

STATEMENT OF FACTS

1. I have been at St. Brides Correctional Center since July 2021.

2. I drink alot of water every day in the form of coffee or drink mix. At least $\frac{1}{2}$ to 1 gallon a day.

3. I also cook meals and use the water to shower and brush my teeth.

4. I have started to realize that the water is causing me to itch and rash, light headedness and muscle pains. I have recieved muscle rub from medical and anti-itch cream but they continue to be ineffective at alleviating my symptoms.

5. I attempted to make the administration fix the water issue. I filed through the grievance procedure and they refused to acknowledge the issue.

6. I requested them to provide bottled water, change filters, and fix the corroding pipes. They refused to consider these remedies.

7. I would like the court to push for the previous stated remedies, but also getting up to date water testing and prisoner awareness of the issue.

8. I hope that this court will grant this petition and provide a lawyer to assist us with various legal issues.

Signature

STATEMENT OF FACTS

1. I have been here at St. Brides Correctional Center since 4/6/21.

2. I drink my daily liquid consumption which consist only on water and milk. However, I only drink milk 3 times a week, an 8 oz glass. I consume no other beverages than mentioned.

3. I use this water and only this water to cook with as well as my hygiene needs.

4. I have experienced pain in my abdomen as well as diahrrea.

5. These above issues have been brought to all the proper staff members attention here at St.Brides through the grievance procedure.

6. I requested fro all proper institutions pertaining to the water system. This includes filter, pipes, and ect.

7. None to this day have any testing results for the water has ever been presented to me in any way since I have been at St. Brides.

8. I humbly request these serious issues recieves further investigation and the courts grant my above stated requests.

9. On several occasions in October I wrote about pain. The dates are Oct. 14, Oct. 17 and others. I also wrote on a diahrrea complaint multiple times and I was given medication for the issue. Dr. Campbell seemed to believe it was because of the milk causing me to have this diarrhea issue and stated to me not to drink milk.

Signature

STATEMENT OF FACTS

1. I have been here at St. Brides Correctional Center since September, 2020. I drink the tap water here out of these spickets on a daily basis.

2. I perform all of my hygiene and washing laundry with the toxic water.

3. I taste and smell chemicals in the water and the taste can become overwhelming.

4. After I drink the water, I always get headaches, irregular heartbeats, cold sweats, light headedness and dizzy, with stomach cramping and irritable bowel syndrome along with body aches and pains.

5. I have medical records of where I have went to the medical department and seen the physician over my severe skin rashes and skin irritations or breakouts. They accumulate around my eye lids, webs of my fingers and on my hands.

6. The doctor has prescribed steroids and skin cream to me at least three separate occasions for my skin issue that has occurred immediately when the water started smelling wierdly.

7. I have exhausted all of my administrative remedies through the grievance procedure and no form of remediation has been offered or prepared.

8. The water treatment plant and Warden Watson are defendants in this case and are fully aware of harmful effects that the water is causing.

Signature

STATEMENT OF FACTS

Soon after arriving here at SBCC in January of 2021. I have started health issues that were new to me. I started having issues with unexplained headaches, dizziness and blurred vision. I have also experienced swelling in my legs and feet with rashes and discoloration from my knees down. I have always had oily skin and have never had any dry skin issues in my 20 plus years of incarceration until coming to SBCC. Recently I have had to have skin tags removed from my inner arms, armpit areas and my sides by and above my rib cage. I just had (7) skin tags/growths in June, (3) in May and some even before these, again no medical reasons why and where they are coming from. Again I never have experienced anything like these in my entire life before coming to SBCC. I know that something from within is causing these symptoms and more. I now have issues with the severe dry skin even causing my toe nails and finger nails to get real thin and split for no reason. Now that I have found out that issues here at SBCC with the high level of toxins and iron (etc), I believe this is what is causing these health issues and problems that I have never experienced before coming to SBCC. Medical says through testing that everything is showing to be normal and they cannot explain or accept that there is water issues here at SBCC. I feel that I have aged 10 years plus in the 2½ years that I have been at SBCC. This is why I put in for a transfer as soon as I was applicable. We as inmates deserve better water than we are forced to cook and bathe with daily. I am certain that being here at SBCC has taken years off of my already short time I have on this earth. Someone should be held accountable for what they are doing

to us to save themselves a dollar.

Signature

STATEMENT OF FACTS

1. I have been here at St. Brides Correctional Center since November 8, 2022.
2. I drink the water here every day and throughout the day.
3. I cook and perform hygiene duties with the water.
4. The water is causing me one or more of the following: headaches, migraines, body aches, diarrhea, severe skin rashes/irritations, cold sweats, irregular heart beats, bleeding, kidney abnormal digestions or irritable bowel syndrome, light headedness, dizziness, and other health conditions, etc.
5. I have exhausted all of my administrative remedies through the grievance procedure. The water treatment plant officials and warden Watson are the defendants liable in their official and individual capacities. They are fully aware of these issues.
6. I have requested remediation by changing all outdated water filters and installing brand new ones, and provide free of charge bottled water.
7. Supply all recent and up to date drinking water testing results and bring public awareness to all prisoners.
8. I pray that this court grant this petition and provide a lawyer so that we can obtain records that will require a subpoena and we do not have the authority to actuate further investigations.

Jawie Deffer

Signature

RECEIVED
JUN 30 2023
SBCC



VIRGINIA
DEPARTMENT OF CORRECTIONS

Regular Grievance 866_FI_10-20

GRIEVANCE OFFICE

Regular Grievance

Log Number: _____

Instructions for Filing:

- You must first attempt to resolve your issue through the informal complaint process prior to filing a *Regular Grievance*.
- You must attach the *Written Complaint* or other documentation used to satisfy the informal complaint process.
- Your grievance must be received within 30 days from the original incident or discovery of the incident, unless a more restrictive time limit applies.
- You must fill your *Regular Grievance* out completely and correctly
- You must explain your issue and how you were personally affected in the space provided, preferably in ink.
- You must avoid the reasons for rejection at intake; if your grievance is rejected you have 5 days to appeal the rejection.
- When multiple issues are submitted on the same grievance, you will only receive a response to the exact same issue addressed through the informal complaint process. All other issues will be forwarded to appropriate staff for investigation and resolution.

Offender Name (Last Name, First) Memboli Charles Offender Number 1116704 Housing Assignment 350-A68B

Individuals Involved in Incident: Charles E Memboli Date/ Time of Incident 6/28/23 7:30 pm

Results of the Informal Complaint Process (Select one of the below)

- Written Complaint* on this issue attached
- Other documentation used to satisfy the informal complaint process is attached
- Informal complaint process is not required for this issue

Explain Your Issue: (Provide a detailed explanation of the issue, your attempts to resolve the issue and how you were personally affected.)

I Drink nothing but water, and sometimes milk, nothing else. Sometimes I feel discomfort in my stomach, leaving me to believe the water here is not safe and contaminated. This is a serious issue that must immediately be address

Suggested Remedy: (Identify in the space provided below, the action you want taken)

Provide free bottle water, change all water filters, and provide public awareness to all offenders of the water test results, so we know what we are drinking. Please continue to test water regular.

Offender Signature Charles E Memboli Date 6/28/2023





VIRGINIA
DEPARTMENT OF CORRECTIONS

Regular Grievance 866_F1_10-20

Intake Decision: (Grievances must be accepted and logged into VACORIS unless returned for the following reason(s))

<input type="checkbox"/>	Non-Grievable: <input type="checkbox"/> Disciplinary hearing decisions, penalties and/or procedural errors <input type="checkbox"/> Regular Grievance Intake Decisions <input type="checkbox"/> Limitation Decisions <input type="checkbox"/> State and Federal laws, regulations, and court decisions <input type="checkbox"/> Policies, procedures, and decisions of other agencies <input type="checkbox"/> Issues yet to occur <input type="checkbox"/> Beyond the control of the Department of Corrections
<input type="checkbox"/>	Personally Affected: You must identify how the issue caused personal harm or loss to you, personally.
<input type="checkbox"/>	Limited: You have been limited by the Facility Unit Head, and this grievance is in excess of your limit.
<input type="checkbox"/>	Expired Filing Period: You must submit your grievance within 30 of the original incident or discovery of the incident unless the reason for delay was beyond your control, you have not been provided formal orientation, or a more restrictive time limit has been established to prevent loss of remedy or the issue becoming moot.
<input type="checkbox"/>	Repetitive: You submitted this issue previously on <i>Regular Grievance #</i>
<input type="checkbox"/>	Group Complaints or Petitions: You must submit a grievance on your own behalf; you cannot file a grievance with a group.
<input type="checkbox"/>	Photocopy/Carbon Copy: You did not submit the original grievance documents.
<input type="checkbox"/>	Informal Complaint Process: Your issue submitted on this grievance is not the same issue addressed in your <i>Written Complaint</i> or supporting documentation, or you failed to use the informal complaint process. You must first submit a <i>Written Complaint</i> on this issue.
<input type="checkbox"/>	Insufficient Information: (Not to include Medical, Sexual Abuse, and Sexual Assault). You must provide the following information within 5 days before the grievance can be processed: _____
<input checked="" type="checkbox"/>	Request for Services: <i>Medical-Submit a request for evaluation</i>

S. Sanders, Jr

6-30-23

Institutional Ombudsman Signature

Date

Appeal of Intake Decision

(If you disagree with the intake decision, you have 5 days from date of receipt to send an appeal of the intake decision to the Regional Ombudsman by submitting this grievance for further review.)

Regional Review of Intake Decision: The Regional Ombudsman's decision is final

<input type="checkbox"/>	The intake decision is being upheld in accordance with Operating Procedure 866.1, <i>Offender Grievance Procedure</i> .
<input type="checkbox"/>	The intake decision is being overturned and the grievance is being returned to the Facility Unit Head for response.
<input type="checkbox"/>	The intake decision is being returned to you because the 5-day time limit for review has been exceeded.

Regional Ombudsman Signature

Date

Withdrawal of Grievance:

I wish to voluntarily withdraw this grievance. I understand that by withdrawing this grievance, there will be no further action on this issue nor will I receive a response to this grievance. I understand that I may resubmit this same issue once and only once on a new *Regular Grievance* as long as the original 30-day time limit has not expired.

Offender Signature: _____

Date: _____

Staff Witness: _____

Date: _____





VIRGINIA
DEPARTMENT OF CORRECTIONS

RECEIVED
JUN 14 2023

Written Complaint 866_F3_6-21

Written Complaint
SBCC
GRIEVANCE OFFICE

Instructions for filing:

- You should first use the verbal complaint process and discuss your issue with staff before submitting this *Written Complaint*
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your *Written Complaint* form out completely and correctly
- Your *Written Complaint* must be received within 15 days of the original incident or discovery of the incident
- You are limited to only one issue per *Written Complaint*.
- You may file a *Regular Grievance* if you do not receive a response within 15 days.
- You are not required to submit a *Written Complaint* for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

RECEIVED
JUN 30 2023
SBCC
GRIEVANCE OFFICE

Charles Edward Memboli 1116704 350-A 69 B
 Offender Name Offender Number Housing Assignment
 Myself 6/12/23 1 7 AM
 Individuals Involved in Incident Date/ Time of Incident

TO: Water treatment plant
 (You must address your issue to institutional staff or an institutional department)

In the space provided explain your issue (be specific):

I Drink nothing but water, and sometimes milk. Nothing else. Some times I feel discomfort in my stomach, leaving me to believe the water here is not safe and contaminated. This is a serious issue that must immediately be address.

Offender Signature: C. Memboli Date: 6/12/23
 Offenders - Do Not Write Below This Line

Date Received: 6/14/23 Response Due: 6/29/23 Log Number: SBCC-23-INF-0093/
 Assigned to: WTP

Action Taken/Response:

The water meets ALL Virginia Department of Health standards and is safe to drink.

Chad D. Brown Respondent Signature
Chad Brown Treatment plant supervisor Printed Name and Title
6/26/23 Date

Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint, there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new *Written Complaint* as long as the original 15-day time limit has not expired.

Offender Signature: _____ Date: _____

Staff Witness: _____ Date: _____
 SBCC
 GRIEVANCE OFFICE

RECEIVED
JUN 28 2023



VIRGINIA

DEPARTMENT OF CORRECTIONS

Written Complaint 866_F3_6-21

GRIEVANCE OFFICE
Written Complaint

Instructions for filing:

- You should first use the verbal complaint process and discuss your issue with staff before submitting this *Written Complaint*.
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your *Written Complaint* form out completely and correctly
- Your *Written Complaint* must be received within 15 days of the original incident or discovery of the incident.
- You are limited to only one issue per *Written Complaint*.
- You may file a *Regular Grievance* if you do not receive a response within 15 days.
- You are not required to submit a *Written Complaint* for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

RECEIVED
JUN 13 2023
SBCC
GRIEVANCE OFFICE

Jamie "James" Desper 1204039 350A/66T
 Offender Name Offender Number Housing Assignment
 Water Treatment / Jamie Desper 6/11/23 9:50am
 Individuals Involved in Incident Date/ Time of Incident

TO: Water Treatment
(You must address your issue to institutional staff or an institutional department)

In the space provided explain your issue (be specific):

I have been made aware that there are very high levels of copper and lead in the water. It is not safe to be drinking it. It is affecting me. I have been having headaches, my stomach has been hurting and I have been feeling nauseous. I would like to be provided bottled water free of charge.

Offender Signature: Jamie Desper Date: 6/11/23
Offenders - Do Not Write Below This Line

Date Received: 6-5-23 Response Due: 6-2-23 Log Number: STRC-23-INF-10862

Assigned to: Mr. Brown, Wash Water

Action Taken/Response:

I am sorry to hear of your health issues. But the drinking water is safe to drink. We follow all guidelines that are set by the Virginia Department of Health.

Charles D. Brown Charles D. Brown WTP Supervisor 6/12/23
Respondent Signature Printed Name and Title Date

Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint, there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new *Written Complaint* as long as the original 15-day time limit has not expired.

Offender Signature: _____ Date: _____
Staff Witness: _____ Date: _____

RECEIVED
JUN 23 2023
SBCC



VIRGINIA

DEPARTMENT OF CORRECTIONS

JUN 16 2023

Regular Grievance 866_FI_10-20

GRIEVANCE OFFICE

Regular Grievance

Log Number: _____

Instructions for Filing:

- You must first attempt to resolve your issue through the informal complaint process prior to filing a *Regular Grievance*.
- You must attach the *Written Complaint* or other documentation used to satisfy the informal complaint process.
- Your grievance must be received within 30 days from the original incident or discovery of the incident, unless a more restrictive time limit applies.
- You must fill your *Regular Grievance* out completely and correctly
- You must explain your issue and how you were personally affected in the space provided, preferably in ink.
- You must avoid the reasons for rejection at intake; if your grievance is rejected you have 5 days to appeal the rejection.
- When multiple issues are submitted on the same grievance, you will only receive a response to the exact same issue addressed through the informal complaint process. All other issues will be forwarded to appropriate staff for investigation and resolution.

DeSoye, Jamie
Offender Name (Last Name, First)

1204039
Offender Number

350A/66T
Housing Assignment

Water Treatment
Individuals Involved in Incident:

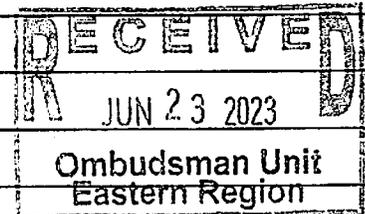
6/1/23 19:50 am
Date/Time of Incident

Results of the Informal Complaint Process (Select one of the below)

- Written Complaint* on this issue attached
- Other documentation used to satisfy the informal complaint process is attached
- Informal complaint process is not required for this issue

Explain Your Issue: (Provide a detailed explanation of the issue, your attempts to resolve the issue and how you were personally affected.)

I have been made aware that there are very high levels of copper, lead, and other toxins in the water. It is not safe to be drinking, showering and washing clothes in. It is affecting me. I have been having headaches, my stomach has been hurting, and I have been feeling nauseous. This does violate the Department of Health guidelines.



Suggested Remedy: (Identify in the space provided below, the action you want taken)

To be provided bottled water free of charge, change the filter in the water dispenser, and put filters in all sinks, shower heads and washing machines.

Jamie DeSoye
Offender Signature

6/15/23
Date





VIRGINIA
DEPARTMENT OF CORRECTIONS

Regular Grievance 866_FI_10-20

Intake Decision: (Grievances must be accepted and logged into VACORIS unless returned for the following reason(s))

<input type="checkbox"/>	Non-Grievable: <input type="checkbox"/> Disciplinary hearing decisions, penalties and/or procedural errors <input type="checkbox"/> Regular Grievance Intake Decisions <input type="checkbox"/> Limitation Decisions <input type="checkbox"/> State and Federal laws, regulations, and court decisions <input type="checkbox"/> Policies, procedures, and decisions of other agencies <input type="checkbox"/> Issues yet to occur <input type="checkbox"/> Beyond the control of the Department of Corrections
<input type="checkbox"/>	Personally Affected: You must identify how the issue caused personal harm or loss to you, personally.
<input type="checkbox"/>	Limited: You have been limited by the Facility Unit Head, and this grievance is in excess of your limit.
<input type="checkbox"/>	Expired Filing Period: You must submit your grievance within 30 of the original incident or discovery of the incident unless the reason for delay was beyond your control, you have not been provided formal orientation, or a more restrictive time limit has been established to prevent loss of remedy or the issue becoming moot.
<input type="checkbox"/>	Repetitive: You submitted this issue previously on <i>Regular Grievance #</i>
<input type="checkbox"/>	Group Complaints or Petitions: You must submit a grievance on your own behalf; you cannot file a grievance with a group.
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<input type="checkbox"/>	Insufficient Information: (Not to include Medical, Sexual Abuse, and Sexual Assault). You must provide the following information within 5 days before the grievance can be processed: _____
<input checked="" type="checkbox"/>	Request for Services: <i>Medical - Submit a request for evaluation</i> <i>S. Sanders, Jr</i> <i>6-16-23</i>

Institutional Ombudsman Signature

Date

Appeal of Intake Decision

(If you disagree with the intake decision, you have 5 days from date of receipt to send an appeal of the intake decision to the Regional Ombudsman by submitting this grievance for further review.)

Regional Review of Intake Decision: The Regional Ombudsman's decision is final

<input checked="" type="checkbox"/>	The intake decision is being upheld in accordance with Operating Procedure 866.1, <i>Offender Grievance Procedure</i> .
<input type="checkbox"/>	The intake decision is being overturned and the grievance is being returned to the Facility Unit Head for response.
<input type="checkbox"/>	The intake decision is being returned to you because the 5-day time limit for review has been exceeded.

Regional Ombudsman Signature

Date

Withdrawal of Grievance:

I wish to voluntarily withdraw this grievance. I understand that by withdrawing this grievance, there will be no further action on this issue nor will I receive a response to this grievance. I understand that I may resubmit this same issue once and only once on a new *Regular Grievance* as long as the original 30-day time limit has not expired.

Offender Signature: _____

Date: _____

Staff Witness: _____

Date: _____

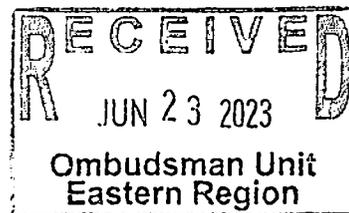


Dear Regional ombudsman,

I am appealing the intake decision because this is not a request for services. This is not a complaint about medical issues. It's about the issues that the toxic water is causing. Medical is not going to be able to help me if toxins are allowed to remain in the water. The date that the decision was made was 6/16/23, but I did not actually receive it until 6/20/23. Please return this grievance to the Facility unit head to be logged and for a decision. Thank you.

Sincerely,

Jamie Desper





VIRGINIA

DEPARTMENT OF CORRECTIONS

RECEIVED JUN 23 2023

SBCC

Regular Grievance 866_FI_10-20

GRIEVANCE OFFICE

Regular Grievance

Log Number: _____

for Filing:

- You must first attempt to resolve your issue through the informal complaint process prior to filing a *Regular Grievance*.
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- You must explain your issue and how you were personally affected in the space provided, preferably in ink.
- You must avoid the reasons for rejection at intake; if your grievance is rejected, you have 5 days to appeal the rejection.
- When multiple issues are submitted on the same grievance, you will only receive a response to the exact same issue addressed through the informal complaint process. All other issues will be forwarded to appropriate staff for investigation and resolution.

RECEIVED JUL - 3 2023 Ombudsman Unit Eastern Region

Ratcliffe, Matthew
Offender Name (Last Name, First)

1202148
Offender Number

350-A 65-B
Housing Assignment

Matthew Ratcliffe
Individuals Involved in Incident:

06/01/2023 9:00 am
Date/ Time of Incident

Results of the Informal Complaint Process (Select one of the below)

- Written Complaint* on this issue attached
- Other documentation used to satisfy the informal complaint process is attached
- Informal complaint process is not required for this issue

Explain Your Issue: (Provide a detailed explanation of the issue, your attempts to resolve the issue and how you were personally affected.)

I am aware of the test results of St. Brides drinking water. There are severely high levels of contaminants in our water that are not safe to drink or bathe with. There are several Health Code Violations that are consistent with pre-existing conditions. I have been to medical 3 times due to skin irritations/rashes from the water. I have experienced metallic taste and stomach cramps, body sweats, headaches, and body pains through out my body. please supply updated water results to me and provide health codes to be enforced in order to prevent future harm/risk. I'm worried about getting cancer and being chronically ill from years of drinking this water.

Suggested Remedy: (Identify in the space provided below, the action you want taken)

please enforce and abide by state health codes, change out all filters with new ones. provide up to date test results of our drinking water to all prisoners, supply free water bottles to all prisoners and bring self awareness of health issues.

Matthew Ratcliffe
Offender Signature

06/19/2023
Date



VIRGINIA
DEPARTMENT OF CORRECTIONS

Regular Grievance 866.FI_10-20

Intake Decision: (Grievances must be accepted and logged into VACORIS unless returned for the following reason(s))

<input type="checkbox"/>	Non-Grievable: <input type="checkbox"/> Disciplinary hearing decisions, penalties and/or procedural errors <input type="checkbox"/> Regular Grievance Intake Decisions <input type="checkbox"/> Limitation Decisions <input type="checkbox"/> State and Federal laws, regulations, and court decisions <input type="checkbox"/> Policies, procedures, and decisions of other agencies <input type="checkbox"/> Issues yet to occur <input type="checkbox"/> Beyond the control of the Department of Corrections
<input type="checkbox"/>	Personally Affected: You must identify how the issue caused personal harm or loss to you, personally.
<input type="checkbox"/>	Limited: You have been limited by the Facility Unit Head, and this grievance is in excess of your limit.
<input type="checkbox"/>	Expired Filing Period: You must submit your grievance within 30 of the original incident or discovery of the incident unless the reason for delay was beyond your control, you have not been provided formal orientation, or a more restrictive time limit has been established to prevent loss of remedy or the issue becoming moot.
<input type="checkbox"/>	Repetitive: You submitted this issue previously on <i>Regular Grievance #</i>
<input type="checkbox"/>	Group Complaints or Petitions: You must submit a grievance on your own behalf; you cannot file a grievance with a group.
<input type="checkbox"/>	Photocopy/Carbon Copy: You did not submit the original grievance documents.
<input type="checkbox"/>	Informal Complaint Process: Your issue submitted on this grievance is not the same issue addressed in your <i>Written Complaint</i> or supporting documentation, or you failed to use the informal complaint process. You must first submit a <i>Written Complaint</i> on this issue.
<input type="checkbox"/>	Insufficient Information: (Not to include Medical, Sexual Abuse, and Sexual Assault). You must provide the following information within 5 days before the grievance can be processed: _____
<input checked="" type="checkbox"/>	Request for Services: <i>Medical</i>

S. Sandberg, Jr. *6-23-23*
 Institutional Ombudsman Signature Date

Appeal of Intake Decision

(If you disagree with the intake decision, you have 5 days from date of receipt to send an appeal of the intake decision to the Regional Ombudsman by submitting this grievance for further review.)

Regional Review of Intake Decision: The Regional Ombudsman's decision is final

<input checked="" type="checkbox"/>	The intake decision is being upheld in accordance with Operating Procedure 866.1, <i>Offender Grievance Procedure</i> .
<input type="checkbox"/>	The intake decision is being overturned and the grievance is being returned to the Facility Unit Head for response.
<input type="checkbox"/>	The intake decision is being returned to you because the 5-day time limit for review has been exceeded.

K. Cosby *7-3-2023*
 Regional Ombudsman Signature Date

Withdrawal of Grievance:

I wish to voluntarily withdraw this grievance. I understand that by withdrawing this grievance, there will be no further action on this issue nor will I receive a response to this grievance. I understand that I may resubmit this same issue once and only once on a new *Regular Grievance* as long as the original 30-day time limit has not expired.

Offender Signature: _____ **Date:** _____
Staff Witness: _____ **Date:** _____



VIRGINIA DEPARTMENT OF CORRECTIONS

RECEIVED JUN 05 2023

Written Complaint 866_F3_6-21

GRIEVANCE OFFICE

Written Complaint

Instructions for filing:

- You should first use the verbal complaint process and discuss your issue with staff before submitting this *Written Complaint*.
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your *Written Complaint* form out completely and correctly.
- Your *Written Complaint* must be received within 15 days of the original incident or discovery of the incident.
- You are limited to only one issue per *Written Complaint*.
- You may file a *Regular Grievance* if you do not receive a response within 15 days.
- You are not required to submit a *Written Complaint* for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

RECEIVED JUN 23 2023 SBCC GRIEVANCE OFFICE

MATTHEW I. ROTELIFFE 1202148 350-A
 Offender Name Offender Number Housing Assignment
 Matthew I. Roteliffé 06/01/2023 9:00 am
 Individuals Involved in Incident Date/ Time of Incident

TO: Water Treatment plant
(You must address your issue to institutional staff or an institutional department)

In the space provided explain your issue (be specific):

I have ^{been} made aware of the very unsafe levels of Copper and lead in this drinking water. Will you please verify all of the toxic metals that you have revealed in the test results that you take. Please post warning signs in every dormitory about the health risk that are associated with these metals. Please provide awareness of this condition to all prisoners. Find a remedial option and provide water bottles that are safe to drink. I'm experiencing severe health concerns after drinking this water.

Offender Signature: Matt Roteliffé Date: 06/01/2023
 Offenders - Do Not Write Below This Line

Date Received: 6-5-23 Response Due: 6-20-23 Log Number: SBCC-23-INV-10864
 Assigned to: Mr. Brown

Action Taken/Response:

I am sorry to hear of your health issues. But the drinking water is safe to drink. We follow all guidelines that are set by the Virginia Department of Health.

Charles D. Brown Charles D. Brown Wtp Supervisor 6/12/23
 Respondent Signature Printed Name and Title Date

Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint, there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new *Written Complaint* as long as the original 30 day time limit has not expired.

Offender Signature: _____ Date: _____
 Staff Witness: _____ Date: _____
 Ombudsman Unit SBCC GRIEVANCE OFFICE

RECEIVED JUN 13 2023



VIRGINIA
DEPARTMENT OF CORRECTIONS

RECEIVED
JUN 14 2023

Written Complaint 866_F3_6-21

SBCC
Written Complaint

Instructions for filing:

- You should first use the verbal complaint process and discuss your issue with staff before submitting this *Written Complaint*.
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your *Written Complaint* form out completely and correctly
- Your *Written Complaint* must be received within 15 days of the original incident or discovery of the incident.
- You are limited to only one issue per *Written Complaint*.
- You may file a *Regular Grievance* if you do not receive a response within 15 days.
- You are not required to submit a *Written Complaint* for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

Jonathon Floyd #1496096 350 A, 63T
 Offender Name Offender Number Housing Assignment
 Jonathon Floyd #1496096 6-8-23 / 5:00 pm
 Individuals Involved in Incident Date/ Time of Incident

TO: Water treatment Plant
 (You must address your issue to institutional staff or an institutional department)

In the space provided explain your issue (be specific):

I have been here at SBCC since 2019 and I'm noticing the water quality has been degrading and sometimes taste rustic or metallic. I am experiencing headaches and severe fatigue. I'm becoming worried about my health. I only feel these symptoms after drinking this water. When was the water filter last replaced? please provide our drinking water test results.

Offender Signature: Jonathon Floyd Date: 6-8-23
 Offenders - Do Not Write Below This Line

Date Received: 6/14/23 Response Due: 6/29/23 Log Number: SBCC-23-BNF-00930
 Assigned to: WTP

Action Taken/Response:

The water meets all Virginia Department of Health standards and is safe to drink

Charles D Brown Charles D Brown Treatment plant supervisor 6/26/23
 Respondent Signature Printed Name and Title Date

Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new *Written Complaint* as long as the original 15-day time limit has not expired.

Offender Signature: _____ Date: _____

Staff Witness: _____ Date: _____

RECEIVED
JUN 28 2023



Virginia Department of Corrections

Grievance Receipt Report

DOC Location: STBCC St. Brides Correctional Center

Report generated by Sanders, S

Report run on 06/14/2023 at 02:28 PM

Grievance Number: STBCC-23-INF-00930

Next Action Date: 6/29/2023 12:00:00 AM

On this date:	06/14/2023	I have received a statement from:
Floyd, Jonathon J	1496096 of	St. Brides Correctional Center 350-A-63-T
<i>(Offender Name and DOC#)</i>		<i>(Filed Location and Housing)</i>
Setting out the following complaint:		
On 6/8/23 at 5:00 pm, inmate states "I have been here at SBCC since 2019 and I'm noticing the water quality has been degrading and sometimes taste rustic or metalle. I am experincing headaches and severe fatigue. Im becoming worried about my health. I only feel these symptoms after drinking this water. When was the water filter last replaced? please provide our drinking water test results."		
		
<i>(Signature)</i>		

Officer Initials: _____

CASE LAW

WASHINGTON v. UNITED STATES

The Plaintiff(s) in **WASHINGTON** experienced the same extremities as the plaintiff(s) are experiencing now. The proximate causation is the factor that the plaintiff(s) must use this unsafe water to drink from and perform hygienic obligations daily. The plaintiff(s) allege that the defendant(s) have breached their duty of care, whether in their individual capacities or their official capacities. The defendant(s) are liable under these provisions:

1. Allowing or causing dangerous pollutants and contaminants to exist in the water supply at St. Brides Correctional Center;
2. Failing to supply or provide an uncontaminated water supply or source;
3. Failing to conduct various due diligence with respect to monitoring the water supply especially for two (2) years from 2020-2022 during Covid-19; and
4. Failing to heed early warning signs about the contamination and withholding information about the contamination.

Plaintiff(s) allege that there were numerous events and warning signs that put defendant(s) on notice that hazardous chemicals contaminated the water at St. Brides Correctional Center. The Plaintiff(s) complaint challenges a sequence of events over periods of time of inattention and recklessness. Plaintiff(s) contend that defendant(s) have known about the contaminants in the water since 2004 when the first published story was in the New York Times Newspaper which was released on Wednesday, May 16th, 2012. The story was gathered by an advocacy organization by the name of Environmental Working Group, or ***E.W.G.***

The defendant(s) failed to properly monitor the water. Plaintiff(s) complaint details factual allegations. The Plaintiff(s) injuries are associated with St. Brides Correctional Center. The Medical Department holds all documented visits of the Plaintiff(s) claims. The injuries occurred while at St. Brides, *no pre-existing conditions* existed. These are detailed injuries that the Plaintiff(s) are suffering from extensively. The levels of these contaminants are unsafe and dangerous results do take effect on the human body. The supervision is inadequate and preventive measures are not being taken. The Plaintiff(s) give good show cause that the defendant(s) are responsible for their day to day livelihood. The Plaintiff(s) are being responsive and diligent with their health conditions.

The Court, if it pleases to do so, can subpoena any/all medical records for verification. Please take immediate action and grant this petition.

DECLARATION

I, Jamie Paul Desper, # 1204039 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since November 8, 2022. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, Jamie Paul Desper, # 1204039, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of ~~June~~ JULY 3, 2023, that I signed this affidavit and this declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street, Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.

Jamie Desper

DECLARATION

I, Jonathon Floyd, # 1496096 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since 11-9-19. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, Jonathon Floyd, # 1496096, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of ^{July} ~~June~~ 18th, 2023, that I signed this affidavit and this

declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street,
Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.



DECLARATION

I, CHARLES Momboli, # 1116714 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since 4-6-21. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, Charles E. Memboli, # 116704, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of July 18, 2023, that I signed this affidavit and this

declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street,
Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.

C. Memboli

DECLARATION

I, Algie Saunders, # 1434783 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since January 7, 2023. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, Algie Saunders, # 1434783, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of June 18th, 2023, that I signed this affidavit and this declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street, Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.



DECLARATION

I, John E. Smith-EI, # 1040488 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since January 14th 2020. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, John E. Smith-El, # 1040488, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of ~~June~~ ^{July} 18, 2023, that I signed this affidavit and this

declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street,
Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.

John E. Smith-El

DECLARATION

I, MATTHEW L. ROTCLIFFE, # 1202148 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since September 2020. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, MATTHEW L. ROTCLIFFE, # 1202148, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of June 18, 2023, that I signed this affidavit and this declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street, Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.

Matt Rotcliffe

DECLARATION

I, Cody Iverson, # 2051939 declare that I am the plaintiff in this action. I have been incarcerated here at St. Brides Correctional Center since July 2021. I further certify that I have personally been exposed to these toxic waters. I suffer from symptoms that are associated with these harmful and hazardous side effects. I swear that I do experience one or all of these conditions that cause severe discomfort and pain.

Furthermore, I have just become aware of these violations and I did exhaust all of the administrative remedies but no remediation was provided. The poisonous metals mentioned have been deliberately hidden and no warnings were ever given. There is eye witness testimony from prisoner's that work at the waste water treatment plant and employed officials that have stated that the drinking water here is not safe for human consumption. The test levels for copper and lead are highly above the accepted standards and therefore violates the rules and regulations for the Department of Health codes and further violates the Environmental Protection Agency.

I am deliberately being subjected to cruel and unusual punishment under the Eighth Amendment. I fear that future harmful effects will result from these toxic metals that I have been consuming since the above date. Please provide the relief requested.

AFFIDAVIT

I, Cody Lawson, # 2051434, do hereby swear under oath

and under the penalty of perjury that the foregoing is true and accurate to the best of my knowledge.

I further certify that on this day of July 18, 2023, that I signed this affidavit and this

declaration after I read these claims.

I sent a copy to the United States District Court, Eastern District of Virginia, 701 East Broad Street,
Suite 300, Richmond, Va. 23219-3528 by regular U.S. Mail.


Cody Lawson

STATEMENT OF FACTS

1. I have been here at St. Brides Correctional Center since November 8, 2022.
2. I drink the water here every day and throughout the day.
3. I cook and perform hygiene duties with the water.
4. The water is causing me one or more of the following: headaches, migraines, body aches, diarrhea, severe skin rashes/irritations, cold sweats, irregular heart beats, bleeding, kidney abnormal digestions or irritable bowel syndrome, light headedness, dizziness, and other health conditions, etc.
5. I have exhausted all of my administrative remedies through the grievance procedure. The water treatment plant officials and warden Watson are the defendants liable in their official and individual capacities. They are fully aware of these issues.
6. I have requested remediation by changing all outdated water filters and installing brand new ones, and provide free of charge bottled water.
7. Supply all recent and up to date drinking water testing results and bring public awareness to all prisoners.
8. I pray that this court grant this petition and provide a lawyer so that we can obtain records that will require a subpoena and we do not have the authority to actuate further investigations.

Jawie Deffer

Signature