

December 19, 2023

Dear Ms. Knopf,

Thank you for the opportunity to respond to the statements you have heard from former employees related to Brynn Marr Hospital (BMH). From BMH's own attempt to review the allegations you have received, we strongly believe they are unfounded and many are likely outright false. As I'm sure you can understand, it is difficult to provide you with the most complete and helpful information about your questions without knowing all of the particulars about the anonymous former employees you have spoken to that would allow us to help you evaluate their credibility and the accuracy of the information you have been given. Nor can BMH speak about individual patients or patient incidents for a variety of reasons, including respecting patient privacy and complying with applicable law. We do not think extrapolating conclusions about BMH based on the out-of-context statements of a handful of former employees is fair to the thousands of hard-working staff members and clinicians who work in the challenging behavioral health care environment, or to the thousands of patients who have received good care from BMH without incident. BMH is deeply committed to its responsibility of providing a safe environment for the patients under our care and the staff who care for them, and we take all grievances (whether from patients, families and/or employees) very seriously.

Brynn Marr Hospital is fully accredited by The Joint Commission, certified by the Centers for Medicaid and Medicare Services, licensed in good standing by the State of North Carolina and a valued behavioral health care provider in our community. We are committed to providing a safe environment for our staff, patients and families. Our highest priority is providing the best possible care and treatment to our patients in a safe and therapeutic environment.

Our staff are trained to maintain professionalism and service excellence for all patients regardless of financial status or payor source. BMH adheres to all Emergency Medical Treatment and Active Labor Act (EMTALA) laws which means that we provide the required stabilization of any patient in accordance with EMTALA regardless of financial status or reimbursement considerations. BMH regularly trains employees to ensure they understand and implement our clinical admission criteria and policies, as well as comply with BMH's EMTALA obligations.

With respect to staffing levels, BMH complies with applicable state rules and regulations and clinical standards. To ensure that our facility is not "under-staffed" and is providing the best possible care in the safest environment, BMH frequently adjusts to the needs of patients and staff alike. That includes both augmenting staff levels and capping new patient admissions to align with existing staffing levels.

Your questions refer to the number of calls to law enforcement regarding reported incidents at BMH. Those numbers are misleading and without proper context. As previously shared, Brynn Marr Hospital complies with all state and local requirements for contacting law enforcement if an allegation of abuse is made by a patient or a family member. It is the facility's legal obligation to do so in order for an investigation to occur. It is the role of law enforcement to assist with the

investigation to determine its validity. These calls are made in order to ensure that patient safety is maintained. Many of the allegations turn out to be unsubstantiated. As such, merely pointing to the number of calls is not indicative of quality at the facility based upon the patient population and legal requirements for reporting.

A review of police calls over the past year indicate that the facility only generated 5 calls for assistance.

While even one allegation such as this is too many for our standards, we are proud of our staff and efforts made to reduce the incidence of negative behaviors and will work to even further reduce these counts and maintain a strong working relationship with local law enforcement officials.

Below, we have set forth to provide additional clarifications and context to the allegations provided.

Allegations of Assault

In regard to the state investigation of a limited number of unfortunate incidents in November 2022, we cooperated fully with investigators, have developed and have implemented a corrective action plan and are in compliance with their recommendations. As part of that corrective action plan, we have made changes to our processes. We are pleased to report that a March 2023 survey by the State of North Carolina found BMH to be in compliance with all reporting requirements as well as with the maintenance of investigative summaries, thus concluding their sexual abuse allegation investigations.

As for other incidents mentioned, BMH was not able to substantiate the allegations raised. For example, we have no confirmed reports of young children or teenage girls being assaulted on the boy's unit.

Lastly, the facility mitigates incidents of employee injury as set forth in the Workplace Violence Prevention Plan that meets or exceeds industry standards and best practices relative to workplace violence. It is important to note that we did not find any incident reports or any workers' compensation claims regarding a nurse being assaulted and losing her two front teeth.

Alleged Documentation Violations

We strongly deny that "it was common practice at Brynn Marr for staff to falsify information on patients' charts, stretch the truth about patients' conditions or backdate vital signs, visual checks and signatures on reports." Staff are trained, and are expected to follow, our BMH documentation policies, which were developed to meet all federal, state and local regulatory requirements. Many clinical staff also must comply with the requirements of their individual licenses, which likewise require appropriate and accurate documenting of patient care. When there are isolated situations discovered where staff are not following required documentation practices, appropriate corrective action is taken.

BMH categorically denies the accusations that any instruction was given to falsely document a patient's condition or fail to chart improving conditions solely to extend a patient's length of stay. Those allegations are false. Efforts have been made to instruct staff and clinicians to chart more specifically and with greater detail in order to better reflect the patient's condition and to assist with charting reviews. At no time was any instruction ever given to "chart to the negative." All entries in a patient's medical record are to be accurate and fulsome.

Alleged Failures in Supporting Staffing

We value our staff and take their safety and wellbeing and concerns very seriously. We acknowledge, as with many others in the healthcare industry, high turnover is one of BMH's challenges. However, we are actively working to enhance our recruitment and retention strategies.

As previously mentioned, the hospital limits its census to fit current staffing levels. Further, at BMH, staff schedules purposely build in time to allow staff members to take their breaks without leaving units short-staffed. Support staff also regularly assist with providing staff breaks as needed.

We support staff with appropriate training to meet regulatory requirements and ensure proficiency in the hospital's numerous interventions. Since early 2023, certified Crisis Prevention Institute (CPI) trainers were brought to the facility to re-train the direct care staff on why and how to apply safety interventions as well as disengagement techniques, regardless of the time lapsed since their last training. Also, specialty instructors have trained staff (including those going through new-hire orientation) on advanced techniques in verbal de-escalation and interventions effective with chronically aggressive patients. CPI training is required for all direct care upon their hire and then every 6 months thereafter.

Alleged Failure to Provide Agreed-Upon Treatment

BMH is committed to providing the agreed-upon services for every patient. Patient treatment teams may include licensed physicians, psychiatric nurse practitioners, physician assistants, registered nurses, mental health technicians, recreational therapists and acute clinicians. The patient's designated team meets regularly to discuss his/her treatment planning, progress towards treatment goals and response to treatment.

Treatment may include daily visits with a physician and psycho-educational, nursing, process and recreational group sessions, as well as medication, as prescribed by a physician.

Parents are kept informed about their child's care by members of the treatment team. Notably, our policy includes having the child's physician contact parents with daily updates.

Therapy

We dispute the allegations about the quality or absence of our treatment programming and interventions. Patients at BMH are admitted for the shortest possible time to stabilize their condition and allow them to be discharged to receive longer term therapy and other treatment

in a community setting. But while at BMH, patients have regularly scheduled group therapy, the schedule for which may need to vary to meet the needs of the patients and staff on a particular unit; this is not unusual. If a group session was missed, alternative groups are offered the same day, just at a later time period. To ensure weekend groups are conducted, PRN clinicians are scheduled to come to the facility and provide process groups. Recreation Therapy and Nursing Groups are provided on a daily basis.

Psychiatrist visits are conducted seven days per week, while a medical provider visit is also offered daily to care for any other medical issues that may require attention.

Medication

As mentioned previously, every new patient undergoes a psychiatric evaluation performed by a licensed and credentialed psychiatrist within 24 hours of admission. Based on those results, the psychiatrist determines if medication will be part of their treatment. The goal of the medication is to assist the patient in stabilizing, so that they can fully participate in programming and achieve the best possible therapeutic outcome. These decisions are made solely by the treating psychiatrist in consultation with the patient and their family.

All medications are prescribed by a licensed provider authorized to do so. Further, all patient-facing/clinical staff are trained on recognizing early signs and symptoms of potential adverse drug reactions.

There have been a few cases, where out of an abundance of caution, BMH has elected to send patients to an Emergency Department for further evaluation when patients may be exhibiting signs and symptoms of adverse drug reactions.

In the past year, The Joint Commission and the State Division of Health Services Regulation have reviewed our medical records on unannounced surveys and never cited our physicians for inappropriate medicating of patients.

Restrictive Practices

Use of physical restraints, chemical restraints and seclusion are restrictive interventions allowed under certain circumstances related to the safety of the patient and staff. BMH fully complies with all regulations related to restrictive practices, including those issued by the Centers for Medicaid and Medicare Services (CMS). Additionally, BMH has strict policies in place regarding their use, and continues to make concerted efforts to further reduce the use of restraints and seclusions where possible. The allegations that BMH “staff would use alternative methods of secluding younger patients that didn’t involve the room dedicated for seclusion purposes” is unfounded.

A “turtle suit” is a banned (and highly disrespectful) term for our “safety smock,” a garment typically used as a first step to keep highly suicidal patients safe. Further interventions most often included increased 1:1 sessions with the clinician, heightened observation as well as

implementation of other suicide precautions - all important and necessary measures aimed at keeping these vulnerable patients safe.

After each incident of suicidal behavior, the therapeutic responses and interventions discussed and implemented by the multidisciplinary treatment team are documented in the patient's medical record.

In summary, every day we do our very best to live up to the high standards we set for ourselves, including providing our patients and staff the resources they need to be successful. We are proud of the positive clinical outcomes we have been able to achieve in this past year and plan to continue to build upon in years ahead.