 2016, THE PLAINTIFF  
18 RECEIVED A VIOLATION REPORT STATING  
19 HE THREATENED THE LIFE OF DEFENDANT  
20 L. SMALEY. THIS FALSIFIED REPORT WAS  
21 WRITTEN BY DEFENDANT DR. M. GIROUD.  
22

23 THE PLAINTIFF IMMEDIATELY ANNOUNCED  
24 THE BEGINNING OF HIS HUNGER STRIKE AND  
25 WAS PLACED ON SUICIDE WATCH.  
26

27 ON MARCH 17TH, 2016, THE PLAINTIFF  
28 WAS TRANSFERRED TO MENTAL HEALTH CRISIS FAC.

1  
2 ON MARCH 24TH, 2016, THE  
3 PLAINTIFF RECEIVED DOCUMENTATION  
4 INFORMING HIM THAT THIS FALSIFIED  
5 INCIDENT WAS BEING REFERRED  
6 TO THE DISTRICT ATTORNEY FOR  
7 CRIMINAL PROSECUTION. "SEE EXHIBIT  
8 B PAGE 2 "

9  
10 ON MARCH 28TH, 2016, PLAINTIFFS  
11 LEVEL OF CARE WAS REDUCED AND  
12 WAS TRANSFERRED TO THE CALIFORNIA  
13 MEN'S COLONY'S ADMINISTRATIVE  
14 SEGREGATION UNIT DUE TO NORTH  
15 KERN STATE PRISON'S UNAVAILABILITY  
16 TO PROVIDE THE PLAINTIFFS NEEDED  
17 LEVEL OF CARE. "SEE EXHIBIT B PAGE  
18 3 "

19 ON MAY 7TH, 2016, THE PLAINTIFF  
20 ATTENDED DISCIPLINARY HEARINGS  
21 WHERE CHARGES WERE REDUCED.  
22 "SEE EXHIBIT B PAGES 4 THROUGH 16"

23  
24 IT IS UPON BELIEF THAT THIS ENTIRE  
25 FALSIFICATION OF THE CHARGE OF  
26 "THREATENING TO CAUSE AN OFFICER  
27 SERIOUS BODILY INJURY" WAS DESIGNED  
28 FOR THE SOLE PURPOSE OF RETALIATORY TRANSFER.

1  
2 V. EXHAUSTION OF LEGAL REMEDIES  
3

4 PLANTIFF PATRICK JACKSON USED  
5 THE PRISONER GRIEVANCE PROCEDURE  
6 AVAILABLE AT NORTH KERN STATE PRISON  
7 TO TRY AND SOLVE THE PROBLEMS.  
8

9 APPEAL FOR FALSIFIED VIOLATION REPORT:  
10 WAS FILED ON DECEMBER 4TH,  
11 2015, AND CANCELLED DECEMBER 11TH,  
12 2015. LOG # NKSP-A-15-04832  
13 "SEE EXHIBIT A PAGES 4-8"  
14

15 APPEAL FOR CANCELLATION OF APPEAL #  
16 NKSP-A-15-04832:  
17 WAS FILED ON DECEMBER 29TH,  
18 2015, AND DENIED AT IT'S HIGHEST  
19 LEVEL ON MARCH 29TH, 2016.  
20 LOG # NKSP-A-15-0502  
21 "SEE EXHIBIT A PAGES 9-14"  
22

23 APPEAL FOR RETALIATORY HARASSMENT:  
24 WAS FILED ON DECEMBER 19TH,  
25 2015, AND DENIED AT IT'S HIGHEST  
26 LEVEL ON ~~MARCH~~ "THERE HAS BEEN  
27 NO RESPONSE YET." "SEE EXHIBIT A PAGES 15-27"  
28 LOG # NKSP-A-15-05039

1  
2 LEVEL KNOWING THAT INMATES CANNOT  
3 ACCESS THE COURTS UNTIL AND UNLESS DONE  
4 SO.

5  
6 APPEAL FOR INVALID VIOLATION REPORT AND  
7 HEARING OF THE CHARGE OF "THREATENING  
8 SERIOUS BODILY INJURY OF DEFENDANT  
9 CORRECTIONS OFFICER L. SMALLEY" ARE  
10 BEING CONSTANTLY AND SYSTEMATICALLY  
11 REJECTED WITH OBVIOUS INTENTION TO  
12 DISREGARD THIS ENTIRE INCIDENT OF  
13 ORGANIZED CRIME.

## 14 15 VI. LEGAL CLAIMS

16  
17 THE PLAINTIFF RE-ALLEGES AND  
18 INCORPORATE BY REFERENCE ALL  
19 PREVIOUS PARAGRAPHS.

20  
21 DEFENDANT CORRECTIONS OFFICER L. SMALLEY'S  
22 ACTION OF FALSIFYING LEGAL DOCUMENTS  
23 ON NOVEMBER 5TH, 2015; SET INTO  
24 MOTION A CONSPIRACY OF SYSTEMATIC AND  
25 RETALIATORY HARRASSMENT DESIGNED TO  
26 INCREASE THE PLAINTIFFS CUSTODY LEVEL AND  
27 BE TRANSFERRED RETALIATORILY TO HOUSING  
28 OF PUNISHING CONDITIONS.

1  
2 THESE ACTIONS WERE A VIOLATION OF THE  
3 PLAINTIFFS RIGHT TO DUE PROCESS UNDER THE  
4 14TH AMENDMENT OF THE UNITED STATES  
5 CONSTITUTION. AND CRUEL AND UNUSUAL PUNISHMENT.  
6 UNDER THE FIRST AMENDMENT.

7 DEFENDANT SERGEANT C. SANTOS' FAILURE TO  
8 INTERVENE WITH ONGOING HARASSMENT AGAINST  
9 PLAINTIFF ON \_\_\_\_\_ AND HIS  
10 ROLE IN THE FALSIFYING OF LEGAL DOCUMENTS  
11 ON NOVEMBER 5TH, 2015; AMOUNTED TO  
12 DELIBERATE INDIFFERENCE IN VIOLATION  
13 OF PLAINTIFFS' RIGHT TO DUE PROCESS UNDER  
14 THE 14TH AMENDMENT OF THE UNITED STATES  
15 CONSTITUTION. DONE IN RETALIATION FOR PRIOR  
16 GRIEVANCE VIOLATES THE FIRST AMENDMENT.

17 DEFENDANT SERGEANT S. COPELANDS' FAILURE TO  
18 INTERVENE WITH DEFENDANTS M. GIROURDS  
19 FALSIFYING OF LEGAL DOCUMENTS "ie, RULE  
20 VIOLATION REPORT", ON MARCH 10TH, 2016;  
21 AMOUNTED TO DELIBERATE INDIFFERENCE  
22 IN VIOLATION OF PLAINTIFFS RIGHT TO  
23 DUE PROCESS UNDER THE 14TH AMENDMENT  
24 OF THE UNITED STATES CONSTITUTION.  
25  
26  
27  
28

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

DEFENDANT M. GIROURDS FALSIFYING OF HIS REPORT ON MARCH 10TH, 2016; WAS A VIOLATION OF THE PLAINTIFFS RIGHT TO DUE PROCESS UNDER THE 14TH AMENDMENT OF THE UNITED STATES CONSTITUTION. CONSPIRACY RETALIATION VIOLATES PLAINTIFFS 1ST AMENDMENT RIGHTS.

DEFENDANT N. NIKKELS FAILURE TO INTERVENE WITH DEFENDANT M. GIROURDS FALSIFYING OR VIOLATION REPORT ON MARCH 10TH, 2016; AMOUNTED TO DELIBERATE INDIFFERENCE IN VIOLATION OF THE PLAINTIFFS RIGHTS UNDER THE DUE PROCESS CLAUSE OF THE 14TH AMENDMENT OF THE UNITED STATES CONSTITUTION. CONSPIRACY RETALIATION VIOLATES 1ST AMENDMENT.

DEFENDANT JACKSONS ILLEGAL CANCELLATION OF APPEALS ON DECEMBER 11TH, 2016; AMOUNTED TO A VIOLATION OF THE PLAINTIFFS RIGHT TO DUE PROCESS UNDER THE 14TH AMENDMENT OF THE UNITED STATES CONSTITUTION. CONSPIRACY RETALIATION VIOLATES PLAINTIFFS 1ST AMENDMENT RIGHTS.

DEFENDANT KELLY SANTORO'S FAILURE TO INTERVENE IN THE ENTIRE ORDEAL FROM THE MOMENT OF INCIDENT "MARCH 10TH, 2016; THROUGHOUT IT'S APPEAL PROCESS AMOUNTED TO DELIBERATE INDIFFERENCE

1  
2 IN VIOLATION OF THE PLAINTIFFS RIGHTS UNDER  
3 THE DUE PROCESS CLAUSE OF THE 14TH  
4 AMENDMENT OF THE UNITED STATES  
5 CONSTITUTION, CONSPIRACY RETALIATION  
6 VIOLATES PLAINTIFFS 1ST AMENDMENT RIGHT,  
7  
8

9 VIII PRAYER FOR RELIEF

10  
11 WHEREFORE, PLAINTIFF PRAYS  
12 THAT THIS COURT ENTERS JUDGEMENT GRANTING  
13 PLAINTIFF.....  
14

15 COMPENSATORY DAMAGES IN THE  
16 AMOUNT OF \$300,000.00 AGAINST EACH  
17 DEFENDANT,  
18

19 PUNITIVE DAMAGES IN THE AMOUNT OF  
20 \$400,000.00 AGAINST EACH DEFENDANT,  
21

22 A JURY TRIAL ON ALL ISSUES TRIABLE  
23 BY JURY,  
24

25 PLAINTIFF COSTS IN THIS SUIT,  
26

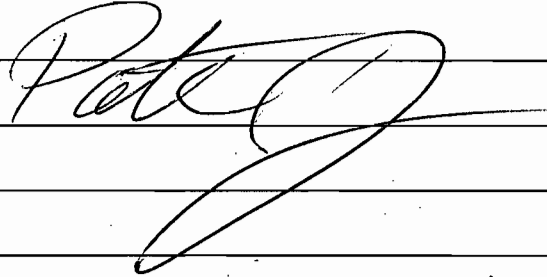
27 AND ADDITIONAL RELIEF THAT THIS COURT  
28 DEEMS JUST, PROPER, AND EQUITABLE.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

PRAYER FOR RELIEF (CONTINUE)

DATED: JANUARY 14<sup>TH</sup>, 2017

RESPECTFULLY SUBMITTED  
PATRICK JACKSON



CALIFORNIA STATE PRISON - SAC  
P.O. Box 290066  
SACRAMENTO, CA. 95671



1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

VII VERIFICATION

I HAVE READ THE FOREGOING COMPLAINT  
AND HEREBY VERIFY THAT THE MATTERS  
ALLEGED ON INFORMATION AND BELIEF,  
AND AS TO THOSE I BELIEVE THEM TO BE TRUE.  
I CERTIFY UNDER PENALTY OF PERJURY  
THAT THE FOREGOING IS TRUE AND  
CORRECT.

EXECUTED AT REPRESA CA. ON  
DATE: 1-11-17

SIGNATURE: PATRICK JACKSON

PLANTIFF

# EXHIBIT A

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

RULES VIOLATION REPORT

CDC NUMBER <b>G-08242</b>	INMATE'S NAME <b>JACKSON</b>	RELEASE/BOARD DATE <b>09/09/17</b>	INST. <b>NKSP</b>	HOUSING NO: <b>FAB4-139U</b>	LOG NO. <b>1-15-11009</b>
VIOLATED RULE NO(S). <b>CCR §3016(a)</b>		SPECIFIC ACTS <b>POSSESSION OF INMATE MANUFACTURED ALCOHOL</b>	LOCATION <b>FAB4-139</b>	DATE <b>11/05/15</b>	TIME <b>1050 HRS.</b>

CIRCUMSTANCES

On 11/05/15, at approximately 1050 hours, while performing my duties as Facility "A" Building 4-B side Floor Officer #2, I walked by cell FAB4-139, which is assigned to Inmate JACKSON (G-08242, FAB4-139U) and Inmates McClaren (AU8878, FAB4-139L). I could smell a strong alcohol odor coming from the cell. I performed a cell search of cell FAB4-139 with the assistance of Correctional Officer Carter, who was assigned to FAB4-A side. The search yielded trash, altered electronics, excessive state fruit (apples) and one large state trash bag which contained large chunks of apples and had a dark orange/reddish appearance in color. The bag, which held the pruno contents, was found inside a state issued laundry bag and tied up under the cells table in a manner to conceal the bag and its contents. Once the cell search was completed, I disposed of the Inmate Manufactured Alcohol per institutional policy. Inmate JACKSON and Inmate McClaren are aware of this report. Inmate JACKSON is/is not an inmate participant in the Mental Health Services Delivery System. Level of care: N/A, CCCMS, BOP, MHCB, APP, ICF, or PIP. Inmate JACKSON's behavior was not deemed bizarre, unusual, or uncharacteristic. This does not appear to be gang or racially motivated. Inmate JACKSON is aware of this Rules Violation Report.

REPORTING EMPLOYEE (Typed Name and Signature) <b>L. SMALLEY, Corr. Officer</b>	DATE <b>11-13-15</b>	ASSIGNMENT <b>FAB4 FLOOR #2</b>	RDO'S <b>T/W</b>
REVIEWING SUPERVISOR'S SIGNATURE <b>C. SANTOS, Corr. Sergeant</b>	DATE <b>11/13/15</b>	INMATE SEGREGATED PENDING HEARING DATE <b>N/A</b> LOC. <b>N/A</b>	
CLASSIFIED <input type="checkbox"/> ADMINISTRATIVE <input checked="" type="checkbox"/> SERIOUS	OFFENSE DIVISION: <b>C</b> DATE: <b>11-13-15</b>	CLASSIFIED BY (Typed Name and Signature) <b>R. Lemons R. Lemons</b>	HEARING REFERRED TO <input type="checkbox"/> HO <input checked="" type="checkbox"/> SHO <input type="checkbox"/> SC <input type="checkbox"/> FC

COPIES GIVEN INMATE BEFORE HEARING

<input checked="" type="checkbox"/> CDC 115	BY: (STAFF'S SIGNATURE) <b>[Signature]</b>	DATE <b>11/17/15</b>	TIME <b>0830</b>	TITLE OF SUPPLEMENT <b>ISSUED COPY OF 115 MH</b>
<input type="checkbox"/> INCIDENT/REPORT LOG NUMBER: <b>N/A</b>	BY: (STAFF'S SIGNATURE) <b>N/A</b>	DATE <b>—</b>	TIME <b>—</b>	BY: (STAFF'S SIGNATURE) <b>[Signature]</b>

HEARING

HEARING HELD ON: 11/22/2015, at 1200 hours

INMATE'S PLEA: NOT GUILTY

FINDING: GUILTY

DISPOSITION: ASSESSED 120 DAYS FORFEITURE OF CREDITS CONSISTENT WITH A DIVISION C OFFENSE

SEE CDCR 116 HEARING IN ITS ENTIRETY ON RVR PART C

REFERRED TO  CLASSIFICATION  BPT/NAEA

ACTION BY: (TYPED NAME) <b>T. HUGHES, Correctional Lieutenant</b>	SIGNATURE <b>[Signature]</b>	DATE <b>11/25/15</b>	TIME <b>1230</b>
REVIEWED BY: (SIGNATURE) <b>J. ORTEGA, Facility Captain</b>	DATE <b>11-30-15</b>	CHIEF DISCIPLINARY OFFICER'S SIGNATURE <b>B. KIBLER, CDO</b>	DATE <b>11/30/15</b>
<input checked="" type="checkbox"/> COPY OF CDC 115 GIVEN INMATE AFTER HEARING	BY: (STAFF'S SIGNATURE) <b>[Signature]</b>	DATE <b>12/4/15</b>	TIME <b>1030</b>

**RULES VIOLATION REPORT**

A-5 204

CDC NUMBER 22 067257	INMATE'S NAME JACKSON	RELEASE/BOARD DATE 02/20/2017	INST. 02A150	HOUSING NO. F-AB-139	LOG NO. A 150100
VIOLATED RULE NO(S) CC 15000001	SPECIFIC ACTS FIGHTING	LOCATION F-AB-139	DATE 02/20/16	TIME 2:22 PM	

CIRCUMSTANCES

On Friday, January 29, 2016, at approximately 2:22 hours, while performing my duties as Facility "A" Hearing Unit F-AB Unit Officer #2, I heard loud noises coming from cell F-AB-139, occupied by inmates M.L.E. (ABV 35164 AB-139) and JACKSON (03 02421 AB-139). I responded to cell F-AB-139 to conduct a welfare check on the inmates when I observed inmate M.L.E. proffered with his body against the cell door. Inmates M.L.E. and JACKSON were circling each other in the racial and upper torso area with their fists. I ordered both inmates to stop fighting and assume a prone position on the cell's floor; the inmates did not comply. I activated my Personal Alarm Device (PAD) and announced, via my institutional radio, a Code 1, cell fight, in F-AB cell 139. Responding staff arrived and ordered the inmates to stop fighting and assume a prone position; the inmates complied. Facility "A" Sergeant G. Jones ordered the Control Booth Officer to open the cell door. Once the cell door was opened both inmates were ordered to exit the cell and sit on a bench, to which they complied. Both inmates were placed into handcuffs.

NRV CONTINUED ON PART 'C' ATTACHED

REPORTING EMPLOYEE (Typed Name and Signature) J. LUPPEL, Corr. Officer	DATE 2-2-16	ASSIGNMENT F-AB FLOOR #2	RDO'S W/D
REVIEWING SUPERVISOR'S SIGNATURE G. JONES, Corr. Sergeant	DATE 2-1-16	INMATE SEGREGATED, PENDING HEARING N/A	LOC. N/A
CLASSIFIED <input type="checkbox"/> ADMINISTRATIVE <input checked="" type="checkbox"/> SERIOUS	OFFENSE DIVISION: D	DATE 2-1-16	CLASSIFIED BY (Typed Name and Signature) R. [Signature]
HEARING REFERRED TO <input type="checkbox"/> HO <input checked="" type="checkbox"/> SHO <input type="checkbox"/> SC <input type="checkbox"/> FC			

COPIES GIVEN INMATE BEFORE HEARING

<input checked="" type="checkbox"/> CDC 115	BY: (STAFF'S SIGNATURE) [Signature]	DATE 2/5/16	TIME 1837	TITLE OF SUPPLEMENT 7219x2
<input type="checkbox"/> INCIDENT REPORT LOG NUMBER:	BY: (STAFF'S SIGNATURE) [Signature]	DATE 2/5/16	TIME 1837	

HEARING HELD ON: ON MONDAY, FEBRUARY 08, 2016, AT 1537 HOURS

INMATE'S PLEA: GUILTY

FINDING: GUILTY OF VIOLATION CCR§ 15005(a)(1) SPECIFIC ACT: "FIGHTING."

DISPOSITION: ASSESSED 61 DAYS FORFEITURE OF CREDITS CONSISTENT WITH A DIVISION "D" OFFENSE

REFERRED TO  CLASSIFICATION  BPT/NAEA **SEE CDCR 115 HEARING IN ITS ENTIRETY ON IWR PART 'C' (P2)**

ACTION BY: (TYPED NAME) J. JAIME, CORRECTIONAL LIEUTENANT	SIGNATURE [Signature]	DATE 2/11/16	TIME 707A
REVIEWED BY: (SIGNATURE) C. ARCE, FACILITY CAPTAIN	DATE 2-1-16	CHIEF DISCIPLINARY OFFICER'S SIGNATURE D. RIDLER, CDO	DATE 2/11/16
<input checked="" type="checkbox"/> COPY OF CDC 115 GIVEN INMATE AFTER HEARING	BY: (STAFF'S SIGNATURE) [Signature]	DATE 2/5/16	TIME 1800

STATE OF CALIFORNIA

I.A.B.E. SCORE: 12.9

GEO

DEPARTMENT OF CORRECTIONS

RULES VIOLATION REPORT

CDC NUMBER <b>G-08242</b>	INMATE'S NAME <b>JACKSON</b>	RELEASE/BOARD DATE <b>12/20/17</b>	INST. <b>NKSP</b>	HOUSING NO. <b>FAB4-139U</b>	LOG NO. <b>A-020051</b>
VIOLATED RULE NO(S). <b>CCR §3005(c)</b>		SPECIFIC ACT <b>WILLFULLY DELAYING A P/O (REFUSING ASSIGNED HOUSING)</b>	LOCATION <b>FAB4</b>	DATE <b>02/11/16</b>	TIME <b>0930 HRS.</b>
CIRCUMSTANCES					

On 02/11/16, at approximately 0930 hours, while assigned as FAB4-B side Officer, I received a call from Facility "A" Sergeant Santos directing me to find housing for inmate LUCKETT (AX-3774/FAB4-230U) to accommodate his lower bunk Chrono. I advised Sergeant Santos that the only cell compatible with LUCKETT's lower bunk needs was cell FAB4-139L. The top bunk is occupied by inmate JACKSON (G-08242/FAB4-139U). Sergeant Santos ordered me to do the bed move, moving Inmate LUCKETT from cell FAB4-230U into cell FAB4-139L. Once the move was processed via SOMS, I ordered Inmate LUCKETT to move to cell FAB4-139L. LUCKETT agreed to move. I informed Inmate JACKSON (G-08242/FAB4-139U) of the incoming bed move into his assigned cell. He became irritated and stated he would not take LUCKETT as a cellie. He walked away and mumbled under his breath, "I ain't losing my lower bunk!" I informed him that he would receive a Serious CDC-115 Rules Violation Report for refusing housing. Inmate JACKSON (G-08242/FAB4-139U) is aware of this report.

RVR CONTINUED ON PART, 'C', ATTACHED

REPORTING EMPLOYEE (Typed Name and Signature) <b>L. SMALLEY, Corr. Officer</b>	DATE <b>2/12/16</b>	ASSIGNMENT <b>FAB4-FLOOR #2</b>	RDO'S <b>TW</b>
REVIEWING SUPERVISOR'S SIGNATURE <b>C. SANTOS, Corr. Sergeant</b>	DATE <b>2/16/16</b>	INMATE SEGREGATED PENDING HEARING <b>N/A</b>	
CLASSIFIED <input checked="" type="checkbox"/> SERIOUS	OFFENSE DIVISION: <b>D</b>	DATE <b>2/16/16</b>	HEARING REFERRED TO <input type="checkbox"/> HO <input checked="" type="checkbox"/> SHO <input type="checkbox"/> SC <input type="checkbox"/> FC

COPIES GIVEN INMATE BEFORE HEARING

<input checked="" type="checkbox"/> CDC 115	BY: (STAFF'S SIGNATURE) <i>[Signature]</i>	DATE <b>2/17/16</b>	TIME <b>0745</b>	TITLE OF SUPPLEMENT <b>N/A</b>
<input type="checkbox"/> INCIDENT REPORT LOG NUMBER: <b>N/A</b>	BY: (STAFF'S SIGNATURE) <b>N/A</b>	DATE <b>—</b>	TIME <b>—</b>	BY: (STAFF'S SIGNATURE) <b>N/A</b>

HEARING

Hearing held on: March 11, 2016, at 1530 hours.

Inmate Plea: "NOT GUILTY."

Finding: Found NOT GUILTY of violation of California Code of Regulations (CCR), Title 15, Section 3005 (c); Specific Act: Willfully delaying a Peace Officer.

Disposition: Dismissed.

SEE ATTACHED RULES VIOLATION REPORT - PART C FOR FULL DISPOSITION

REFERRED TO  CLASSIFICATION  BPT/NAEA

ACTION BY: (TYPED NAME) <b>E. SMITH, Correctional Lieutenant</b>	SIGNATURE <i>[Signature]</i>	DATE <b>3/11/16</b>	TIME <b>1910</b>
REVIEWED BY: (SIGNATURE) <b>ARCE, Facility A Captain</b>	DATE <b>3/16/16</b>	CHIEF DISCIPLINARY OFFICER'S SIGNATURE <b>B. KIBLER, C.D.O.</b>	DATE <b>3/17/16</b>
<input checked="" type="checkbox"/> COPY OF CDC 115 GIVEN INMATE AFTER HEARING	BY: (STAFF'S SIGNATURE) <i>[Signature]</i>	DATE <b>3/8/16</b>	TIME <b>2050</b>

CDC 115 (7/88)

reviewed  
[Signature]

<b>IAB USE ONLY</b>	Institution/Parole Region: _____	Log #: <u>NKSP-A 15-04832</u>	Category: <u>19(1)</u>
<b>FOR STAFF USE ONLY</b>			

You may appeal any California Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, Section (CCR) 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): <u>JACKSON, PATRICK</u>	CDC Number: <u>G-08242</u>	Unit/Cell Number: <u>44-139</u>	Assignment: _____
---	----------------------------	---------------------------------	-------------------

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):

FALSIFICATION OF LEGAL DOCUMENTS LEADING TO CDCR-105

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A): ON NOV. 5TH, 2015, AT 1035 AM, I WAS COMING IN FROM THE YARD, AND 'LO GONZALEZ ONLY ALLOWED 3 MINUTES FOR AN UNLOCK.' CONT. TO

B. Action requested (If you need more space, use Section B of the CDCR 602-A):  
"SEE CONTINUATION FORM ATTACHED"

Supporting Documents: Refer to CCR 3084.3.

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):

VIOLATION REPORT # A-15-11009; ~~Class Chrono~~ AND CONTINUATION FORM CDCR-602-A; CDCR 1858

No, I have not attached any supporting documents. Reason: \_\_\_\_\_

Inmate/Parolee Signature: Patrick Jackson Date Submitted: 12-4-15

By placing my initials in this box, I waive my right to receive an interview.

NKSP  
 DEC 08 2015  
 RECEIVED  
 INMATE APPEALS BRANCH  
 S/C DETERMINATION  
 12/8/15  
 ROUTING  
 S

<b>C. First Level - Staff Use Only</b>	Staff - Check One: Is CDCR 602-A Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
This appeal has been:	
<input type="checkbox"/> Bypassed at the First Level of Review. Go to Section E.	
<input type="checkbox"/> Rejected (See attached letter for instruction) Date: _____ Date: _____ Date: _____	
<input checked="" type="checkbox"/> Cancelled (See attached letter) Date: <u>12/11/15</u>	
<input type="checkbox"/> Accepted at the First Level of Review.	
Assigned to: _____ Title: _____ Date Assigned: _____ Date Due: _____	
First Level Responder: Complete a First Level response. Include Interviewer's name, title, interview date, location, and complete the section below.	
Date of Interview: _____ Interview Location: _____	
Your appeal issue is: <input type="checkbox"/> Granted <input type="checkbox"/> Granted in Part <input type="checkbox"/> Denied <input type="checkbox"/> Other: _____	
See attached letter. If dissatisfied with First Level response, complete Section D.	
Interviewer: _____ Title: _____ Signature: _____ Date completed: _____ (Print Name)	
Reviewer: _____ Title: _____ Signature: _____ (Print Name)	
Date received by AC: _____	
<b>AC Use Only</b> Date mailed/delivered to appellant ___/___/___	

IAB USE ONLY	Institution/Parole Region: _____	Log #: <u>NKSP-A-15-04832</u>	Category: <u>1 (1)</u>
FOR STAFF USE ONLY			

Attach this form to the CDCR 602, only if more space is needed. Only one CDCR 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): <u>JACKSON, PATRICK</u>	CDC Number: <u>G-08242</u>	Unit/Cell Number: <u>A4-139</u>	Assignment: _____
---	----------------------------	---------------------------------	-------------------

A. Continuation of CDCR 602, Section A only (Explain your issue): BEING THAT I HAD TO TRAVERSE FROM THE COMPLETE OPPOSITE END OF THE YARD, 3 MINUTES WASN'T ENOUGH TIME. I DEMANDED TO SPEAK TO A SERGEANT, AND SGT. JONES AND SGT. C. SANTOS PLACED ME IN HAND CUFFS AND DETAINED ME IN THE GYMNASIUM IN WHAT IS KNOWN AS "THE DUMMY CAGE". MY CELL WAS SEARCHED AND MANUFACTURED ALCOHOL WAS FOUND. MY CELL "WHOM WAS HOUSED WITH ME ONLY THE NIGHT PRIOR" RESPONDED BY THREATS TO STAFF, AND WAS DETAINED IN AD-SEG.

ON NOV. 12TH, 2015, I WAS ISSUED A CDCR-115 FOR POSSESSION OF INMATE MANUFACTURED ALCOHOL. ON THE VIOLATION REPORT, THERE WAS NO WORD OR THE ENTIRE SITUATION AND C/O SMALLER CLAIMED HE SMELLED A STRONG ODOOR COMING FROM MY CELL.

Inmate/Parolee Signature: [Signature] Date Submitted: 12-4-15

NKSP  
DEC 08 2015  
TNO  
APPEALS  
RECEIVED  
JAN 19 2016  
S

INMATE APPEALS PROGRAM

B. Continuation of CDCR 602, Section B only (Action requested): BECAUSE OF THE FALSE STATEMENT "OR HACK THEREOF" MY CASE WAS IMPOSSIBLE TO PROVE, AND WAS FOUND GUILTY OF A CHARGE THAT I AM REALLY NOT GUILTY OF. I WANT THIS ENTIRE INCIDENT REMOVED FROM MY CENTRAL FILE AND CORRECTIONAL OFFICER L. SMALLER AND SGT. C. SANTOS BROUGHT UP ON CHARGES FOR FALSIFYING LEGAL DOCUMENTS AND CORROBORATING A COMPLETE FABRICATION PRESENTED IN THE VIOLATION REPORT LOG# A-15-110009. I DON'T WANT THESE OFFICERS IN CHARGE OF MY HEALTH AND SAFETY.

Inmate/Parolee Signature: [Signature] Date Submitted: 12-4-15

State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the FIRST Level

Thursday, December 17, 2015

JACKSON, G08242

A 004 1139001UP

OTHER, , 12/17/2015

Log Number: NKSP-A-15-04832

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

***RO Other***

The NKSP Inmate Appeal Office received your appeal on December 17, 2015. In your appeal you state information in your Rules Violation Report was falsified. You are requesting the RVR be removed from your central file, all involved staff be reprimanded for falsifying documents, and to have all staff involved removed from Facility "A". Be advised, this appeal has been cancelled per California Code of Regulations (CCR), Title 15 section 3084.6 (c)(4), as you have exceeded your appeal time constraints per 3084.8 (b)(1). It is noted you submitted your appeal 33 days after the incident occurred and you are only allowed 30 days to submit an appeal. **Be advised, if you will be appealing your RVR you will need to submit a new appeal. DO NOT FILL OUT ANY OTHER SECTIONS OF THIS APPEAL WITHOUT BEING TOLD TO DO SO.**

This CDC 695 is not to be construed as an elimination of your due process rights. You are not allowed to detach the CDCR-695's as they are a permanent attachment to the appeal. Thank you.

  
Appeals Coordinator  
NKSP

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**



State of California  
CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC I824 Reasonable Modification or Accommodation Request

RE: Screening at the FIRST Level

Friday, December 11, 2015

JACKSON, G08242

A 004 1139001UP

OTHER, , 12/11/2015

Log Number: NKSP-A-15-04832

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

*Your appeal has been cancelled pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(c)(4). Time limits for submitting the appeal are exceeded even though you had the opportunity to submit within the prescribed time constraints.*

The NKSP Inmate Appeal Office received your appeal on December 8, 2015. In your appeal you state information in your Rules Violation Report was falsified. You are requesting the RVR be removed from your central file, all involved staff be reprimanded for falsifying documents, and to have all staff involved removed from Facility "A". Staff Complaints are taken seriously by CDCR and the NKSP Administration. Your appeal was carefully reviewed and a decision was made by the Hiring Authority (HA) to reject your appeal as a Staff Complaint. The HA will continue to accept or reject appeals for a response as a Staff Complaint based on the merits of individual appeals. You are encouraged to use the inmate appeals process in a responsible manner, however there is no regulatory requirement that the appeal be accepted by the HA for response as a Staff Complaint. **Your appeal is being appropriately screened out / rejected per California Code of Regulations (CCR), Title 15 section 3084.6 (c)(4), as you have exceeded your appeal time constraints per 3084.8 (b)(1). It is noted you submitted your appeal 33 days after the incident occurred and you are only allowed 30 days to submit an appeal. Be advised, if you will be appealing your RVR you will need to submit a new appeal. DO NOT FILL OUT ANY OTHER SECTIONS OF THIS APPEAL WITHOUT BEING TOLD TO DO SO.**

This CDC 695 is not to be construed as an elimination of your due process rights. You are not allowed to detach the CDCR-695's as they are a permanent attachment to the appeal. Thank you.

  
Appeals Coordinator, NKSP

NOTE: If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

*YO MAULLEY'S ACTIONS DID NOT HAVE AN ADVERSE AFFECT TO MY BEING UNTIL I WAS FOUND GUILTY ON 11/22/15. THIS APPEAL IS APPROPRIATE!*

*12-14-15*

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

	IAB USE ONLY	
	Institution/Parole Region:	Log #: NKSP-A-15-04832
		Category: 10
FOR STAFF USE ONLY		

You may appeal a Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, Section (CCR) 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): JACKSON, PATRICK	CDC Number: 6-08242	Unit/Cell Number: A4-139	Assignment:
--------------------------------------	---------------------	--------------------------	-------------

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):

3084.8(e) 3084.8(a)(b) "APPEAL CANCELLATION" <sup>APPEALING</sup>

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A): ON DEC. 11TH, 2015, APPEAL LOG#: NKSP-A-15-04832 WAS SCREENED-OUT FOR EXCEEDING THE 30 DAY TIME LIMIT FOR SUBMISSION OF APPEALS "CONTINUATION?"

B. Action requested (If you need more space, use Section B of the CDCR 602-A): I WANT THE IMMEDIATE GRANTING OF APPEAL#: NKSP-A-15-04832, AND THE IMMEDIATE APPLICATION OF THE REQUESTED ACTION WITHIN.

Supporting Documents: Refer to CCR 3084.3.

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono): COPIES OF SCREEN-OUT FOR APPEAL# ~~IN~~ QUESTION AND CANCELLATION OF APPEAL IN QUESTION.

No, I have not attached any supporting documents. Reason:

Inmate/Parolee Signature: *Patrick Jackson* Date Submitted: 12-29-15

By placing my initials in this box, I waive my right to receive an interview.

NKSP  
 DEC 30 2015  
 RECEIVED  
 JAN 19 2016  
 INMATE APPEALS BRANCH

**C. First Level - Staff Use Only** Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

Bypassed at the First Level of Review. Go to Section E.

Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

Cancelled (See attached letter) Date: \_\_\_\_\_

Accepted at the First Level of Review.

Assigned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Date Due: \_\_\_\_\_

First Level Responder: Complete a First Level response. Include Interviewer's name, title, interview date, location, and complete the section below.

Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with First Level response, complete Section D.

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date completed: \_\_\_\_\_  
(Print Name)

Reviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print Name)

Date received by AC: \_\_\_\_\_

AC Use Only  
Date mailed/delivered to appellant \_\_\_\_ / \_\_\_\_ / \_\_\_\_

D. If you are dissatisfied with the First Level response, explain the reason below, attach supporting documents and submit to the Appeals Coordinator for processing within 30 calendar days of receipt of response. If you need more space, use Section D of the CDCR 602-A.

Inmate/Parolee Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

E. Second Level - Staff Use Only

Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

- By-passed at Second Level of Review. Go to Section G.
- Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
- Cancelled (See attached letter)
- Accepted at the Second Level of Review

Assigned to: Appeals Coord. Title: CLT Date Assigned: 12/30/15 Date Due: 2/12/16

Second Level Responder: Complete a Second Level response. If an interview at the Second Level is necessary, include interviewer's name and title, interview date and location, and complete the section below.

Date of Interview: 12/30/15 Interview Location: fac. "A" Building 4 B-side 161am

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with Second Level response, complete Section F below.

Interviewer: B. Johnson Title: CLT Signature: \_\_\_\_\_ Date completed: 12/30/15

Reviewer: [Signature] Title: CLT Signature: \_\_\_\_\_

Date received by AC: 1/5/16

AC Use Only  
Date mailed/delivered to appellant 1.5.16

F. If you are dissatisfied with the Second Level response, explain reason below; attach supporting documents and submit by mail for Third Level Review. It must be received within 30 calendar days of receipt of prior response. Mail to: Chief, Inmate Appeals Branch, Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001. If you need more space, use Section F of the CDCR 602-A.

WILL FILE INJUNCTION. THIS IS UNACCEPTABLE. THE ISSUE OF 60 SMALLY FALSIFYING DOCUMENTS TO TRUMP UP THE CHARGE OF POSSESSION OF MANUFACTURED ALCOHOL SPANNING FROM A GRIFFITHCO W/IN INMATE McCLAREN AUG 878 IS BEING SWEEP UNDER THE RUG BY NKSP.

Inmate/Parolee Signature: [Signature] Date Submitted: 1-10-16

G. Third Level - Staff Use Only

This appeal has been:

- Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
- Cancelled (See attached letter) Date: \_\_\_\_\_
- Accepted at the Third Level of Review. Your appeal issue is  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached Third Level response.

Third Level Use Only  
Date mailed/delivered to appellant APR 01, 2016

Request to Withdraw Appeal: I request that this appeal be withdrawn from further review because; State reason. (If withdrawal is conditional, list conditions.)

Inmate/Parolee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Staff Name: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1508122	IAB USE ONLY	Institution/Parole Region:	Log #:	Category:
			NKSP-A-15-0592	10
FOR STAFF USE ONLY				

Attach this form to the CDCR 602, only if more space is needed. Only one CDCR 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First):	CDC Number:	Unit/Cell Number:	Assignment:
---------------------	-------------	-------------------	-------------

A. Continuation of CDCR 602, Section A only (Explain your issue): ON DEC. 14TH, 2015;  
 I RESSUBMITTED APPEAL # : NKSP-A-15-04832  
 STATING " THE INCIDENT BEING APPEALED DID  
 NOT HAVE AN ADVERSE AFFECT TO MY BEING  
 UNTIL 11/22/15. ON DECEMBER 17TH, 2015,  
 THE APPEAL WAS CANCELLED, REPEATING  
 THE VIOLATION OF THE 30 DAY TIME LIMIT.  
3084.8(b): AN INMATE "MUST" SUBMIT THE  
APPEAL WITHIN 30 DAYS OF THE OCCURENCE  
OF EVENT BEING APPEALED.

3000.5(c) RULES OF CONSTRUCTION: THE  
FOLLOWING CONSTRUCTIONS APPLY TO THESE REGULATIONS.  
"SHALL" IS MADDATORY "SHOULD" IS ADVISORY,  
AND "MAY" IS PERMISSIVE. TITLE 15 DOES NOT  
RECOGNIZE THE APPLICATION OF "MUST" WITHIN  
THE RULES OF CONSTRUCTION SECTION 3000.5  
IN THE CODE OR REGULATIONS. ALSO

3000.5 (f): THE TIME LIMITS SPECIFIED IN THESE  
REGUCATIONS DOES NOT CREATE A RIGHT TO HAVE ACTIONS WITHIN LIMITS.

Inmate/Parolee Signature: [Signature] Date Submitted: 12-29-15

NKSP  
 DEC 20 2015  
 RECEIVED  
 JAN 19 2016  
 INMATE APPEALS BRANCH

B. Continuation of CDCR 602, Section B only (Action requested): AGAIN. 3000.5 (f): THE TIME LIMITS  
SPECIFIED IN THESE REGULATIONS DOES NOT CREATE A RIGHT TO HAVE  
THE SPECIFIED ACTION TAKEN WITHIN THE TIME LIMITS. THE  
TIME LIMITS ARE DIRECTORY, AND THE FAILURE TO MEET THEM  
DOES NOT PRECLUDE TAKING THE SPECIFIC ACTION BEYOND THE  
TIME LIMITS.

I WANT APPEAL # NKSP-A-15-04832 PROCESSED  
FOR SECOND LEVEL REVIEW, OR THE IMMEDIATE  
GRANTING AND APPLICATION OF REQUESTED ACTION  
WITHIN APPEAL # : NKSP-A-15-04832

Inmate/Parolee Signature: [Signature] Date Submitted: 12-29-15



REVIEWER'S RESPONSE:

All documents submitted by you have been considered and reviewed in accordance with departmental policies and institutional procedures. First, it should be noted appeal NKSP-A-15-04832 was sent to the NKSP Hiring Authority (HA) for review and determination for assignment as a possible Staff Complaint. On December 9, 2015, the HA reviewed your appeal in its entirety and determined your appeal (NKSP-A-15-04832) was to be cancelled with no inquiry or investigation due to you exceeding your appeal time constraints. Although you state the issue identified in appeal NKSP-A-15-04832 did not have an adverse effect on you until November 22, 2015, this claim cannot be confirmed. It should be noted November 22, 2015, is the date your RVR was adjudicated where you were subsequently found guilty of your Rules Violation Report charge. A review of your attached documents identify the incident relevant to appeal NKSP-A-15-04832 occurred on November 5, 2015. Per CCR 3084.8 (b)(1) you had thirty (30) days from that date to submit an appeal regarding an action, condition, or policy you believed was violated. Further review of appeal NKSP-A-15-04832 identifies your appeal was not received by the NKSP Inmate Appeals Office until December 8, 2015, which was thirty three (33) days after the alleged incident occurred. Based on you exceeding your appeal time constraints per CCR 3084.8 (b)(1), your appeal was cancelled per CCR 3084.6 (c)(4). The cancellation of your appeal is in accordance with the rules, regulations and policies of California Department of Corrections and this institution. Your request to have this appeal granted, appeal NKSP-A-15-04832 processed as a Second Level appeal, and section "B" of appeal NKSP-A-15-04832 applied is denied.

DECISION:

Your appeal is **DENIED** at this Level of Review.

You are advised this issue may be submitted for a Director's Level of Review, if desired.



V. ADAMS  
Chief Deputy Warden

STATE OF CALIFORNIA  
DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF APPEALS  
P. O. BOX 942883  
SACRAMENTO, CA 94283-0001

**THIRD LEVEL APPEAL DECISION**

Date: **MAR 29 2016**

In re: Patrick Jackson, G08242  
California Health Care Facility  
7707 Austin Road  
Stockton, CA 95215

TLR Case No.: 1508122

Local Log No.: NKSP-15-05092

This matter was reviewed on behalf of the Director of the California Department of Corrections and Rehabilitation (CDCR) by Appeals Examiner K. J. Allen. All submitted documentation and supporting arguments of the parties have been considered.

**I APPELLANT'S ARGUMENT:** It is the appellant's position that his submitted appeal was incorrectly processed by appeals staff at North Kern State Prison (NKSP). The appellant states that the Appeals Coordinator cancelled his appeal because it was untimely. However, the appellant states that the institution is using an incorrect date of occurrence. He states that the issue being appealed did not have an adverse effect upon him until November 22, 2015. In that his appeal was cancelled on December 17, 2015, his appeal should be considered timely.

The appellant adds that the California Code of Regulations, Title 15, Section (CCR) 300.5 indicates that time limits are directory and the failure to meet them does not preclude taking the specified action beyond the time limits. He states that there is no indication that an appeal "must" be submitted within 30 calendar days or that an appeal "must" be cancelled for a violation of time constraints. The appellant requests that his previously cancelled appeal (NKSP Log #15-04832) be processed for a Second Level of Review (SLR) or be immediately granted and application of requested actions.

**II SECOND LEVEL'S DECISION:** The reviewer found that the institution is in compliance with all departmental rules and regulations in the processing of inmate appeals. The appeal inquiry revealed that the appellant's previously submitted appeal was correctly cancelled for failure to meet time constraints. The reviewer noted that pursuant to the CCR 3084.8(b)(1), an inmate must submit an appeal within 30 calendar days of first knowledge of the action or decision being appealed.

The reviewer found that the appellant was attempting to appeal an incident that occurred on November 5, 2015. However, his appeal regarding the incident was not received by the NKSP's Appeals Office until December 8, 2015, which is beyond the allowable 30 calendar days. The reviewer determined that the appellant's claim that the incident did not adversely affect him until November 22, 2015, was not supportable. The reviewer found that the appeal was properly cancelled by the Appeals Coordinator. Based upon the conducted inquiry, the appeal was denied at the SLR. It was noted that the appeal was reviewed by the institution's hiring authority for possible staff complaint processing. A determination was made that the appeal did not warrant processing as a staff complaint.

**III THIRD LEVEL DECISION:** Appeal is denied.

**A. FINDINGS:** Following analysis of the submitted documentation, the Appeals Examiner has determined that the appellant's allegations have been reviewed and properly evaluated by administrative staff at NKSP. An appeal inquiry was conducted by appropriate supervising staff and the appeal was reviewed by the institution's Chief Deputy Warden. Despite the appellant's dissatisfaction, this review finds no evidence of a violation of existing policy or regulation by the institution based upon the arguments and evidence presented.

PATRICK JACKSON, G08242  
CASE NO. 1508122  
PAGE 2

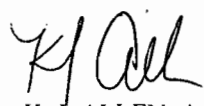
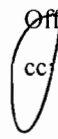
The appellant has failed to provide evidence to support his appeal claim that he submitted his appeal in a timely manner. Pursuant to departmental regulations, an appellant must submit the appeal within 30 calendar days of the event or decision being appealed. The date of the incident was identified by the appellant. The CCR 3084.8(b)(1), an inmate must submit the appeal within 30 calendar days of the occurrence of the event or decision being appealed. Relief in this matter at the Third Level of Review is not warranted.

**B. BASIS FOR THE DECISION:**

California Penal Code Section: 5058  
CCR: 3001, 3084.1, 3084.3, 3084.5, 3084.6, 3084.8, 3380  
CDCR Operations Manual, Section: 54100.1, 54100.4

**C. ORDER:** No changes or modifications are required by the institution.

This decision exhausts the administrative remedy available to the appellant within CDCR.

  
cc: 

K. J. ALLEN, Appeals Examiner  
Office of Appeals

Warden, CHCF  
Appeals Coordinator, CHCF  
Appeals Coordinator, NKSP

  
M. VOONG, Chief  
Office of Appeals



	IAB USE ONLY	
	Institution/Parole Region: NKSP-A 75-05039	Log #: 1919
FOR STAFF USE ONLY		

You must file this appeal with the Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, Section (CCR) 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): JACKSON, PATRICK	CDC Number: 6-08242	Unit/Cell Number: A4-139	Assignment:
--------------------------------------	---------------------	--------------------------	-------------

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):

RETALIATORY HARASSMENT BY % SMALLLEY

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A): **EMERGENCY!**  
ON DECEMBER 4TH, 2015 I FILED AN INMATE 602 FORM AND A RIGHTS AND RESPONSIBILITIES STATEMENT. . . CONT. FORM.

B. Action requested (If you need more space, use Section B of the CDCR 602-A):  
I NEED % SMALLLEY REMOVED FROM A-YARD DUTIES IMMEDIATELY TO PREVENT ESCALATED HARASSMENT.

Supporting Documents: Refer to CCR 3084.3.

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):

602-A CONTINUATION FORM  
CDCR 1855 RIGHTS AND RESPONSIBILITY STATEMENT.

No, I have not attached any supporting documents. Reason:

Inmate/Parolee Signature: Patrick Jackson Date Submitted: 12-19-15

By placing my initials in this box, I waive my right to receive an interview.

NKSP  
 DEC 22 2015  
 NKSP  
 JAN 20 2016  
 APPEALS RECEIVED  
 FEB 9 2016  
 INMATE APPEALS BRANCH  
 2/22/15  
 ROUTINE

C. First Level - Staff Use Only Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:  
 Bypassed at the First Level of Review. Go to Section E.  
 Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Cancelled (See attached letter) Date: \_\_\_\_\_  
 Accepted at the First Level of Review.

Assigned to: AW-601 FAC. ATW Title: \_\_\_\_\_ Date Assigned: 12/24/15 Date Due: 2/9/16

First Level Responder: Complete a First Level response. Include Interviewer's name, title, interview date, location, and complete the section below.

Date of Interview: 1/8/2016 Interview Location: FACILITY "A" PROGRAM

Your appeal issue is:  Granted  Granted in Part  Denied  Other:

Interviewer: C. SANTOS Title: SGT Signature: \_\_\_\_\_ Date completed: 1/11/16

Reviewer: J. O'NEILL Title: COLL Signature: \_\_\_\_\_

Date received by AC: 1/12/16

AC Use Only Date mailed/delivered to appellant 1/13/16

*[Handwritten initials]*

Case 1:17-cv-00110-MJS Document 1 Filed 01/24/17 Page 34 of 77

D. If you are dissatisfied with the First Level response, explain the reason below, attach supporting documents and submit to the Appeals Coordinator for processing within 30 calendar days of receipt of response. If you need more space, use Section D of the CDCR 602-A.

SERGEANT C. SANTOS IS INSINUATING A FALSE PRETENSE DURING FIRST LEVEL REVIEW. HE WAS THE SGT. ON DUTY DURING THE NOVEMBER MANUFACTURED ALCOHOL CONVICTION, AND HIS NAME IS ON THE VIOLATION REPORT RVR # A-15-11-0009 "CONT.?"

Inmate/Parolee Signature: Pat J

Date Submitted: JAN 15TH, 2016

E. Second Level - Staff Use Only

Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

- By-passed at Second Level of Review. Go to Section G.
- Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
- Cancelled (See attached letter)
- Accepted at the Second Level of Review

Assigned to: Appeals Coord. Title: Act Date Assigned: 1/20/16 Date Due: 3/3/16

Second Level Responder: Complete a Second Level response. If an interview at the Second Level is necessary, include interviewer's name and title, interview date and location, and complete the section below.

Date of Interview: N/A Interview Location: N/A

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with Second Level response, complete Section F below.

Interviewer: B. Johnson Title: Act Signature: [Signature] Date completed: 1/20/16

Reviewer: [Signature] Title: CDU Signature: [Signature]

Date received by AC: 1/29/16

AC Use Only  
Date mailed/delivered to appellant 1/29/16

F. If you are dissatisfied with the Second Level response, explain reason below; attach supporting documents and submit by mail for Third Level Review. It must be received within 30 calendar days of receipt of prior response. Mail to: Chief, Inmate Appeals Branch, Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001. If you need more space, use Section F of the CDCR 602-A.

THE INADEQUACIES OF THE CDCR SYSTEM ALLOWS DISHONEST CORRECTIONAL OFFICERS TO DO WHATEVER THEY WANT, LEAVING NO WAY FOR INMATES TO PROVE WRONG DOING AND CONTINUES INMATE SUFFERING. "CONT.?"

Inmate/Parolee Signature: Pat J

Date Submitted: 2-3-16

G. Third Level - Staff Use Only

This appeal has been:

- Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
  - Cancelled (See attached letter) Date: \_\_\_\_\_
  - Accepted at the Third Level of Review. Your appeal issue is  Granted  Granted in Part  Denied  Other: \_\_\_\_\_
- See attached Third Level response.

Third Level Use Only  
Date mailed/delivered to appellant APR 19 2016

Request to Withdraw Appeal: I request that this appeal be withdrawn from further review because; State reason. (If withdrawal is conditional, list conditions.)

27

Inmate/Parolee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Staff Name: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1509082	IAB USE ONLY	Institution/Parole Region:	Log #:	Category:
			NKSP-A-15-0504	19
FOR STAFF USE ONLY				

Attach this form to the CDCR 602, only if more space is needed. Only one CDCR 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First):	CDC Number:	Unit/Cell Number:	Assignment:
JACKSON, PATRICK	G-08242	A4-139	

A. Continuation of CDCR 602, Section A only (Explain your issue):

AGAINST CORRECTIONAL OFFICER SMALLY FOR FALSIFYING DOCUMENTS LEADING TO MY BEING FOUND GUILTY FOR POSSESSION OF MANUFACTURED ALCOHOL. LOG #: NKSP-A-15-04832

SINCE THEN, MY CELL HAS BEEN CONSTANTLY SEARCHED BY CO SMALLY AND HE REFUSES TO LEAVE A CELL SEARCH SLIP. HE CONSTANTLY FOLLOWS ME WITH HIS EYES IN AN OBVIOUS FASHION WHILE IN THE DAY ROOM, AND HE COORDINATES WITH THE TOWER CO GONZALES TO HARASS ME ON THE LOUD SPEAKER.

THIS IS A MAN THAT IS PLACED IN CHARGE OF MY HEALTH AND SAFETY, AND AS AN OFFICER, IS HELD TO HIGHER STANDARDS THAN AVERAGE CITIZENS. THIS IS UNACCEPT.

Inmate/Parolee Signature: *Patrick Jackson* Date Submitted: 12-19-15

NKSP  
 DEC 22 2015  
 APPEALS  
 NKSP  
 JAN 20 2016  
 APPEALS  
 RECEIVED  
 SFB-940H VLS  
 INMATE APPEALS BRANCH

B. Continuation of CDCR 602, Section B only (Action requested):

"SEE FRONT PAGE" 28

Inmate/Parolee Signature: *Patrick Jackson* Date Submitted: DECEMBER 19, 2015

D. Continuation of CDCR 602, Section D only (Dissatisfied with First Level response): SGT. SANTOS WAS CONDENSED DURING THE FIRST LEVEL REVIEW STUFFLING LAUGHTER AND MAKING IT CLEAR THAT THIS MATTER WOULD BE SWEAT UNDER THE RUB.

THIS IS UNACCEPTABLE. DURING THE FIRST LEVEL REVIEW, I MADE IT CLEAR THAT I RECENTLY HAD ORAL SURGERY AND WAS SUPPOSED TO BE CONFINED TO QUARTERS, AND HE INSISTED ON MY ENDURING THE PAINFUL ORDEAL OF BEING PATRONIZED WHILE TELLING MY SIDE. FURTHERMORE:

SGT. C. SANTOS DATED HIS REPORT ON JAN. 9<sup>TH</sup> 2016; AND STATED THAT HE INTERVIEWED Y/O GONZALES ON JAN. 11<sup>TH</sup>, 2016. UNLESS HE CAN TIME TRAVEL, SGT. C. SANTOS HAS LIED ON AN OFFICIAL REVIEW AND IS A PART OF A CORRECTIONAL RACKET THAT HAS WEAPONIZED THEIR AUTHORITY TO OPPRESS ME AND TAKE 120 DAYS OF MY TIME. WILL FILE INJUNCTION.

Inmate/Parolee Signature: *[Signature]* Date Submitted: JAN. 15<sup>TH</sup>, 2016

F. Continuation of CDCR 602, Section F only (Dissatisfied with Second Level response): BEING THAT Y/O SWANEY LEAVES NO CEIC SEARCH SLIPS, I AM UNABLE TO PROVE CONSTANT SEARCHING. CORRECTIONAL OFFICERS ARE ALL SUPPORTIVE OF WRONG DOING AND LIE AND FAUSIFY IN EACH OTHERS FAVOR.

THE CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION IS THE ONE OF THE ONLY ENTITIES THAT DOES NOT HAVE SURVEILLANCE INSTALLED TO PROVE WRONG DOING.

UNDER THIS PARADIGM A WORLD IS CREATED WHERE CORRECTIONAL OFFICERS CAN, HAVE, AND WILL WEAPONIZE THEIR AUTHORITY TO OPPRESS INMATES.

IF MY REQUESTED ACTIONS ARE NOT MET, I WILL FILE INJUNCTIONS TO APPROPRIATE COURTS.

Inmate/Parolee Signature: *[Signature]* Date Submitted: FEB 3<sup>RD</sup>, 2016

**DIVISION OF ADULT INSTITUTIONS**

**NORTH KERN STATE PRISON**

2737 West Cecil Avenue  
P.O. Box 567  
Delano, California 93216



A4-139

January 9, 2016

Inmate Jackson G-08242  
North Kern State Prison

Inmate: Jackson

FIRST LEVEL APPEAL RESPONSE LOG NUMBER NKSP-A-15-05039

**ISSUE:**

In your appeal, you state Officer L. Smalley, Facility "A", Building #4, Floor #2 (FAB4-FI #2) is harassing you, falsifying disciplinary documents and constantly searching your cell. Furthermore, you have filed a Rights and Responsibility Statement (CDCR 1858), an allegation of misconduct by a departmental peace officer. You are requesting Officer Smalley be removed from the facility to prevent escalated harassment against you.

**INTERVIEWS:**

On January 8, 2016, I interviewed you regarding this appeal. During the interview, I provided you an opportunity to fully explain your appeal. You stated Officer Smalley falsified a CDC 115 for Possession of Inmate Manufactured Alcohol where you received a forfeiture of credit for 120 days. You stated your cell is constantly getting searched and Smalley is always watching you.

On January 9, 2016, I interviewed Officer L. Smalley, regarding this appeal. Officer Smalley stated "in November 2015, inmate Jackson received a CDCR 115 for Possession of Inmate Manufactured Alcohol". "Ever since that CDCR 115, he thinks I am harassing him". "I treat all inmates the same."

On January 11, 2016, I interviewed Officer H. Gonzalez, regarding this appeal. Officer Gonzalez stated "I know who inmate Jackson is but I don't recall Officer Smalley asking me to harass him in any way".

**REGULATIONS:**

The rule(s) governing this issue are the California Code of Regulation (CCR), Title 15 Section

3287, Cell, Property and Body Inspections

**REVIEWER'S RESPONSE:**

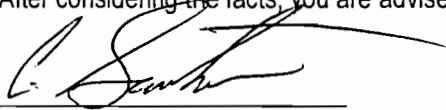
You have alleged Officer Smalley is harassing you; refer to Rules Violation Report (RVR) Log # FACA-15-11-0009. Officer Smalley clearly states he smelled inmate manufactured alcohol when walking by your cell and was very descriptive in his report leading to a guilty finding in your RVR hearing. I have reviewed the Officers housing unit's cell search binder and there is no pattern or evidence that you're cell is constantly being searched. Officer H. Gonzalez (A4-Control) states Officer Smalley never spoke to him about harassing you.

Effective communication was established by simple English spoken slowly and clearly. Inmate asked appropriate questions regarding the information provided.

**DECISION:**

Your appeal is **DENIED** at the First Level. I cannot substantiate your claim. There is not enough evidence to warrant action on your complaint.

After considering the facts, you are advised this issue may be submitted for a Second Level of Review, if desired.



**C. SANTOS**  
Correctional Sergeant  
North Kern State Prison

Case 1:17-cv-00110-MJS Document 1 Filed 01/24/17 Page 39 of 77

**DIVISION OF ADULT INSTITUTIONS**  
**NORTH KERN STATE PRISON**

2737 West Cecil Avenue  
P. O. Box 567  
Delano, California 93216



January 20, 2016

Patrick Jackson, CDCR# G08242  
Facility "A" Building 4 Cell 139U  
North Kern State Prison (NKSP)

Inmate Jackson:

SECOND LEVEL APPEAL RESPONSE LOG NUMBER: NKSP-A-15-05039

B. Johnson, Correctional Counselor (CC) II reviewed this matter on my behalf.

ISSUE:

You contend Officer L. Smalley authored a Rules Violation Report (RVR), which was falsified and you were subsequently found guilty of the RVR issued to you. You state since receiving your RVR, Officer Smalley has constantly searched your cell, he has refused to provide you with a cell search receipt, he follows you with his eyes in obvious fashion, and he coordinates with Officer H. Gonzalez to harass you on the Personal Address System (PAS). You are requesting Officer Smalley be removed from his assigned post on Facility "A" immediately to prevent harassment.

Your appeal was responded to at the First Level of review on January 9, 2016, and was denied. The denial of your appeal is based on the Sergeant C. Santos interviewing all involved staff and not being able to substantiate your claim of any wrongdoing by alleged staff.

In Section 'D' of the CDCR 602 Inmate Appeal Form, you state Sergeant C. Santos is insinuating a false pretense in the authoring of the First Level Response (FLR). You state Sergeant Santos was on duty during the incident leading to the receipt of your RVR. You state during the interview with Sergeant Santos regarding your FLR, his actions insinuated the matter would be swept under the rug. You state there are contradictions regarding when the appeal was authored, when Officer H. Gonzalez was interviewed, and you state these contradictions identify Sergeant Santos has lied on an official document in order to oppress you and take one hundred and twenty (120) days of your time. Lastly, you state you will file an injunction.

INTERVIEWED BY:

C. Santos, Correctional Sergeant, interviewed you on January 9, 2016. Your appeal rights were explained during the interview.

Refer to Effective Communication Confirmation form dated January 9, 2016, regarding "Effective Communication" protocols.

REGULATIONS:

The rules governing this issue are the California Code of Regulation (CCR), Title 15:

- CCR 3391 (a), Employee Conduct

REVIEWER'S RESPONSE:

All documents submitted by you have been considered and reviewed in accordance with departmental policies and institutional procedures. First, your claim of Officer L. Smalley falsifying your RVR cannot be confirmed. It should be noted the RVR authored by Officer Smalley is considered factual and a legal document. You appealed (NKSP-A-15-04832) your RVR and your appeal was denied at the Second Level. In the FLR Sergeant Santos documents he reviewed the Facility "A" Building 4 B-Side (FAB4) cell search log and confirmed there was no pattern or evidence to suggest your cell was being search constantly; therefore your claim of Officer Smalley constantly searching your cell and refusing to provide you with a cell search receipt is not considered factual. Officer Smalley was interviewed regarding your appeal claims and during the interview he recalled the issue of your RVR; however he treats all inmates the same. Also noted in the FLR is an interview of FAB4 Control Booth Officer, H. Gonzalez. During the interview the FLR documents Officer Gonzalez stated he knows who you are, but does not recall Officer Smalley asking him to harass you. Be advised, you have not provided any proof to suggest Officer's Smalley and Gonzalez have harassed you in any way, shape, or form. Your request to have Officer Smalley removed from FAB4 Floor #2 is beyond the scope of the appeals process; therefore your request is denied. Furthermore, you have not provided any substantive proof Officer's Smalley or Gonzalez has harassed you, which would warrant the removal of any employee from their assigned post.

DECISION:

Your appeal is **DENIED** at this Level of Review.

You are advised this issue may be submitted for a Director's Level of Review, if desired.



V. ADAMS  
Chief Deputy Warden



STATE OF CALIFORNIA  
**RIGHTS AND RESPONSIBILITY STATEMENT**  
 CDCR 1858 (Rev. 10/06)

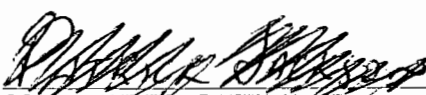
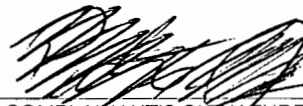

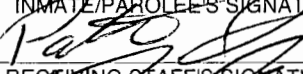
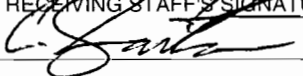
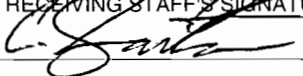
DEPARTMENT OF CORRECTIONS AND REHABILITATION

## RIGHTS AND RESPONSIBILITY STATEMENT

*The California Department of Corrections and Rehabilitation has added departmental language (shown inside brackets, in non-boldface type) for clarification purposes.*

**Pursuant to Penal Code 148.6, anyone wishing to file an allegation of misconduct by a departmental peace officer must read, sign and submit the following statement:**

**YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER [this includes a departmental peace officer] FOR ANY IMPROPER POLICE [or peace] OFFICER CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' [or inmates'/parolees'] COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN [or inmate/parolee] COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.**

 COMPLAINANT'S PRINTED NAME	 COMPLAINANT'S SIGNATURE	DATE SIGNED 12-19-15			
PATRICK JACKSON		INMATE/PAROLEE PRINTED NAME	INMATE/PAROLEE'S SIGNATURE	CDC NUMBER	DATE SIGNED
PATRICK JACKSON		SGT C. SANTOS		6-08242	12/19/15
RECEIVING STAFF'S PRINTED NAME		RECEIVING STAFF'S SIGNATURE		DATE SIGNED	
SGT C. SANTOS				1/10/16	

DISTRIBUTION:  
 ORIGINAL -  
 Public - Institution Head/Parole Administrator  
 Inmate/Parolee - Attach to CDC form 602  
 Employee - Institution Head/Parole Administrator  
 COPY - Complainant

**OFFICE OF APPEALS**

1515 S Street, Sacramento, CA 95814  
P.O. Box 942883  
Sacramento, CA 94283-0001



July 13, 2016

JACKSON, PATRICK, G08242  
California State Prison, Sacramento  
P.O. Box 29  
Represa, CA 95671

**MAILED**  
**JUL 19 2016**

RE: TLR# 1512062 NKSP-16-00729 STAFF COMPLAINTS

The Office of Appeals, California Department of Corrections and Rehabilitation (CDCR) acts as the third level of review as established in California Code of Regulations (CCR) Title 15, Article 8. The Office of Appeals examines and responds to inmate and parolee appeals, after the institution or parolee region has responded at the Second Level of Appeal.

Your appeal has been rejected pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(b)(7). Your appeal is missing necessary supporting documents as established in CCR 3084.3. All documents must be legible (If necessary, you may obtain copy(ies) of requested documents by sending a request with a signed trust withdrawal form to your assigned counselor). Your appeal is missing:

- CDCR Form 1858, Rights and Responsibilities Statement
- CDC Form 115, Rules Violation Report A-16-02-0051

M. VOONG, Chief  
Office of Appeals

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

\*\*\*\*PERMANENT APPEAL ATTACHMENT - DO NOT REMOVE\*\*\*\*

1512062  
  
 G08242

**STAFF USE ONLY**

Institution/Parole Region: \_\_\_\_\_ Log #: NKSP-A16-00729 Category: 7

FOR STAFF USE ONLY

You may appeal any California Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, (CCR) Section 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): JACKSON, PATRICK CDC Number: 6-08242 Unit/Cell Number: A5-209 Assignment: \_\_\_\_\_

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):  
**"EMERGENCY 602" REPORTING CORRUPTION.**

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A):  
CORRECTIONAL OFFICER L. SNAULLEY AND  
CORRECTIONAL SERGENIC C. SANTOS HAVE  
CONSPIRED TO FALSIFY DOCUMENTS AGAINST ME.

B. Action requested (If you need more space, use Section B of the CDCR 602-A):  
I WANT SGT. C. SANTOS AND /O L.  
SNAULLEY REMOVED FROM A-YARD.

Supporting Documents: Refer to CCR 3084.3.  
 Yes, I have attached supporting documents.  
 List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):  
 \_\_\_\_\_

No, I have not attached any supporting documents. Reason: \_\_\_\_\_  
 \_\_\_\_\_

Inmate/Parolee Signature: [Signature] Date Submitted: 2-21-16  
 By placing my initials in this box, I waive my right to receive an interview.

NKSP  
 FEB 22 2016  
 RECEIVED  
 APR 26 2016  
 MAIL APPEALS BRANCH  
 A-16-02-0051

**C. First Level - Staff Use Only** Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:  
 Bypassed at the First Level of Review. Go to Section E.  
 Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Cancelled (See attached letter) Date: \_\_\_\_\_  
 Accepted at the First Level of Review.

Assigned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Date Due: \_\_\_\_\_

First Level Responder: Complete a First Level response. Include interviewer's name, title, interview date, location, and complete the section below.  
 Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_  
 See attached letter. If dissatisfied with First Level response, complete Section D.

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date completed: \_\_\_\_\_  
 (Print Name)

Reviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_  
 (Print Name)

Date received by AC: \_\_\_\_\_

AC Use Only  
 Date mailed/delivered to appellant \_\_\_/\_\_\_/\_\_\_

**D. If you are dissatisfied with the First Level response,** explain the reason below, attach supporting documents and submit to the Appeals Coordinator for processing within 30 calendar days of receipt of response. If you need more space, use Section D of the CDCR 602-A.

*UNACCEPTABLE, WEAPONIZED BY VCS ARE  
 STILL ON RECORD. NOT FOR APPEAL FOR  
 APPEAL FOR APPEAL CANCELLATION BEEN  
 REMOVED FROM  
 SEE SECTION F 602-A  
 Inmate/Parolee Signature: *[Signature]* Date Submitted: *4-21-16**

**E. Second Level - Staff Use Only** Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:  
 By-passed at Second Level of Review. Go to Section G.  
 Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Cancelled (See attached letter)  
 Accepted at the Second Level of Review

Assigned to: *AW-CO / Inc. Rfm* Title: \_\_\_\_\_ Date Assigned: *2/24/16* Date Due: *4/1/16*

Second Level Responder: Complete a Second Level response. If an interview at the Second Level is necessary, include interviewer's name and title, interview date and location, and complete the section below.

Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_  
 Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with Second Level response, complete Section F below.

Interviewer: *J. Hughes* (Print Name) Title: *[Signature]* Signature: *[Signature]* Date completed *3/22/16*  
 Reviewer: *[Signature]* (Print Name) Title: *[Signature]* Signature: \_\_\_\_\_  
 Date received by AC: *3/25/16*

**AC Use Only**  
 Date mailed/delivered to appellant *3/25/16*

**F. If you are dissatisfied with the Second Level response,** explain reason below; attach supporting documents and submit by mail for Third Level Review. It must be received within 30 calendar days of receipt of prior response. Mail to: Chief, Inmate Appeals Branch, Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001. If you need more space, use Section F of the CDCR 602-A.

*SEE 602-A SECTION F  
 UNACCEPTABLE, WEAPONIZED BY VCS ARE  
 STILL ON RECORD. NOT FOR APPEAL FOR  
 APPEAL CANCELLATION BEEN REMOVED AND  
 INTERCEPTED BY DIRECTOR'S LEVEL, SEE 602-A  
 Inmate/Parolee Signature: *[Signature]* Date Submitted: *4-29-16**

**G. Third Level - Staff Use Only**

This appeal has been:  
 Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Cancelled (See attached letter) Date: \_\_\_\_\_  
 Accepted at the Third Level of Review. Your appeal issue is  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached Third Level response.

**Third Level Use Only**  
 Date mailed/delivered to appellant *7/1/16*

*JUL 1 3 2016*

**H. Request to Withdraw Appeal:** I request that this appeal be withdrawn from further review because; State reason. (If withdrawal is conditional, list conditions.)

\_\_\_\_\_

\_\_\_\_\_

Inmate/Parolee Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Staff Name: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IAB USE ONLY	Institution/Parole Region:	Log #: NKSP-A-16-00729	Category: 7
FOR STAFF USE ONLY			

Attach this form to the CDCR 602, only if more space is needed. Only one CDCR 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): <del>PATRICK</del> JACKSON PATRICK	CDC Number: 6-08272	Unit/Cell Number: A5-204	Assignment:
---	------------------------	-----------------------------	-------------

A. Continuation of CDCR 602, Section A only (Explain your issue):

**"EMERGENCY"**

ON TWO SEPARATE OCCASIONS, CORRECT. OFFICER L. SMALEY HAD COMPLETELY FALSIFIED THE HAPPENINGS ON A RULES VIOLATION REPORT UNDER THE SUPERVISION OF CORRECTIONAL SGT. C. SANTOS. AFTER THE FIRST INCIDENT I FILED APPEAL WHICH WAS FOLLOWED BY HARRASSMENT THAT WAS APPEALED AND INVESTIGATED BY C. SANTOS. THAT WAS MORE THAN INAPPROPRIATE. AND NOW AS MY APPEALS ARE IN DIRECTOR'S LEVEL REVIEW; SGT. C. SANTOS AND C/O L. SMALEY HAVE CONSPIRED AGAIN TO LIE ON A RULES VIOLATION REPORT STATING "I TOLD C/O SMALEY THAT I REFUSED A CELLMATE". SINCE THE HARRASSMENT OF C/O SMALEY, I'VE WENT OUT OF MY WAY TO AVOID ALL CONTACT AND COMMENTS TO HIM.

Inmate/Parolee Signature: *Patrick J* Date Submitted: 2-21-16

NKSP  
 FEB 22 2016  
 APPEALS  
 RECEIVED  
 APR 28 2016  
 MALE APPEALS BRANCH

B. Continuation of CDCR 602, Section B only (Action requested):

THE CONSTANT RETALIATORY FALSIFICATION OF VIOLATION REPORTS CONSPIRED BETWEEN SGT. C. SANTOS AND C/O L. SMALEY, I WILL BE PLACED ON CORRECTION STATUS PREVENTING ME FROM ACCURATE LITIGATION, AND COMPLETION OF COLLEGE COURSES.

I WANT THESE VIOLATIONS REMOVED FROM MY CENTRAL FILE, AND NO ACTIONS TO BE TAKEN AGAINST ME.  
 "NO REPRISALS WILL BE TAKEN FOR USING THE APPEAL PROCESS"

Inmate/Parolee Signature: *Patrick J* Date Submitted: 2-21-16

D. Continuation of CDCR 602, Section D only (Dissatisfied with First Level response):

~~THE DIRECTOR'S  
REPLY WAS WRITTEN  
MY APPEAL FOR AN RVR THAT HAS BEEN  
MADE~~

Inmate/Parolee Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

F. Continuation of CDCR 602, Section F only (Dissatisfied with Second Level response):

FIRST, I DIDN'T  
RECEIVE THIS APPEAL RESPONSE UNTIL 4-21-16  
LEAVING ME NO TIME TO SEEK DIRECTOR'S  
LEVEL REVIEW.

SECOND LEVEL RESPONSE IS UNACCEPTABLE  
AS FALSE RVR'S HAVE STOLEN SIX MONTHS PLUS OF  
MY TIME AND WAS INSTRUMENTAL IN MY  
RETALIATORY TRANSFER.

HOUSING LOG ON NOVEMBER 2015 WILL SHOW  
THAT I WASN'T EVEN IN THE CELL 1390 FOR  
THREE DAYS BEFORE BEING CHARGED OF MANUFACTURED  
ALCOHOL POSS. I WASN'T IN THE BUILDING FOR  
A WEEK. AND ADMINISTRATION MOVED MC CLAREN  
AV 8878 INTO MY CELL THE NIGHT PRIOR TO RVR  
DATE. I WOULD NOT EVEN HAVE TIME TO  
MANUFACTURE ALCOHOL.

I AM NOT GUILTY OF ANY OF THIS!

Inmate/Parolee Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

4-21-16

# Memorandum

Date : March 22, 2016

To : Jackson G08242  
~~CHCF A 301B1-126L~~  
~~California Medical Facility~~

CMC  
h240

Subject: **STAFF COMPLAINT RESPONSE - APPEAL # NKSP-A-16-00729 SECOND LEVEL RESPONSE**

**APPEAL ISSUE:** Inmate Jackson is alleging Officer L. Smalley and Sergeant C. Santos have conspired against him by issuing him a CDCR115 Rules Violation Report.

**DETERMINATION OF ISSUE:** Your allegation of staff misconduct has been reviewed by the hiring Authority. As a result of that review your appeal was referred for an appeal inquiry.

**SUMMARY FOR APPEAL INQUIRY:**

You were interviewed on March 22, 2016 by Lieutenant J. Hughes and you stated you feel Officer L. Smalley and Sergeant C. Santos are conspiring against you, falsifying documents and by issuing you a CDCR 115 Rules Violation Report. Specifically, you state Officer Smalley conducted a cell search of your cell and claims he found Inmate Manufactured Alcohol inside of your cell. On November 11, 2015 you were found guilty of Possession of Inmate Manufactured Alcohol and were assessed 120 days loss of credits. You also stated Officer Smalley issued you a second CDCR 115 Rules Violation Report. Specifically, you state Officer Smalley is claiming you refused your assigned housing. On March 11, 2016 you were found not guilty of Willfully Delaying a Peace Officer, Refusing Assigned Housing and it was dismissed.


An **Appeal Inquiry** has been conducted and reviewed by the hiring authority. The following individuals were interviewed: Inmate Jackson G08242, Sergeant C. Santos, Officer L. Smalley and Lieutenant T. Hughes. As a result of your staff misconduct allegation the following information was reviewed: CDCR 602 Inmate/Appeal Form #NKSP-A-16-00729, CDCR 115 Rules Violation Report #A-15-11-0009 and CDCR Rules Violation Report #A-16-02-0051. Staff did not violate CDCR policy with respect to the issues raised.

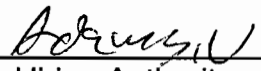
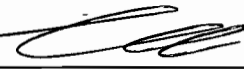
**FINDINGS:**

Your appeal is **PARTIALLY GRANTED** in that:

- An Appeal Inquiry into your allegation has been/is being conducted.

**ALL STAFF PERSONNEL MATTERS ARE CONFIDENTIAL IN NATURE.** As such, the details of any inquiry or investigation will not be shared with staff, members of the public, or offender appellants. Although you have the right to submit a staff complaint, a request for administrative action regarding staff or the placement of documentation in a staff member's personnel file is beyond the scope of the staff complaint process. Allegations of staff misconduct do not limit or restrict the availability of further relief via the inmate appeals process. If you wish to appeal the decision, you must submit your staff complaint appeal through all levels of appeal review up to, and including, the Secretary's Level of Review. Once a decision has been rendered at the Third Level, your administrative remedies will be considered exhausted.

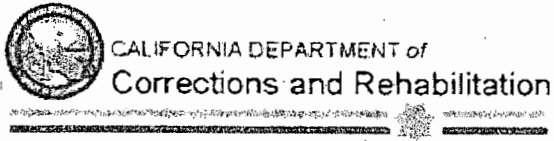
Name LT. S. H. GILES Signature  3-22-2016  
 Interviewer Date

Name  Signature  3/25/16  
 Hiring Authority Date



# EXHIBIT B

41240



## RULES VIOLATION REPORT

CDC NUMBER G08242	INMATE'S NAME JACKSON, PATRICK O.	EPRD 12/23/2017	FACILITY NKSP-Facility A	HOUSING LOCATION NKSP-A - A 005 2 - 204001U
VIOLATION DATE 03/10/2016	VIOLATION TIME 11:10:00	VIOLATION LOCATION NKSP-Facility A - RVR - MENTAL HEALTH		WITH STG NEXUS No

**CIRCUMSTANCES OF VIOLATION**

On 3/10/16 at 1110 while performing my duties as a Staff Psychologist in the capacity of On-Call Clinician, I was alerted to Inmate Jackson G08242 was in an individual holding cell in the A-Yard Gymnasium. He was wearing only boxer shorts and squatting in the cell. Through the course of the interview he made serious and credible threats against a Correctional Officer L. Smalley. As a result of these threats the Duty to Warn and Protect procedure (OP274) was utilized to notify appropriate staff, including Officer Smalley. The IP was informed of the limits of confidentiality.

I approached Mr. Jackson and asked him how he was doing, to which he replied, "I'm done with this shit, CO Smalley has weaponized this yard by writing up whatever the fuck he wants and I am not putting up with this shit anymore." IP stated he was going after Officer Smalley and was going to "take his fucking head off." When asked for clarification IP stated, "It don't fucking matter, it's gonna fucking happen." When again asked for details as to how this attack would happen he replied, "I don't know, a piece of plastic or something." When Mr. Jackson was reminded of the possible consequences such an action could bring he replied, "I don't care, I have to get off this yard and I just threatened staff."

Mr. Jackson was left in the individual holding cell while the interviewing clinician consulted with Custody and Mental Health Staff and then an attempt was made to reengage him in the clinical interview. On this second attempt Mr. Jackson stated, "I don't care, I can't deal with this anymore. It's gonna happen."

A consultation with the Chief of Mental Health was conducted and it was determined this incident was not due to Mental Health Issues and Mr. Jackson should not be sent to Alternative Housing for MHCBC placement. It was also determined this incident did qualify as viable threat of violence against a specified and Officer Smalley and therefore the Duty To Warn and Protect procedures would be initiated.

A Duty to Protect was initiated.

At 1120 the A-Yard Lieutenant R. Shaw was informed of the threat to the Officer Smalley.

At 1320 a message was left for the ISU Lieutenant Voicemail line requesting a call back to discuss this incident.

At 1328 Officer L. Smalley was informed of this incident via telephone.

A 128 Duty to Warn Chrono was generated and given to the A-Yard Captain C. Arce

REPORTING EMPLOYEE M. Girouard	TITLE Staff Psychologist	ASSIGNMENT Staff Psychologist	RDO F/S/S	DATE: 03/10/2016
-----------------------------------	--------------------------------	-------------------------------------	--------------	---------------------

RVR LOG NUMBER: 00000000002715	VIOLATED RULE NUMBER: 3005(d)(1)-[33]
SPECIFIC ACT: Threatening to cause SBI to a public official	

CLASSIFICATION
----------------

Soc - Falc  
A-H-21-A  
A-X-225  
4 231

**NORTH KERN STATE PRISON  
INVESTIGATIVE SERVICES UNIT**

**CASE REFERRAL TO DISTRICT ATTORNEY  
UNIT INVOLVED FACILITY A**

REPORT DATE	<u>3-10-16</u>	INMATE NAME	<u>JACKSON</u>
REPORT RECEIVED	<u>5-15-16</u>	INMATE NUMBER	<u>G08242</u>
INCIDENT NUMBER	<u>NKSP-FACA-16-03-0085</u>	115 LOG NUMBER	<u></u>
REFERENCE	<u>THREATENING A PEACE OFFICER</u>		

The above case was evaluated for referral to the District Attorney and the following decision was made:

- Referred to District Attorney on \_\_\_\_\_
- Referred to District Attorney on \_\_\_\_\_ however, the Kern County District Attorney's Office declined the case due to insufficient evidence and in the interest of justice.
- Upon further review, this incident does not meet the criteria for felony filing, handle administratively.

The above is pursuant to revision of the California Code of Regulations, Title 15, Section 3316, which allows discretionary referral of criminal cases.

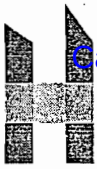
This is not a confidential document and may be shared with the involved inmate(s).

Any questions may be resolved via the Investigative Services Unit Lieutenant, at extension 5571 or the Court Liaison Officer, at extension 5576.

  
**S. SMITH**  
 Investigative Lieutenant  
 North Kern State Prison

6-1-16  
 Date

- |                       |                      |
|-----------------------|----------------------|
| cc: Warden            | C-File               |
| Chief Deputy Warden   | ISU File             |
| Unit Associate Warden | ISU Evidence Officer |
| Facility Captain      | Ad-Seg CCI           |
| Facility Lieutenant   | Inmate               |



# CALIFORNIA HEALTH CARE FACILITY

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION



## MEMORANDUM

Date: March 20, 2016

To: O. Ratliff  
Facility A Captain  
California Health Care Facility

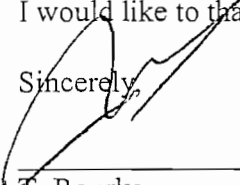
Subject: EXCEPTIONAL CIRCUMSTANCE-SUSPENSION OF TIME CONSTRAINTS NKSP: RVR #2715  
INMATE JACKSON (G08242)

Inmate JACKSON (G08242) has been reviewed for a Serious Rules Violation Report (RVR) received from North Kern State Prison (NKSP). This inmate came to the California Health Care Facility as a Mental Health Crisis Bed (MHCB) inmate. His placement into the Mental Health Crisis Bed and/or Department of State Hospitals is a significant Higher Level of Care for his mental health concerns. Due to his placement in a Higher Level of Care and Treatment above his Level of Care in which he was designated when he committed the offense documented in the RVR his Time Constraints are suspended. Upon his return to a Lower Level of Care (per CCR Section 3000) the Suspension of the Time Constraints in this RVR will be automatically reinstated.

California Code of Regulations (CCR) Title 15 Section 3000 defines Exceptional Circumstances in part as; Exceptional Circumstances means circumstances beyond the control of the department of the inmate that prevent the inmate or requested witnesses from participating in the disciplinary hearing within established time limitations. Examples of this as applied to an inmate would include a serious temporary mental or physical impairment verified in writing by a licensed clinical social worker, licensed psychologist, psychiatrist, or physician. Some examples of exceptional circumstances preventing staff witnesses, to include the reporting employee, from attending the disciplinary hearing would be extended sick leave, bereavement leave, personal emergency, or extended military duty. Exceptional circumstances, as described above, would allow for suspension of time limitations pending resolution of the instances.

I would like to thank you in advance for your consideration and assistance in this matter.

Sincerely,

  
\_\_\_\_\_  
T. Rourke  
Clinical Psychologist  
California Health Care Facility

**J. Rourke, Ph.D. Senior Psychologist, Specialist**

AIB  
1/26



CALIFORNIA DEPARTMENT of  
Corrections and Rehabilitation

## DISCIPLINARY HEARING RESULTS

Institution Name: North Kern State Prison	Facility: NKSP-Facility A	Log Number: 00000000002715
Inmate Name: JACKSON, PATRICK O.	CDC #: G08242	Bed Number: NKSP-A - A 005 2 - 204001U
TABE Score: 12.9	Mental Health LOC: CCCMS	DDP Designation: None

### DUE PROCESS

Rule Violation #: 3005(d)(1)-[33]	Specific Act: Threatening to cause SBI to a public official
Level: Serious	Offense Division: Division B
Violation Date: 03/10/2016	Violation Time: 11:10:00

#### Actions Taken

Date	Time	Type/Reason	Staff	Elapsed Days
03/10/2016	17:09:11	RVR Ready for Review by Supv.	M. Girouard	0
03/10/2016	18:13:44	RVR Approved by Supervisor	S. Copeland	0
03/11/2016	11:13:09	Notice of Pending Charges Sent to Rcds.	J. Dias	1
03/21/2016	21:07:17	Inmate Copy Served Initial Rules Violation Report	C. Bruns	11
03/21/2016	21:12:06	SA Assigned	C. Bruns	11
03/21/2016	21:14:56	Inmate Copy Served Staff Assistance Report	C. Bruns	11
03/23/2016	15:36:11	Hearing Postponed	K. Fields	13
03/31/2016	21:04:59	RVR Classified	D. Brown	21
04/10/2016	11:33:42	MH Assessment Requested	C. Gonzalez	31
04/18/2016	10:02:53	MH Assessment Received	C. Gonzalez	39
04/18/2016	10:03:19	Alternate SA Assigned	C. Gonzalez	39
04/18/2016	10:04:00	SA Assigned	D. Bolton	39

04/19/2016	12:30:00	IE Assigned	C. Gonzalez	40
04/19/2016	12:30:00	Inmate Copy Served MH Assessment Report	J. Diaz	40
04/25/2016	08:39:57	IE Report Prepared	C. Gonzalez	46
04/26/2016	11:30:12	IE Report Ready for Review	C. Gonzalez	47
04/26/2016	12:53:33	RVR Approved by Supervisor	J. Lamb	47
04/26/2016	12:59:57	IE Report Approved By Supervisor	J. Lamb	47
04/26/2016	13:15:21	Inmate Copy Served Investigative Report	J. Diaz	47
05/04/2016	09:30:00	Hearing Postponed	C. Garino	55
05/04/2016	13:14:04	Inmate Copy Served Incident Report	J. Diaz	55

All Time Constraints Met?: No

SHO/HO DDP Certified?: No

**Due Process Additional Information:**

The SHO notes on 03/13/2016 JACKSON was transferred to California Health Care Facility (CHCF) for Mental Health Crisis Bed placement. On 03/20/2016 CHCF Clinical Psychologist T. Rourke determined JACKSON's serious mental disorder prevented him from participating in the disciplinary hearing until released to a lower Level of Care (LOC). Therefore, pursuant to CCR, Title 15 Section 3320 (f) (5), the time constraints for this RVR were postponed by order of CHCF Clinical Psychologist T. Rourke. On 03/28/2016, JACKSON LOC was reduced to EOP and JACKSON was transferred to the California Men's Colony, from CHCF and found competent to participate in the disciplinary process per CHCF Clinical Psychologist T. Rourke and time constraints resumed. The SHO notes JACKSON received an initial copy of this RVR, on 03/21/2016. The SHO notes a due process error occurred as the RVR was not classified until 03/31/2016. The SHO notes based on the aforementioned information JACKSON did not receive a Classified copy of the RVR with 15 days of discovery. The SHO notes JACKSON arrived to the CMC on 03/28/2016 with a pending RVR. Due to the complexities of the RVR, in conjunction with missing and/or incomplete documentation required to facilitate a fair and impartial hearing time constraints were not met. The hearing was not held within thirty (30) days of service. The CMC did not receive a copy of the Crime/Incident Report Log # NKSP-FACA-16-03-0085 until 05/04/2016. Time constraints have not been met as described in CCR Section 3320.

**HEARING**

- Subject elected not to participate in the adjudication process by refusing to attend the hearing. An Informational Chrono was generated documenting the refusal to attend the hearing.
- Subject was Present, in good health and ready to proceed.

**Hearing Additional Information****DISABILITY**

- Hearing  Vision  Mobility  Learning  Developmental/Cognitive  Other
- None

Requires Accommodation?  No**DDP Specific Information**

128-C2 Reviewed?  Yes

128-C2 Date:  
03/10/2008

Did the Reporting Employee document the use of Adaptation Support(s)?  N/A

Adaptive Support	Contribute	How	
<input type="text"/>		<input type="text"/>	

Victimization	Contribute	How	
<input type="text"/>		<input type="text"/>	

**Disability Additional Information:**

**MENTAL HEALTH ASSESSMENT**

Mental Health Assessment Requested: Yes

Reason for Mental Health Assessment Request: MH LOC EOP or higher

Clinician Recommended Staff Assistance Assignment:  Yes

Clinician determined Mental Health Symptoms/Developmental Disability strongly influenced behavior:  No

**Clinician Rational:**

Based on the IP's interview, current custody, clinical records, and contact with the IP's CM, the IP's behavior was not influenced by symptoms of a mental illness or developmental disability/cognitive or adaptive functioning deficits that contributed to the RVR.

Clinician Staff recommended alternate manner of documentation:  No

**Clinician Rational:**

Based on the IP's interview, current custody, clinical records, and contact with the IP's CM, the IP's behavior was not influenced by symptoms of a mental illness or developmental disability/cognitive or adaptive functioning deficits such that the inmate would be better served by documenting this behavior in an alternate manner.

Clinician determined Mental Health Symptoms/Developmental Disability contributed to behavior:  No

**Clinician Rational:**

Based on the IP's interview, current custody, clinical records, and contact with the IP's CM, the IP's behavior was not influenced by a developmental disability/ cognitive or adaptive functioning deficits that should be considered in this RVR.

Clinician provided information when assessing the penalties:  Yes

**Clinician Rational:**

Sanctions for this RVR behavior are appropriate. It is recommended the IP's RVR be heard in a timely manner and his transfer/placement in a treatment/yard setting be expedited. He is likely to decompensate in the isolative environment of ASU.

**STAFF ASSISTANT**

Staff Assistant Assigned: Yes

Reason for assignment of Staff Assistant: MH Assessment Recommendation; MH LOC EOP or higher

SA Name	Date Assigned	Certified?	Meet 24 hours prior to hearing?	Present?
E. Briggs	03/21/2016	Yes	Yes	No
J. Diaz	04/18/2016	Yes	Yes	Yes

**Staff Assistant Additional Information:**

Correctional Officer E. Briggs was assigned as a Staff Assistant and met with JACKSON at least 24 hours prior to the hearing to assist him in comprehending the RVR and all pertinent documentation. On 03/28/2016 JACKSON was transferred to CMC. As such on 04/18/2016 Correctional Officer J. Diaz was assigned as an alternate Staff Assistant, with no objection by JACKSON, and conducted an interview at least twenty-four hours prior to the hearing to assist JACKSON in comprehending the RVR and all pertinent documentation, including the Investigative Employee (IE) report. Correctional Officer J. Diaz was present at the hearing and participated accordingly as described in CCR Title 15, Section 3318(b).

**INVESTIGATIVE EMPLOYEE**

Investigative Employee Assigned: Yes

Reason for assignment of Investigative Employee: Housing Status

**Investigative Employee Additional Information:**

**CONFIDENTIAL INFORMATION**

Confidential Information Used: No

Confidential Document Number	Author of Confidential Document	Date of Confidential Document	Reviewed by SHO/HO	Deemed Confidential	Reason(s) Information was Deemed Confidential
					<input type="checkbox"/> Information which, if known to inmates, would endanger the safety of person(s). <input type="checkbox"/> Information which, if known to inmates, would jeopardize the security of the institution. <input type="checkbox"/> Specific medical or Psychological information which, if known to inmates, would be medically or psychologically detrimental to the inmate. <input type="checkbox"/> Information provided and classified confidential by another governmental agency. <input type="checkbox"/> A Security Threat Group debrief report, reviewed and approved by the debriefing subject, for placement



in the confidential section of the central file.

Confidential Document Number	Confidential Source Number	Confidential Disclosure Form Issued	Sufficient Information Disclosed	Reason(s) Deemed Reliable
				<input type="checkbox"/> The confidential source has previously provided information which has proved to be true. <input type="checkbox"/> Other confidential sources have independently provided the same information. <input type="checkbox"/> The information provided by the confidential source is self-incriminating. <input type="checkbox"/> Part of the information provided by the confidential source is corroborated through investigation or by information provided by non-confidential sources. <input type="checkbox"/> The confidential source is the victim. <input type="checkbox"/> This source successfully completed a polygraph examination.

**Confidential Additional Information:**

**WITNESSES**

Witnesses requested at Hearing

- Reporting Employee     
  Staff Assistant     
  Investigative Employee  
 Other     
  Inmate     
  None

Non-Inmate Witness(es)			
Name	Rank	Type	Granted?
Questions Asked			

Inmate Witness(es)			
CDC#	Name	Bed	Granted?
Questions Asked			

**Witness Additional Information:**

**PLEA AND STATEMENT****PLEA/STATEMENT:** The above circumstances were read aloud to subject and elected to plea: 

- Subject declined to make a statement  
 Subject made a statement

**Comments:**

This is all retaliation for appeals and complaints that I brought against the Institution (NKSP). They all have teamed up against me. I never said any of that.

**FINDINGS**

Subject was found:  based on a preponderance of evidence.

Lesser Included Charge: 3005(d)(1)-[66]-Threatening Staff

Level:

Offense Division:

**Comments:**

The SHO has reviewed the documentation related to this offense and elects to find JACKSON Not GUILTY of violating California Code of Regulations (CCR), Section 3005 (d) (1) Conduct, specifically, "Threatening to cause SBI to a Public Official" a Division B Offense. However the SHO finds JACKSON GUILTY of the lesser, included and more appropriate charge of violating California Code of Regulations (CCR), Section 3005 (d) (1) Conduct, specifically, "Threatening Staff" a Division E Offense. The SHO finds based on the preponderance of evidence submitted at the hearing. The California Code of Regulations states; Inmates shall not willfully commit or assist another person in the commission of an assault or battery to any person or persons, nor attempt or threaten the use of force or violence upon another person.

**EVIDENCE**

The following evidence was used to support the findings:

**Comments:**

- a) The CDCR-115 RVR, authored by Staff Psychologist, M. Girouard, wherein it states; On 3/10/16 at 1110 while performing my duties as a Staff Psychologist in the capacity of On-Call Clinician, I was alerted to Inmate Jackson G08242 was in an individual holding cell in the A-Yard Gymnasium. He was wearing only boxer shorts and squatting in the cell. Through the course of the interview he made serious and credible threats against a Correctional Officer L. Smalley. As a result of these threats the Duty to Warn and Protect procedure (OP274) was utilized to notify appropriate staff, including Officer Smalley. The IP was informed of the limits of confidentiality.
- b) The CDCR-115 RVR, authored by Staff Psychologist, M. Girouard, wherein it states; I approached Mr. Jackson and asked him how he was doing, to which he replied, "I'm done with this shit, CO Smalley has weaponized this yard by writing up whatever the fuck he wants and I am not putting up with this shit anymore." IP stated he was going after Officer Smalley and was going to "take his fucking head off." When asked for clarification IP stated, "It don't fucking matter, it's gonna fucking happen." When again asked for details as to how this attack would happen he replied, "I don't know, a piece of plastic or something." When Mr. Jackson was reminded of the possible consequences such an action could bring he replied, "I don't care, I have to get off this yard and I just threatened staff."
- c) The CDCR-837C Crime/Incident Report authored by Correctional Officer L. Smalley, wherein it states; I rarely had any behavioral issues with inmate JACKSON and considered him to be a programming inmate with the exception of two different occurrences that warranted disciplinary action in the form of issuing two separate CDCR 115 disciplinary rule violation reports. Inmate JACKSON was very angry with my writing the two CDCR 115 disciplinary rule violation reports. After the issuance of the CCR disciplinary rule violation reports, his demeanor towards me changed and he became reclusive toward me and refused interaction with me during pill line and other daily activities that warranted communication with him. It should be noted that Inmate JACKSON was found guilty by the Facility A senior hearing officer of both violations.
- d) The Investigative Employee Report authored by Officer C. Clifford, wherein it states; On 4/19/2016, at 1230 hours, I interviewed Inmate JACKSON. Inmate JACKSON stated the following: It's all a lie. I was in ICC and they

put me on C Status to return to 4 Building with Officer Smally. I told ICC to call the Psyche because I didn't want to be housed where Officer Smalley was the building Officer and I have past history with that Officer, I have investigations on him.

**DISPOSITION**

Sanction Type	Quantity	Mitigated	Lack of Similar Discipline History	DDP	MH LOC	MH-A	Start Date	End Date
Credit Loss	0	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Confined to Quarters Days	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Confined to Quarters Weekends	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Disciplinary Detention	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Privilege Group C	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Loss of Pay								
Canteen Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Phone Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Extra Duty	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Yard Recreation Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Packages Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Property Restrictions	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Visiting Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Contact Visiting Privileges	0	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Trust Account Hold								
Mandatory Drug Testing								

IEX Control Suit

Impose Suspended Sanctions

Reinstate Suspended Sanctions

**Comments:**

Counseled and Reprimanded.

Referred to Classification Committee ICC

For  SHU Term Assessment  Program Review  Un-Assignment  Substance Abuse Treatment

**Disposition Additional Information:**

The SHO refers this case to ICC for review of appropriate program and housing needs and transfer consideration.

**ENEMY CONCERNS**

Subject states he does not have Enemy or Safety Concerns.

One or more of the inmates involved has stated there is lingering animosity towards one another. Therefore, the SHO has entered non-confidential separation alerts for the following inmates:

**SECURITY THREAT GROUP**

Security Threat Group Nexus?:  No

**Security Threat Group Nexus Additional Information:**

**FINAL SECTION**

**Additional Information:**

The SHO notes no record of completion of a staff threat assessment in JACKSON's ERMS.

**CREDIT RESTORATION**

Subject was advised of his right to restoration of credits under CCR 3327, 3328, and 3329.

Subject was advised Credit Forfeiture for a Division 'A', 'B' or 'C' offense will not be restored.

Subject was advised he would not be able to file for restoration of credits under CCR 3327(a)(4).

At the conclusion of the hearing Subject was advised of the findings, disposition, and his right to appeal per CCR 3084.1.

**Hearing Official**

C. Garino

TITLE:  
Lieutenant

DATE:  
06/02/2016

**FINDINGS (BY CDO)**

Subject was found:  Guilty of a Lesser Included Charge based on a preponderance of evidence.

Lesser Included Charge: 3005(d)(1)-[66]-Threatening Staff

Level:

Offense Division:

**Comments:**

**DISPOSITION (BY CDO)**

Sanction Type	Quantity	Mitigated	Lack of Similar Discipline History	DDP	MH LOC	MH-A	Start Date	End Date
Credit Loss	0	<input type="text" value="No"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Confined to Quarters Days	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Confined to Quarters Weekends	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Disciplinary Detention	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Privilege Group C	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Loss of Pay								
Canteen Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Phone Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Extra Duty	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Yard Recreation Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Packages Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Property Restrictions	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Visiting Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Contact Visiting Privileges	0	<input type="text" value="Yes"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Trust Account Hold								
Mandatory Drug								

Testing								
IEX Control Suit								

Impose Suspended Sanctions

Reinstate Suspended Sanctions

**Comments:**

**Chief Disciplinary Officer**

**Comments:**

D. McAlister



TITLE: DATE:  
06/07/2016

CDCR SOMS ISST126 - DISCIPLINARY HEARING RESULTS

<b>IAB USE ONLY</b>	Institution/Parole Region: <b>NKSP-X-16-01388</b>	Log #: <b>CMC-E 16-00817</b>	Category: <b>1</b>
<b>FOR STAFF USE ONLY</b>			

You may appeal any California Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations (CCR), Title 15, Section 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that led to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

**Appeal is subject to rejection if one row of text per line is exceeded. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.**

Name (Last, First): <b>JACKSON, PATRICK</b>	CDC Number: <b>G-08242</b>	Unit/Cell Number: <b>AD-SEG 4340</b>	Assignment: _____
--	-------------------------------	---	----------------------

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):  
**STAFF MISCONDUCT, INVAID DOCUMENT BEING ISSUE.**

**A. Explain your issue (If you need more space, use Section A of the CDCR 602-A):** **On 3-10-16; An RVR WAS WRITTEN AND SUBMITTED WITHOUT A WRITTEN SIGNATURE OF SGT. COPELAND. RVR# 0000000000002715**

**B. Action requested (If you need more space, use Section B of the CDCR 602-A):** **THIS DOC. IS INVAID, IT MUST BE EITHER DISMISSED OR RE-ISSUED WITH SGT. COPELAND'S SIGNATURE.**

**Supporting Documents: Refer to CCR 3084.3.**

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):  
**RIGHTS AND RESPONSIBILITY STATEMENT**

No, I have not attached any supporting documents. Reason: \_\_\_\_\_

Inmate/Parolee Signature: **[Signature]** Date Submitted: **4-3-16**

By placing my initials in this box, I waive my right to receive an interview.

>

**APR 04 2016**

Z  
CMC APPEALS OFFICE  
NKSP

**APR 13 2016**

L  
APPEALS  
NKSP

**APR 27 2016**

S  
APPEALS

S  
T  
A  
F  
F

**C. First Level - Staff Use Only** Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

Bypassed at the First Level of Review. Go to Section E.

Rejected (See attached letter for instruction) Date: **4/13/16** Date: **4/28/16** Date: \_\_\_\_\_ Date: \_\_\_\_\_

Cancelled (See attached letter) Date: \_\_\_\_\_

Accepted at the First Level of Review.

Assigned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Date Due: \_\_\_\_\_

First Level Responder: Complete a First Level response. Include Interviewer's name, title, interview date, location, and complete the section below.

Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with First Level response, complete Section D.

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date completed: \_\_\_\_\_  
(Print Name)

Reviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print Name)

Date received by AC: \_\_\_\_\_

**AC Use Only**  
Date received/delivered to appellant **1/1/16**

**EOP / 12.9**

D. If you are dissatisfied with the First Level response, explain the reason below, attach supporting documents and submit to the Appeals Coordinator for processing within 30 calendar days of receipt of response. If you need more space, use Section D of the CDCR 602-A.

*a Criteria wasn't met by the party or officer's procedure, this is why appellant is dissatisfied do to the fact officers per institution under the title 15 under liability this is an adverse inference to liability the officer that fail to produce me a valid documentation that wasn't valid and it don't pretaine to my knowledge which makes it an inference conclusion in which no signature's Sgt stamp was post*

Inmate/Parolee Signature: *X Pate J*

Date Submitted: *X 4-19-18*

E. Second Level - Staff Use Only

Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

- By-passed at Second Level of Review. Go to Section G.
- Rejected (See attached letter for instruction) Date: *APR - 7 2016* Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
- Cancelled (See attached letter)
- Accepted at the Second Level of Review

Assigned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Date Due: \_\_\_\_\_

Second Level Responder: Complete a Second Level response. If an interview at the Second Level is necessary, include interviewer's name and title, interview date and location, and complete the section below.

Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with Second Level response, complete Section F below.

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date completed: \_\_\_\_\_  
(Print Name)

Reviewer: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print Name)

Date received by AC: \_\_\_\_\_

AC Use Only  
Date mailed/delivered to appellant \_\_\_\_/\_\_\_\_/\_\_\_\_

F. If you are dissatisfied with the Second Level response, explain reason below; attach supporting documents and submit by mail for Third Level Review. It must be received within 30 calendar days of receipt of prior response. Mail to: Chief, Inmate Appeals Branch, Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001. If you need more space; use Section F of the CDCR 602-A.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Inmate/Parolee Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

G. Third Level - Staff Use Only

This appeal has been:

- Rejected (See attached letter for instruction) Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_
  - Cancelled (See attached letter) Date: \_\_\_\_\_
  - Accepted at the Third Level of Review. Your appeal issue is  Granted  Granted in Part  Denied  Other: \_\_\_\_\_
- See attached Third Level response.

Third Level Use Only  
Date mailed/delivered to appellant \_\_\_\_/\_\_\_\_/\_\_\_\_

H. Request to Withdraw Appeal: I request that this appeal be withdrawn from further review because; State reason. (If withdrawal is conditional, list conditions.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Inmate/Parolee Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Staff Name: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Thursday, April 07, 2016

JACKSON, G08242

B 004 2240001L

STAFF COMPLAINTS, , 04/04/2016

Log Number: CMC-E-16-00817

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents-are being returned to you for-the following reasons:

***Be advised that your appeal has been forwarded to another CDCR unit for processing.***

***Your appeal has been forwarded to NKSP as this is not a CMC issue. Any further correspondence regarding this issue must be sent directly to NKSP for further processing.***

- R. Webster, OT
- K. Cox, SSA (A)
- R. Ochoa, CCII
- J. Javaux, AGPA

Appeals Coordinator  
CMC

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

*Officers per institution under the title is under liability this is an adverse to liability the officer that fail to produce me a valid document with date signature this makes it an inference conclusion. also there's no appeals coordinators signature screened*

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

Wednesday, April 13, 2016

JACKSON, G08242

B 004 2240001L

California Men's Colony

DISCIPLINARY, , 04/13/2016

Log Number: NKSP-X-16-01388

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

*Your appeal has been rejected pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(b)(2). You have failed to demonstrate a material adverse effect upon your welfare. Material adverse effect means a harm or injury that is measurable or demonstrable, or the reasonable likelihood of such harm or injury. In either case, the harm or injury must be due to any policy, decision, action, condition, or omission by the department or its staff.*

*Your appeal has been received and logged wherein you claim you received an RVR missing a signature. Please explain how this has adversely affected you. In addition, you wrote the words "Staff Misconduct" on your appeal, however, you have not described any misconduct. You only note your RVR is missing a signature.*

*You cannot appeal your RVR until after your hearing and you receive your final copy. If you disagree with your RVR and want to appeal any due process issues or the penalties, you may. You must attach a completed copy of your RVR and all related documents including any CDCR 837 supplemental reports, medical reports, DA Referral, etc. Explain how your due process rights were violated. The appeal must be received in the appeals office within 30 of your receipt of your final copy.*

  
Appeals Coordinator  
NKSP

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

*inhere to exist as a permanent, inseparable or essential attribute  
UNDER THE DECLARATION OF HUMAN RIGHTS  
ARTICLE 8 AND ARTICLE 7 is to be intrinsic  
to something" SEE CONTINUATION Folio 602-A'*

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**



CALIFORNIA DEPARTMENT of  
Corrections and Rehabilitation

# ADMINISTRATIVE SEGREGATION UNIT PLACEMENT NOTICE

INSTITUTION NAME CMC-Central Service	INMATE'S NAME JACKSON, PATRICK O.	CDC NUMBER G08242
---	--------------------------------------	----------------------

### REASON(S) FOR PLACEMENT (PART A)

- PRESENTS AN IMMEDIATE THREAT TO THE SAFETY OF SELF OR OTHERS
- JEOPARDIZES INTEGRITY OF AN INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY
- ENDANGERS INSTITUTION SECURITY
- RETAINED IN ASU AS NO BED AVAILABLE IN GENERAL POPULATION

**DESCRIPTION OF CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT:**

On March 28, 2016, you arrived to California Men's Colony (CMC) from California Health Care Facility (CHCF)-MHCB as an EOP HUB case. You will remain in Administrative Segregation Unit (ASU) status due to the following circumstances:

Specifically, you were originally placed in ASU on March 10, 2016 for Threatening to Cause SBI to a Public Official (RVR Log # NKSP-2715). If found guilty of this RVR it may result in a possible SHU term. You have a maximum custody level and a security level: Level 4 (63). CMC does not meet your housing and programming needs.

Therefore, you will remain in ASU pending review by the Institutional Classification Committee (ICC) to determine your appropriate program and housing needs.

A review of ERMS / SOMS / DECS reflects the following information:

You have a reading TABE score of 12.9

Inmate does not require any assistive devices while housed in the Administrative Segregation Unit (ASU).

Inmate requires the following housing restrictions:

No restrictions noted  Lower Bunk  No Stairs  Ground Floor

IF CONFIDENTIAL INFORMATION USED, DATE INFORMATION DISCLOSED:

DATE OF ASU PLACEMENT 03/28/2016	SEGREGATION AUTHORITY'S PRINTED NAME Ernest Gregory	SIGNATURE E. Gregory	TITLE Lieutenant
-------------------------------------	--	-------------------------	---------------------

DATE NOTICE SERVED 3-28-16	TIME SERVED 1810	PRINTED NAME OF STAFF SERVING ASU PLACEMENT NOTICE H. Mera 2	SIGNATURE 	STAFF'S TITLE C10
-------------------------------	---------------------	---	---------------	----------------------

<input type="checkbox"/> INMATE REFUSED TO SIGN	INMATE SIGNATURE 	CDC NUMBER G08242
---	----------------------	----------------------

**You were identified with a disability of:**

- Hearing
- Vision
- Speech
- Learning Disability
- TABE under 4.0 / no TABE
- Developmental Disability
- CCCMS
- EOP



CALIFORNIA DEPARTMENT of  
Corrections and Rehabilitation

## CLASSIFICATION COMMITTEE CHRONO

<b>Inmate Name:</b> JACKSON, PATRICK O.	<b>Date:</b> 03/10/2016
<b>CDC#:</b> G08242	<b>Date of Birth:</b> 01/02/1979

<b>Hearing Date:</b> 03/10/2016	<b>Hearing Type:</b> Annual; Transfer; Credit Restoration
<b>Committee Type:</b> Institution Cls. Committee (UCC)	<b>Correctional Counselor:</b> E. Rosas

**STATIC CASE FACTORS**

---

**CRITICAL CASE FACTORS**

---

**CLINICIAN COMMENTS**

---

**COMMITTEE ACTION SUMMARY**

REFER TO CSR RX TX TO COR-IV/LAC-IV 270 (ADVERSE). RETAIN FAC A PX TX. PLACE ON C/C FOR 180 DAYS EFF: 3/10/16 TO 9/5/16. WG/PG A2/B EFF: 9/6/16. MED A AND A2/B THROUGH TRANSFER. CPP. RESTORE 90 DAYS FOC ON RVR DTD 11/21/14, LOG # FA1411016.

**COMMITTEE COMMENTS**

PATRICK JACKSON, G08242, made an appearance and was given his 72 hour notice for today's UCC for the purpose of an ANNUAL / TRANSFER / CREDIT RESTORATION. Subject is a participant of the Mental Health Services Delivery System (MHSD) at the CCCMS level of care and has a TABE score of 12.9.

Annual Review: This review covers 2 periods from 2-27-15 to 2-26-16. SOMS reclassification score sheet was completed to reflect (1) disciplinary free period and (1) satisfactory work periods resulting in a classification score change from 55 to 63. Subject has mandatory CLS of 19 due to VIO Determinant. Disciplinary overview this period: Fighting (1-29-16), Possession of I/M Manufactured Alcohol (11-5-15), & Pending RVR Willfully Delaying a PO (2-11-16), it will not impact placement. Next Annual Review: 2-27-17.

Program Review: Today's UCC notes Subject is being placed on C-status for 180 days based on Program Failure. Subject has received (2) two serious CDCR 115's within the last 180 days. Subject was found guilty of Possession of Inmate Manufactured Alcohol on 11-5-15 (120 FOC) and Fighting on 1-29-16 (61 FOC). Subject has been informed that he must remain disciplinary free while on C-status for a minimum of 30 days before he is eligible to request removal in writing to his assigned CCI.

Subject has requested restoration of 90 days FOC on RVR dated 11-21-14, Log # FA1411016 (Division D). He has remained disciplinary free for the required days as noted in CCR section 3328. Subject was advised that the Records office may adjust the total amount of days restored to ensure that Subject is not overdue for parole per CCR section 3327 and to comply with any required notification pursuant to PC 3058.6, 3058.8, and 3058.9.

Case Factors: Refer to NKSP Initial UCC dated 7-15-15 for entire case factors. All case factors remain the same with the exception of the Classification score and transfer recommendation. No history of Sex, Arson, Escape, or Computer Crimes noted. VIO: Affixed per UCC dated 5-6-08 based on I/O. Confidential: noted Offender Separation: noted. NVSS: N/A.

Custody was reviewed and MED A remains appropriate. Subject has 1 minor in-cell fight on 1-29-16. Continue double cell status based on no extensive history on in-cell violence or predatory behavior.

Refer case to CSR RX TX COR-IV/LAC-IV 270 (adverse) due to increase to level IV placement. Subject meets 270 housing design based on no precluding case factors. MED A and WG/PG A2/B through transfer. Subject requested to be transferred to COR based on personal preference.

Effective communication was achieved during the pre-committee interview using simple English spoken slowly and clearly. Subject was able to repeat in his own words his understanding of the issues presented to him and asked appropriate questions. Subject was issued PREA written materials.

**INMATE INVOLVEMENT IN HEARING**

Attendance: Present at Hearing	72 Hour Notice Waiver: No
Interpreter Name:	
Staff Assistant Name:	S/A Discharged Date:
Agrees with Recommendations: No	Informed of Appeal Rights: Yes

**Inmate Comments**

I do not agree with committee's decision. I want to speak with mental health.

**Effective Communication**

State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Wednesday, July 20, 2016

JACKSON, G08242

B 005 2028001L

DISCIPLINARY, , 07/19/2016

Log Number: SAC-O-16-02407

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

**RO Other**

***Inmate Jackson, this is a duplicate to Appeal SAC-O-16-02387 regarding the disposition of RVR # 2715.***

- C. Lacy, Appeals Coordinator
- J. Frederick, CCI
- J. Abernathy, Appeals Analyst
- C. Burnett, Appeals Coordinator
- E. Buchmiller, Office Technician

Appeals Coordinator

SAC

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---



---



---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

State of California  
CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals  
CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Thursday, July 07, 2016

JACKSON, G08242  
B 005 2028001L

DISCIPLINARY, , 07/05/2016  
Log Number: SAC-O-16-02407

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

*Your appeal has been rejected pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(b)(7). Your appeal is missing necessary supporting documents as established in CCR 3084.3. All documents must be legible (If necessary, you may obtain copy(ies) of requested documents by sending a request with a signed trust withdrawal form to your assigned counselor). Your appeal is missing:*

*Inmate JACKSON, A final copy of the RVR is required. Without it, this appeal will be regarded as either appealing something that has not yet happened or failing to provide the proper documents as evidence of something that has happened. You listed supporting documentation on the CDC 602, but none were attached upon receipt. Attach the complete adjudicated copy of your RVR and return the appeal to the NKSP Appeals Office*

- C. Lacy, Appeals Coordinator
- J. Frederick, CCI
- J. Abernathy, Appeals Analyst
- C. Burnett, Appeals Coordinator
- E. Buchmiller, Office Technician

Appeals Coordinator  
SAC

NOTE: If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

EXCEPTION IS NECESSARY. 7-14-16

FINAL COPY IS ATTACHED TO APPEAL FOR HEARING HELD AT CMC. THIS APPEAL IS FOR THE RVR

WRITTEN AT NKSP. COPY OF RVR FINAL COPY UNAVAILABLE.

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

IAB USE ONLY

Institution/Parole Region: \_\_\_\_\_ Log #: \_\_\_\_\_ Category: \_\_\_\_\_

SAL-0-16-2407 FOR STAFF USE ONLY

You may appeal any California Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, (CCR) Section 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First):

JACKSON, PATRICK

CDC Number:

6-08272

Unit/Cell Number:

B-5-228<sup>c</sup>

Assignment:

State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):

THE ENTIRE 115 HEARING WAS AN INVALID

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A): ACTION.  
THE MENTAL HEALTH ASSESSMENT WAS NOT SIGNED AND DELIVERED TO THE INMATE, AND HEARING WAS HELD W/ LARGED DOCUMENT.

B. Action requested (If you need more space, use Section B of the CDCR 602-A): I WANT ALL DISCIPLINARY ACTION INVOLVING #0000000000002715 COMPLETELY EXPUNGED FROM MY RECORD AND C-FILE.

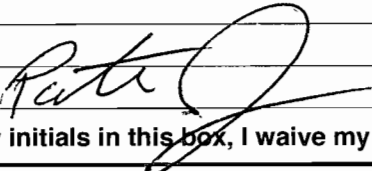
Supporting Documents: Refer to CCR 3084.3.

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):

SCREENED OUT APPEAL CMC-B-16-01527 AND UNSIGNED MENTAL HEALTH ASSESSMENT w/ DISCIPLINARY HEARING RESULTS None Attached 7/7/16 PK

No, I have not attached any supporting documents. Reason: \_\_\_\_\_

Inmate/Parolee Signature: 

Date Submitted: 4-5-16

By placing my initials in this box, I waive my right to receive an interview.

RECEIVED  
CSP-SAC APPEALS  
2016 JUL 19 AM 9:30  
RECEIVED  
CSP-SAC APPEALS

C. First Level - Staff Use Only

Staff - Check One: Is CDCR 602-A Attached?  Yes  No

This appeal has been:

- Bypassed at the First Level of Review. Go to Section E.
- Rejected (See attached letter for instruction) Date: 7/7/16 RD Date: \_\_\_\_\_ Date: \_\_\_\_\_
- Cancelled (See attached letter) Date: \_\_\_\_\_
- Accepted at the First Level of Review.

Assigned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Date Due: \_\_\_\_\_

First Level Responder: Complete a First Level response. Include Interviewer's name, title, interview date, location, and complete the section below.

Date of Interview: \_\_\_\_\_ Interview Location: \_\_\_\_\_

Your appeal issue is:  Granted  Granted in Part  Denied  Other: \_\_\_\_\_

See attached letter. If dissatisfied with First Level response, complete Section D.

Interviewer: \_\_\_\_\_ (Print Name) Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date completed: \_\_\_\_\_

Reviewer: \_\_\_\_\_ (Print Name) Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Date received by AC: \_\_\_\_\_

AC Use Only  
Date mailed/delivered to appellant \_\_\_\_ / \_\_\_\_ / \_\_\_\_

State of California  
CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Monday, June 20, 2016

JACKSON, G08242

B 005 2028001L

DISCIPLINARY, Division E, 06/08/2016

Log Number: CMC-E-16-01527

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

*Your appeal has been rejected pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(b)(8). Your appeal involves multiple issues that do not derive from a single event, or are not directly related and cannot be reasonably addressed in a single response due to this fact. You may resubmit the unrelated issues separately using separate appeals. Be advised that you are still subject to the submission of one non-emergency appeal every 14 calendar days.*

*Your appeal contains multiple issues. You will need to separate your issues. If you are attempting to appeal the disposition of a Rules Violation Report (RVR), you will be required to write a new appeal regarding one issue ONLY; attach a full final copy of the adjudicated of the RVR in question with all associated attachments if applicable. Be advised, the Appeals process is not intended to be a forum to introduce new evidence or factors that were discoverable at the time of the disciplinary hearing. Rather, the process is to ensure the appellant has been afforded all due process and administrative protections in the adjudication of the RVR. You must explain how you were not afforded your due process and administrative protections during the disciplinary hearing. Submit a CDCR 22 form to your assigned Correctional Counselor regarding attaining a completed and final copy of the RVR of issue. Note, attach a relevant documents related to this RVR to include an Incident Report if applicable. Additionally, if you are attempting to initiate the staff complaint process, you will be required to provide specific information to describe the alleged misconduct. Provide who, were, when and how staff violated departmental policy. Write a new separate appeal*

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---

---

---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**



State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

*regarding this issue only and submit the appeal to the Inmate Appeals Office for further review. Lastly, you are limited to submitting only one appeal every 14 days; you have exceeded the allowable number of appeals filed in a 14 calendar day period pursuant to CCR 3084.1(f). Appeal Log # SAC-P-16-2202 was reviewed and screened back to you on 6/17/16.*



R. Ochoa, CCI

J. Javaux, AGPA

G. Luz, OT

Appeals Coordinator

CMC

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---

---

---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Thursday, July 21, 2016

JACKSON, G08242

B 005 2028001L

DISCIPLINARY, Division E, 07/14/2016

Log Number: CMC-E-16-01527

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

*Your appeal has been rejected pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(b)(8). Your appeal involves multiple issues that do not derive from a single event, or are not directly related and cannot be reasonably addressed in a single response due to this fact. You may resubmit the unrelated issues separately using separate appeals. Be advised that you are still subject to the submission of one non-emergency appeal every 14 calendar days.*

*You were previously informed on 6/20/16 that your appeal contains multiple issues. You will need to separate your issues. Again, if you are attempting to appeal the disposition of a Rules Violation Report (RVR), you will be required to write a new appeal regarding one issue ONLY; attach a full final copy of the adjudicated of the RVR in question with all associated attachments if applicable. Be advised, the Appeals process is not intended to be a forum to introduce new evidence or factors that were discoverable at the time of the disciplinary hearing. Rather, the process is to ensure the appellant has been afforded all due process and administrative protections in the adjudication of the RVR. You must explain how you were not afforded your due process and administrative protections during the disciplinary hearing. Submit a CDCR 22 form to your assigned Correctional Counselor regarding attaining a completed and final copy of the RVR of issue. Note, attach a relevant documents related to this RVR to include an Incident Report if applicable. Additionally, if you are attempting to initiate the staff complaint process, you will be required to provide specific information to describe the alleged misconduct. Provide who, were, when and how staff violated departmental policy.*

NOTE: If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---

---

---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

State of California  
CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

---

---

*Write a new separate appeal regarding this issue only and submit the appeal to the Inmate Appeals Office for further review. Note, failure to follow provided instructions to remedy your appeal can potentially result in your appeal being cancelled pursuant to the California Code of Regulations, Title 15, Section (CCR) 3084.6(c)(3).*

- S. Aguilera, AGPA
- R. Ochoa, CCII
- J. Javaux, AGPA
- G. Luz, OT

Appeals Coordinator  
CMC

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---

---

---

---

---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

---

---

State of California  
CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

RE: Screening at the SECOND Level

Tuesday, July 05, 2016

JACKSON, G08242

B 005 2028001L

*FWD  
CMC-E*

DISCIPLINARY, Division B, 07/05/2016

Log Number: SAC-O-16-02387

**(Note: Log numbers are assigned to all appeals for tracking purposes. Your appeal is subject to cancellation for failure to correct noted deficiencies.)**

The enclosed documents are being returned to you for the following reasons:

***Be advised that your appeal has been forwarded to another CDCR unit for processing.***

***Your appeal is being forwarded to CMC-E***

- C. Lacy, Appeals Coordinator
  - J. Frederick, CCI
  - J. Abernathy, Appeals Analyst
  - C. Burnett, Appeals Coordinator
  - E. Buchmiller, Appeals Analyst (A)
- Appeals Coordinator  
SAC

**NOTE:** If you are required to respond/explain to this CDCR Form 695, use only the lines provided below.

---



---



---

Be advised that you cannot appeal a rejected appeal, but should take the corrective action necessary and resubmit the appeal within the timeframes specified in CCR 3084.6(a) and CCR 3084.8(b). Pursuant to CCR 3084.6(e), once an appeal has been cancelled, that appeal may not be resubmitted. However, a separate appeal can be filed on the cancellation decision. The original appeal may only be resubmitted if the appeal on the cancellation is granted.

**NOTE THIS CDCR 695 IS A PERMANENT APPEAL ATTACHMENT AND IS NOT TO BE REMOVED**

STATE OF CALIFORNIA  
 INMATE/PAROLEE APPEAL FORM ATTACHMENT  
 CDCR 602-A (REV. 03/12)

DEPARTMENT OF CORRECTIONS AND REHABILITATION

Side 1

IAB USE ONLY	Institution/Parole Region:	Log #:	Category: 1
CMC-E 18-01527 <small>FOR STAFF USE ONLY</small>			

Attach this form to the CDCR 602, only if more space is needed. Only one CDCR 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): JACKSON, PATRICK	CDC Number: 6-08242	Unit/Cell Number: A4-231	Assignment:
--------------------------------------	---------------------	--------------------------	-------------

A. Continuation of CDCR 602, Section A only (Explain your issue):  
 FIRST, SUPERVISOR DID NOT APPLY HIS "E-SIGNATURE" TO THE RVR ON THE DAY OF 3-10-16. I AM QUESTIONING THE CONSTITUTIONAL LEGITIMACY OF AN "E-SIGNATURE". THE HEARING SHOWED BIAS WHEN THE LT. CHOSE TO BELIEVE THE CLINICIAN'S STATEMENT OVER MINE, AND THE MENTAL HEALTH EVALUATION WAS NOT SIGNED AND WHEN THE HEARING TOOK PLACE, THE LT. PRODUCED MENTAL HEALTH EVALUATION WITH SIGNATURE THAT I WAS NOT SERVED, AN RVR IN JANUARY REQUIRED ME TO SERVE SIX MONTHS WITHOUT INCIDENT TO GET MY TIME BACK, THIS IS ILLEGITIMATE HEARING NEEDS TO BE DONE.

Inmate/Parolee Signature: *Patrick Jackson* Date Submitted: 6-2-16

B. Continuation of CDCR 602, Section B only (Action requested):  
 DISMISSED, REMOVED FROM MY C-FILE, AND EVERYONE HELD RESPONSIBLE FOR THE FALSIFIED DOCUMENTS PRODUCED.

Inmate/Parolee Signature: *Patrick Jackson* Date Submitted: 6-2-16

JUN 08 2016  
 CMC APPEALS OFFICE  
 JUL 14 2016  
 CMC APPEALS OFFICE  
 RECEIVED  
 CSP-SAC APPEALS  
 RECEIVED  
 CSP-SAC APPEALS  
 JUN 28 2016 10:29 AM  
 JUL -5 AM 9:17S