

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION

JOSHUA JACKSON,)	
)	
Plaintiff,)	
)	
v.)	No. 1:23-cv-00428-JPH-KMB
)	
MAYS, et al.,)	
)	
Defendants.)	

**ORDER GRANTING IN PART AND DENYING IN PART DEFENDANTS'
MOTION FOR SUMMARY JUDGMENT**

Plaintiff Joshua Jackson, who is incarcerated by the Indiana Department of Correction ("IDOC"), alleges in this case that Defendants Drs. William Mays and Ellen Keris, and Nurse Practitioners Lindsay Manning and Celeste Jones subjected him to involuntary administration of the antipsychotic medication Haldol in violation of his Fourteenth Amendment rights and allowed him to suffer untreated side effects in violation of his Eighth Amendment rights. Mr. Jackson also alleges that these actions amounted to assault and battery in violation of Indiana law. Mr. Jackson dismissed his claims against NP Jones, dkt. 88, 89, and the remaining defendants have moved for summary judgment. Dkt. [109]. For the reasons below, the motion is **GRANTED in part and DENIED in part.**

**I.
Standard of Review**

A motion for summary judgment asks the Court to find that a trial is unnecessary because there is no genuine dispute as to any material fact and, instead, the movant is entitled to judgment as a matter of law. *See* Fed. R. Civ.

P. 56(a). When reviewing a motion for summary judgment, the Court views the record and draws all reasonable inferences from it in the light most favorable to the nonmoving party. *Khungar v. Access Cmty. Health Network*, 985 F.3d 565, 572–73 (7th Cir. 2021). It cannot weigh evidence or make credibility determinations on summary judgment because those tasks are left to the fact-finder. *Miller v. Gonzalez*, 761 F.3d 822, 827 (7th Cir. 2014). A court only has to consider the materials cited by the parties, *see* Fed. R. Civ. P. 56(c)(3); it need not "scour the record" for evidence that might be relevant. *Grant v. Trs. of Ind. Univ.*, 870 F.3d 562, 573–74 (7th Cir. 2017) (cleaned up).

A party seeking summary judgment must inform the district court of the basis for its motion and identify the record evidence it contends demonstrates the absence of a genuine issue of material fact. *Celotex Corp. v. Catrett*, 477 U.S. 317, 323 (1986).

Whether a party asserts that a fact is undisputed or genuinely disputed, the party must support the asserted fact by citing to particular parts of the record, including depositions, documents, or affidavits. Fed. R. Civ. P. 56(c)(1)(A). Failure to properly support a fact in opposition to a movant's factual assertion can result in the movant's fact being considered undisputed, and potentially in the grant of summary judgment. Fed. R. Civ. P. 56(e).

II. Factual Background

Because Defendants have moved for summary judgment under Rule 56(a), the Court views and recites the evidence in the light most favorable to the non-

moving party and draws all reasonable inferences in that party's favor. *Khungar*, 985 F.3d at 572–73.

A. Initial Administration of Haldol

On April 11, 2022, non-party Dr. Akilah Lamar saw Mr. Jackson after he had been placed on suicide watch earlier that morning. Dkt. 110-1 at 1–3 (Medical Records). He noted that Mr. Jackson was exhibiting aggression and agitation, shouting that the prison officers in his cell house had been trying to kill him and demanding to be sent to an outside hospital. *Id.* When Dr. Lamar told Mr. Jackson to submit a healthcare request form, Mr. Jackson stated that the medical staff had also been attempting to kill him. *Id.* Dr. Lamar noted that Mr. Jackson "appeared to be actively psychotic." *Id.* He spoke with the medical department and learned that Mr. Jackson had missed two or three doses of oral Risperdal (risperidone), which had been prescribed to treat Mr. Jackson's schizoaffective disorder. *Id.*

Psychiatrist Dr. Mays, who is a defendant, was informed that Mr. Jackson had not been compliant with his medication and determined that because Mr. Jackson's psychotic symptoms had returned, it was necessary to replace Risperdal with Haldol (haloperidol), another antipsychotic, administered involuntarily through monthly injection. *Id.* at 4–5. Mr. Jackson received a Haldol injection the next day. *Id.* at 7.

Mr. Jackson claimed the IDOC had fabricated his mental health diagnosis to keep him housed in mental health treatment units and to stop him from seeing a urologist. *Id.* Dr. Mays described Mr. Jackson as exhibiting pressured speech,

delusions, auditory hallucinations, and suicidal ideation, among other things. *Id.* at 9. Mr. Jackson saw mental health professional Aryana Moss ("MHP Moss") two days later, on April 14. *Id.* at 12–14. She noted that Mr. Jackson kept repeating "they're trying to kill me." *Id.* Mr. Jackson's suicide companion reported that Mr. Jackson had been pacing and talking to the door. *Id.* MHP Moss chose to keep Mr. Jackson on constant suicide watch. *Id.*

B. Release from Suicide Watch and Continued Administration of Haldol Over Mr. Jackson's Objections

The next day, Mr. Jackson saw Dr. Lamar, who noted that Mr. Jackson "appeared to be actively psychotic," though his behavior was "less erratic and excitatory than previous interaction[.]" *Id.* On April 18, Dr. Lamar noted that Mr. Jackson appeared more stable and released him from suicide watch. *Id.* at 19–20. Dr. Lamar saw Mr. Jackson for a follow-up appointment the next day and Mr. Jackson claimed that he did not need antipsychotic medication. *Id.* at 21–23.

On April 25, Dr. Lamar again met with Mr. Jackson, who "continued to discuss the need to be taken off of the Haldol shot due to reported compliance with Risperdal pill" despite his records showing that he had not been taking Risperdal as prescribed. *Id.* at 25. Dr. Jason Carter saw Mr. Jackson on April 29 and noted that Mr. Jackson had developed gynecomastia (enlarged breast tissue) likely because of taking Risperdal. *Id.* at 27–29. Because the medication had already been discontinued, Dr. Carter noted that the condition would improve. *Id.* at 28.

Defendant Nurse Practitioner Lindsay Manning saw Mr. Jackson on May 11, 2022, for medication management. *Id.* at 30–33. NP Manning continued Mr. Jackson's current dosage of Haldol, though she intended to determine whether an increased dose was appropriate depending on Mr. Jackson's presentation at his next appointment. *Id.* at 31. On May 16, Dr. Lamar met with Mr. Jackson and Mr. Jackson "expressed his frustrations with [involuntary medication] and maintained that he did not need it." *Id.* at 34–35.

C. Complaints of Side Effects

On May 23, 2022, Precious Onomuodeke, RN, noted that Mr. Jackson had threatened to assault him if he ever stopped at Mr. Jackson's cell door to pass medication. *Id.* at 36. Defendant NP Manning saw Mr. Jackson about two weeks later, on June 9. *Id.* at 37. NP Manning noted that Mr. Jackson was "very agitated, angry, argumentative, speech is loud, rapid and pressured, thoughts are disorganized." *Id.* at 37. Mr. Jackson claimed that he had not been receiving his blood pressure medication and was the victim of retaliation. *Id.* When asked about the report that he had threatened Nurse Onomuodeke, Mr. Jackson denied that the interaction had occurred. *Id.* Mr. Jackson claimed he was experiencing body pain, shaking, and nerve damage as a result of the antipsychotic medication. *Id.* NP Manning noted that she did not see any evidence of these symptoms but suggested prescribing Cogentin for these reported side effects. *Id.* at 38. She noted that Mr. Jackson was upset by this suggestion and not interested. *Id.*

NP Manning saw Mr. Jackson again on July 5 and August 26, 2022. *Id.* at 41–46. At both appointments, Mr. Jackson was noted to be agitated and argumentative. *Id.* NP Manning increased Mr. Jackson's Haldol dose to 100mg every four weeks "due to ongoing psychosis and agitation." *Id.* at 45. She noted that if Mr. Jackson's condition did not improve, a different antipsychotic medication would be considered. *Id.*

Mr. Jackson refused to attend his appointments with NP Manning on September 23 and October 7, 2022. *Id.* at 47–50. NP Manning told Mr. Jackson he could not refuse appointments or his medication. *Id.* at 49. When the director of nursing tried to escort Mr. Jackson to his appointment, he refused and responded combatively. *Id.*

On October 11, 2022, Mr. Jackson again attempted to refuse to see NP Manning, but was told that he could not refuse. *Id.* at 51. Mr. Jackson stood in the doorway and yelled at and over NP Manning. *Id.* When an officer directed Mr. Jackson to stop and listen, Mr. Jackson refused to speak or make eye contact for the rest of the appointment. *Id.*

NP Manning saw Mr. Jackson again on November 18, 2022. *Id.* at 54–56. Mr. Jackson stated that he was experiencing vomiting, headaches, and insomnia and asked to be switched back to oral medication. *Id.* at 54. When NP Manning asked if Mr. Jackson had submitted any healthcare request forms to see medical staff for his physical complaints, Mr. Jackson stated, "no, I don't associate with medical either." *Id.* NP Manning reminded Mr. Jackson that when he had previously been taken off involuntary injections and prescribed oral medication,

he did not take it as prescribed and his condition quickly got worse. *Id.* NP Manning suggested using a long-acting injectable antipsychotic, but Mr. Jackson declined, stating he only wanted oral medication. *Id.*

Mr. Jackson's next appointment with NP Manning was on December 16. *Id.* at 57–59. Mr. Jackson reported that he was "doing alright" and was scheduled to begin working six days a week in food services. *Id.* at 57. He claimed he needed to be removed from the antipsychotic medication because it would hinder his ability to work. *Id.* NP Manning noted that Mr. Jackson had not recently received conduct reports or issues and had recently completed the "Recovery While Incarcerated" sobriety program. *Id.* He presented as angry and irritable, however, and appeared offended when NP Manning asked if he had been having hallucinations. *Id.*

Mr. Jackson saw NP Manning about a month later, on January 13, 2023. *Id.* at 60. He told her that he was fired from his kitchen job after four days because his antipsychotic medication caused pain and involuntary shaking. *Id.* at 60. He again requested to be switched back to oral medication. *Id.* NP Manning noted that she had not observed any of Mr. Jackson's self-reported symptoms. *Id.* at 61. NP Manning determined to not change Mr. Jackson's medication because he had a history of not taking oral medications as prescribed, he was refusing to take his blood pressure medicine, he did not want to interact with medical staff, and because she did not observe adverse effects from the antipsychotic medication. *Id.* She wrote in her note for the appointment that they could try Vitamin E for Mr. Jackson's reported side effects. *Id.*

Mr. Jackson had appointments with NP Manning on February 17, March 10, April 5, May 19, and June 16, 2023. Dkt. 110-1 at 63–77. At each of these appointments, Mr. Jackson would sit silently and refuse to answer questions or otherwise participate. *Id.* NP Manning noted that although Mr. Jackson seemed to be annoyed, he also appeared stable. *Id.* at 75–76. As Mr. Jackson did not exhibit or report any adverse side effects at this time, NP Manning determined that there was no indication for change to his medication or dosage. *Id.* at 76.

D. Treatment Review Committee

On July 17, 2023, Mr. Jackson was transferred from Pendleton Correctional Facility to New Castle Correctional Facility. Dkt. 110-3. He saw NP Celeste Jones the next day for medication management, and she noted that Mr. Jackson was "highly argumentative and insistent he be removed from" involuntary medication." *Id.* at 79. Mr. Jackson filed a grievance against NP Jones for refusing to discontinue his antipsychotic medications about a week later, claiming that the medication was causing vomiting, headaches, stomachaches, body pains, overheating, and high blood pressure with "with fluttered heart beats." *Id.* Dkt. 110-2 at 1.

On September 11, 2023, the Treatment Review Committee ("TRC") held a hearing to determine whether Mr. Jackson should continue receiving Haldol involuntarily. *Id.* at 90–91. The TRC consisted of Dr. Keris, who was the Director of Behavioral Health, Dr. Mays, and another psychiatrist, non-party Dr. Martin. *Id.* The TRC's report stated that it was in Mr. Jackson's best interest to continue receiving Haldol because:

he has a long history of oral medication non-compliance, requesting frequent medication changes for various reasons, and noted subsequent decompensations leading to [restrictive housing unit] placement. He continues to have some impulsive behavior with the medication (struck a peer due to dislike of sex-offenders per his report) but is otherwise doing fairly well at NCCF so far.

Id. at 90. The TRC found that all three factors required for the administration of involuntary medication were present. *Id.* at 91.

Mr. Jackson appealed the TRC decision on September 15, 2023, stating, "I don't agree with being on antipsychotic medications[.] [I]t makes me ill[.] I will hold everybody that was at the hearing responsible for my health and sue them in District Court." *Id.* at 92. Medical Director Adrienne Bedford, MD, responded to Mr. Jackson's appeal, stating that Mr. Jackson "has a long mental health history. He also has an [*sic*] history of oral medication non-compliance. When he is not on his medications, he becomes psychotic with impulsive behavior and violence." *Id.* Dr. Bedford recommended upholding the involuntary administration of Haldol "with the reasonable goal of improving Mr. Jackson's understanding of his illness, participation in treatment[,], and violent behavior." *Id.*

E. Treatment of Side Effects

MHP Mary Heiman saw Mr. Jackson on November 8, 2023. *Id.* at 101–03. Mr. Jackson claimed to be experiencing diarrhea, high blood pressure, stiffness, body aches, shakes, headaches, and nausea because of the Haldol. *Id.* at 102. Because Mr. Jackson was now receptive to trying medication to manage these effects, NP Jones ordered Cogentin for six months. *Id.* Mr. Jackson saw NP Jones

again on November 30, 2023, and reported that he was still experiencing body pains and joint stiffness but had seen some improvement since starting Cogentin. Dkt. 110-1 at 106–09. Mr. Jackson and NP Jones agreed to increase his dosage. *Id.* On December 26, 2023, Mr. Jackson again requested an increase to his Cogentin as he continued to report body pain and joint stiffness. *Id.* at 113–14. NP Jones agreed, and Mr. Jackson's dosage was increased again. *Id.* at 115. When he saw NP Jones again on January 24, 2024, he reported that his mood was stable and his joint stiffness had resolved with the increased dose of Cogentin. *Id.* at 119.

III. Discussion

Mr. Jackson alleges that the involuntary administration of Haldol violated his due process rights and the failure to treat his side effects violated his Eighth Amendment rights. He also alleges that these acts constituted assault and battery under Indiana law.

A. Due Process

Prisoners have "a significant liberty interest in avoiding the unwanted administration of antipsychotic drugs under the Due Process Clause of the Fourteenth Amendment." *Washington v. Harper*, 494 U.S. 210, 221–22 (1990). Due process in this context requires the following:

First, "the state must find that medication is in the prisoner's medical interest (independent of institutional concerns)." *Second*, "the tribunal or panel that reviews a treating physician's decision to prescribe forced medication must exercise impartial and independent judgment, taking account of the inmate's best

interest." *Third*, "the prisoner must be able to argue capably before a review tribunal that he does not need forced medication."

Perry v. Sims, 990 F.3d 505, 512 (7th Cir. 2021) (quoting *Fuller v. Dillon*, 236 F.3d 876, 881 (7th Cir. 2001)).

Here, the designated evidence shows that Mr. Jackson was involuntarily administered Haldol injections from April 2022 through September 11, 2023, before any treatment review committee met and determined that he should be involuntarily administered Haldol. Dkt. 110-1 at 90–91. By then, Mr. Jackson had been subjected to involuntary administration of Haldol for more than a year. The defendants designate no evidence and submit no argument that the second or third due process requirements were met with respect to involuntary Haldol injections before September 11, 2023. Therefore, the defendants are not entitled to summary judgment on Mr. Jackson's due process claim based on treatment provided before the treatment review committee's decision in September of 2023. Because Mr. Jackson has designated no evidence to allow a conclusion that the treatment review committee process in September 2023 failed to comply with the due process requirements, the defendants are entitled to summary judgment on any claim based on treatment after this review.¹

B. Deliberate Indifference

¹ Mr. Jackson contends in his response to the motion for summary judgment that he was involuntarily administered anti-psychotic medications "from April of 2022 through July of 2025," dkt. 117 at 1, but his amended complaint is based on the involuntary administration of medication from "April of 2022 through November of 2023." Dkt. 70-1 at 8.

The Eighth Amendment's prohibition against cruel and unusual punishment imposes a duty on the states, through the Fourteenth Amendment, "to provide adequate medical care to incarcerated individuals." *Boyce v. Moore*, 314 F.3d 884, 889 (7th Cir. 2002) (citing *Estelle v. Gamble*, 429 U.S. 97, 103 (1976)). "Prison officials can be liable for violating the Eighth Amendment when they display deliberate indifference towards an objectively serious medical need." *Thomas v. Blackard*, 2 F.4th 716, 721–22 (7th Cir. 2021). "Thus, to prevail on a deliberate indifference claim, a plaintiff must show '(1) an objectively serious medical condition to which (2) a state official was deliberately, that is subjectively, indifferent.'" *Johnson v. Dominguez*, 5 F.4th 818, 824 (7th Cir. 2021) (quoting *Whiting v. Wexford Health Sources, Inc.*, 839 F.3d 658, 662 (7th Cir. 2016)).

First, defendants Dr. Mays and Dr. Keris argue that there is no evidence that they were aware that Mr. Jackson was experiencing side effects of Haldol. Indeed, there is no designated evidence indicating that Mr. Jackson told these defendants about the side effects. To be deliberately indifferent, a defendant must be aware of a substantial risk to a prisoner's health. *Thomas*, 2 F.4th at 721. Because there is no designated evidence to support an inference that defendants Dr. Keris and Dr. Mays were aware of Mr. Jackson's complaints, they are entitled to summary judgment on this claim.

NP Manning does not argue that she was unaware that Mr. Jackson was experiencing side effects. Instead, she suggests there is no evidence that he experienced the symptoms he claims to have suffered, stating that the record

"can neither confirm nor deny this allegation." Dkt. 111 at 16. But Mr. Jackson affirms that he experienced myriad side effects from Haldol, including blurred vision, constipation, diarrhea, dizziness, headaches, hypertension, loss of appetite, nausea and "flutter heartbeats." Dkt. 117 at 1. And the medical records reflect that Mr. Jackson complained to NP Manning about body pain, shaking, nerve damage, vomiting, headaches and nausea because of the antipsychotic medication, dkt. 110-1 at 37, 54–56.

Citing *Perry v. Sims*, 990 F.3d 505, 511 (7th Cir. 2021), NP Manning argues that the side effects of Haldol do not constitute an excessive risk to a person's health. But *Perry* addressed only the side effects of muscle tightening and locking up, so its holding that those conditions were not excessive risks is limited to those specific conditions. *Id.* The Court did not address whether additional side effects that Mr. Jackson experienced here, such as blurred vision, constipation, diarrhea, headaches, vomiting, and hypertension, among other things, would not satisfy the first element of a deliberate indifference claim. And NP Manning has not shown that these other side effects are not serious conditions that require medical treatment. NP Manning is therefore not entitled to summary judgment on this basis.

NP Manning further argues that she was not deliberately indifferent to the side effects Mr. Jackson experienced because Mr. Jackson complained of Haldol side effects only twice – in June of 2022, when she offered him Cogentin and he declined, and then again in November of 2023, when another provider prescribed Cogentin. Dkt. 110-1 at 38, 101–03. NP Manning argues that from this

designated evidence, it's clear that Mr. Jackson refused her offer of Cogentin but once he "became receptive to the idea, he was immediately provided Cogentin." Dkt. 111 at 17. But that description omits designated evidence that Mr. Jackson also complained to NP Manning November 18, 2022, and NP Manning asked Mr. Jackson if he had submitted any healthcare request forms and he stated that he had not. *Id.* at 54–56. She also suggested a longer-acting medication, which he declined. *Id.* He complained to her again on January 13, 2023. *Id.* at 60. At that time, she wrote in her treatment note that they could try Vitamin E if he was willing, but there is no evidence that she made this suggestion to him. *Id.* NP Manning does not designate evidence or argue that suggesting a longer-acting medication or noting that Vitamin E might be considered if Mr. Jackson continued to complain of side effects was not deliberately indifferent to Mr. Jackson's complaints. She is therefore not entitled to summary judgment on Mr. Jackson's Eighth Amendment claim.

C. Assault and Battery

Finally, the defendants seek summary judgment on Mr. Jackson's assault and battery claims. Under Indiana law, "[a]n actor is subject to liability to another for battery if (a) he acts intending to cause a harmful or offensive contact with the person of the other or a third person, or an imminent apprehension of such a contact, and (b) a harmful contact with the person of the other directly or indirectly results." *Mullins v. Parkview Hosp., Inc.*, 865 N.E.2d 608, 610 (Ind. 2007) (citing Restatement (Second) of Torts § 13 (1965)). "[A]ssault, unlike battery, is effectuated when one acts intending to cause a harmful or offensive

contact with the person of the other or an imminent apprehension of such contact." *Cullison v. Medley*, 570 N.E.2d 27, 30 (Ind. 1991) (citing Restatement (Second) of Torts § 21 (1965)).

The designated evidence reflects that the defendants consistently and thoroughly evaluated Mr. Jackson's condition and determined that the involuntary provision of Haldol was necessary to treat him based on his symptoms and failure to comply with oral medication. These facts, even considered in the light most favorable to Mr. Jackson, would not allow a jury to conclude that the defendants intended to cause a harmful contact with Mr. Jackson, an element required to establish both an assault and a battery claim. The defendants are therefore entitled to summary judgment on these claims.

IV. Conclusion

The defendants' motion for summary judgment, dkt. [109], is **granted in part and denied in part**. The motion is granted as to Mr. Jackson's due process claim based on treatment provided *after* the treatment review committee's decision in September of 2023, the Eighth Amendment claims against Dr. Keris and Dr. Mays, and as to Mr. Jackson's state law assault and battery claims against all defendants. The motion is denied as to Mr. Jackson's due process claim based on treatment provided *before* the treatment review committee's decision in September of 2023 and his Eighth Amendment deliberate indifference claim against NP Manning.

Mr. Jackson has filed a motion for court assistance in which he contends that counsel for the defendants contacted his current medical providers to have

them ensure he is currently receiving antipsychotic medication. He asks the Court to investigate these actions because it will otherwise be impossible for him to prove his claims. That motion, dkt. [119], is **denied** because the Court does not conduct independent investigations and because any actions taken recently at Mr. Jackson's current facility are not part of the claims in this case.

Finally, the Court reconsiders the denial of Mr. Jackson's motion to appoint counsel. That motion, dkt. [71], is now **granted**. The Court will attempt to recruit counsel to represent Mr. Jackson for the remainder of this case. He will be notified when this step has been taken.

SO ORDERED.

Date: 4/27/2026



James Patrick Hanlon
United States District Judge
Southern District of Indiana

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