

Complaint to Allen Twig - Meritus Health Center

Meritus Health Center - Incident Report

Friday Dec. 4th, 2015

Fri. Dec. 4th at approximately 7 pm, 12 year old [REDACTED] was brought to the emergency room of Meritus Health Center by police/ambulance.

In the ER [REDACTED] received IM Haldol - 5 mg. for restraint of a violent outburst which occurred while his older sister [REDACTED] was waiting for [REDACTED]'s father to pick up [REDACTED] at the residence. [REDACTED] had left the home for work at approximately 4:30 PM. A call from [REDACTED]'s (14 yo sister, [REDACTED]) to [REDACTED] whom had not as yet arrived at her work was alerted to the fact that [REDACTED] had become extremely agitated - screaming, kicking, biting, hitting. [REDACTED] advised [REDACTED] to call 911, while [REDACTED] restrained [REDACTED]. The police arrived, an ambulance arrived. [REDACTED] arrived at the home, accompanied [REDACTED] in the ambulance to Meritus Health Center. [REDACTED] was so violent in the course of the transport that [REDACTED] had to "sit on [REDACTED]'s legs , lean over his arms, another person had to hold [REDACTED]'s head as he was banging his head against the plexi glass divider. [REDACTED] was screaming. Despite the high level of agitation, [REDACTED] did not sustain any bruises or injury The attendant in the ambulance was fearful for [REDACTED]'s safety as she held his head. The ambulance driver turned on his lights and raced to the hospital".

In no account of this child's state of distress was there any concern as to why this child was in such an extreme state. The only focus was on controlling this child who was in the most extreme distress. At no point was there any question raised with regard to a pattern of rage outbursts or context of this current episode of fear and rage as well as incidents of recent bed wetting.

[REDACTED] was in her nurses scrubs. She never had an opportunity to get to work and lost a night's work. [REDACTED] was in an extreme state of emotional stress having witnessed the emotional state her son was propelled into as a result of being forced to leave the safety of his home to move into the hands of his abuser.

At no point in the dealings with Crystal was there any assessment or real concern for [REDACTED]. At [REDACTED]'s bed side, Crystal did not believe the mother, accusing the mother - hurling accusations and screaming at mother at [REDACTED]'s bed side. Mother was kept waiting for two hours waiting for Crystal to meet with her. The office was across the hall from [REDACTED]'s room. The father did not arrive at the hospital until after the hostile exchange with Crystal. The father should have been at the hospital at least two hours earlier. It occurred to [REDACTED] that [REDACTED] had been speaking to Crystal the entire time she was waiting to speak with Crystal herself. Crystal ignored [REDACTED]. She never attempted to gain any access to [REDACTED] or assess his communication skills. [REDACTED]'s cards, used for communication were in his back pack by his bed, Crystal barely looked at [REDACTED].

The decision to go to Meritus Health Care was made because Meritus Health was en route to father's residence. Father, [REDACTED] arrived at [REDACTED]'s residence at some time between 7 and 7:30 PM. Father, [REDACTED] had been notified by phone of the circumstances involving [REDACTED] at 7:38 by [REDACTED]. Immediately after the call to [REDACTED] about 7:40 a text was received by [REDACTED] on her I Pod, from Guardian Ad Litem [REDACTED].

[REDACTED] did not arrive at the Meritus Health Care ER until approximately 10:40. This left us to believe that [REDACTED], in her position as Guardian may very well have called Meritus Health Center, spoken with Crystal and [REDACTED], for why was Crystal so aggressively, negatively positioned in her dealings with [REDACTED].

[REDACTED] was so distressed after the highly abusive interaction with Crystal, which occurred at least two hours after her arrival at Meritus that she was unable to return to work.

[REDACTED] had not visited with his father for about 2 months prior to the visit, Nov. 20th. for a weekend of Fri. through Sun.. Recent weeks found [REDACTED] functioning extremely well, (as per a history taken by me at an earlier point in time). [REDACTED] was excelling in home schooling, he began to say words. There was no violent behavior and in fact as per my own frequent interactions, [REDACTED] appeared happy, playful and well behaved, responsive and interactive - even on the phone. When [REDACTED] was seen in person, he was welcoming, responsive and clearly extremely comfortable in his very comfortable home, with his sisters and mother.

The predicate for the interruption in visitation was as follows:

Sept. 20th, 2015 [REDACTED]'s 24 yo sister, [REDACTED] picked up [REDACTED] at the home of [REDACTED] in Maryland. [REDACTED] was upset at the point of pick up. Prior to this visitation/pick ups were noted to have found [REDACTED] to appear sedated, "not himself" and with multiple bruises on his body. On the occasion of the last visit Sept. 20th, [REDACTED] was very upset. [REDACTED] was picked up from the home of his father by his sister [REDACTED]. Because [REDACTED] was very upset during that evening's exchange, his sister called their mother for direction. Mother told [REDACTED] who was attending to [REDACTED]'s pick up from the home of [REDACTED], to stop to review [REDACTED] to see if she could see anything wrong. For several weeks [REDACTED] had been returning home with suspicious bruises and behaving in a manner that suggested extreme distress. As per recent experience with [REDACTED], [REDACTED] proceeded to examine [REDACTED] and immediately found a very significant, fresh bruise on his left hip extending to the arterial artery (left hip/left inguinal area). A photograph was taken immediately, by [REDACTED], sent by I Pod to [REDACTED] as she was at work at the hospital. [REDACTED] was then taken as per instruction from mother, [REDACTED], to the ER at Howard County General, two blocks away from the home of [REDACTED] which she, [REDACTED] did immediately.

The ER physician stated in her report that the bruise was a "fresh" injury and called the Howard County Police. The Howard County Police opened an abuse investigation. The abuse allegation stated that this bruise occurred while [REDACTED] was in the care of his father [REDACTED]. [REDACTED] did not see his father for 2 months after this abuse report (from Sept. 20th to Nov. 20th).

The abuse allegation was later discharged by the Howard County Police on the basis that [REDACTED] is autistic/non verbal and could not articulate events surrounding the causes of the bruise, not because of a lack of probable cause, proximity or access to the child. Howard County Detective Lohman stated that this was "a terrible bruise".

This abrogation of this child's right's to protection against abuse is contrary to protection afforded under the Americans with Disabilities Federal Act. [REDACTED] is fully capable of making his thoughts and feelings known through pictures.

Very serious allegations of physical and sexual abuse have been made against [REDACTED] by [REDACTED]'s 14 yo sister. Abuse charges include allegations that [REDACTED] has strangled [REDACTED] to the point of losing consciousness. The extent of episodes of anoxia have been questioned as a cause for [REDACTED]'s failure to progress educationally as periods of great progress have been followed by periods of regression [REDACTED]'s sister, [REDACTED] is the witness to more than one episode of physical abuse on the part of [REDACTED] against [REDACTED]. [REDACTED] has been engaged in an ongoing campaign to have [REDACTED] psychiatrically institutionalized, on hold.

Admission to the Howard County ER had nothing to do with establishing charges of child abuse. Those charges were addressed. The ER visit had to do with [REDACTED]'s state of intense distress and uncontrollable, rage. Had [REDACTED] been in a controlled state, able to express himself, [REDACTED] could have articulated his feelings via pictures. He did not have that opportunity that evening.

Charges by social worker Crystal [REDACTED] that mother was looking for In patient Services for [REDACTED]:

Mother did want over night evaluation for [REDACTED] re: the rage attack.

Mother does want services for [REDACTED] through Kennedy Krieger to address the verbalization/communication issues so that [REDACTED] is not at risk. Father takes mother's desire to seek out in patient service - because she has not been able to access out patient services, because [REDACTED] was kicking the teachers, as a suggestion that mother did not want [REDACTED].

The Meritus ER refused to admit [REDACTED] to in patient care on the basis that he was non verbal. [REDACTED], mother, stated that she would remain over night with [REDACTED] for whatever time was needed. A male social worker stated that [REDACTED] could not be admitted because "[REDACTED] would be violating other patient's HIPPA rights". This male social worker, whose name we do not know currently was speaking to an RN, [REDACTED] who works in hospitals.

Crystal [REDACTED].....(name learned from Allen Twig 12/16/15)

I was on the phone with [REDACTED] when "Crystal" met with [REDACTED] in front of [REDACTED] after [REDACTED] had under gone restraint and administration of IM Haldol 5 mg..

I could hear the social worker stating - "why did you use this hospital - why did you come to this hospital - I think that you are trying to drag this hospital into a custody suit against father this is a father that doesn't even know what is going on (and exactly how would you - "Crystal" know what [REDACTED] is or is not guilty of....." you are making false accusations against father- how are you attributing bed wetting to father after a visit two weeks ago..... did you get a diagnosis of enuresis from a doctor..... you are making false allegations against an innocent father.".....(how do you know this man is innocent).

I could literally hear Crystal screaming - loudly enough for me to hear every word she was saying. I could not hear what [REDACTED] was saying because Crystal was yelling over her, interrupting [REDACTED]'s statements. When Crystal was confronted with the inaccuracy of her statements, Crystal began accusing [REDACTED] of being a "liar". When Crystal became aware that there was a witness to her statements on the phone, over hearing her screaming and yelling, she was clearly flumoxed/shocked and stated - "this conversation is over". There was this loud noise when she left the room.....

"Crystal" never addressed the violent outburst of a highly distressed child in the ER- there was no question raised about recent history - history of prior rage episodes, etc, etc - No concern for [REDACTED], only concern for "protecting" the father and attacking the mother - no empathy for the mother at all!

This social worker evidenced absolutely no concern for the intense distress of the mother who had to participate in the restraint of her child. The fact that this 12 yo boy whom had not been bed wetting for two months after not seeing father was never taken into account as part of a clinical history, if one was ever taken. Once [REDACTED] was again involved with visitation with father, [REDACTED] [REDACTED] was wetting himself over the course of the day and night, suddenly urine soaked clothing was found hidden in the laundry - covered with his sisters clothes. Full sets of clothes were completely soaked. [REDACTED] was taking his clothes off and changing into new clothes dressing himself until family noticed that all his clothes were gone. Mother was alerted to a clothes problem when [REDACTED] appeared dressed in a snow suit!

[REDACTED] explained all of the above to Crystal who was combative, stating that "none of this was real ", how could you attribute this to father..... don't come to this ER with these false charges".

I contacted the operator, seeking the ER Supervisor, whom I learned was Allen Twig.

Following my experience of listening to "Crystal", I contacted the operator to find out the name, gain access to the night administrator for the hospital as well as the chief attending for the ER. I left word for " Robin", the night administrator, the night Director of the Hospital and the Director of ER Psychiatric Services. When I was connected to the ER Crystal picked up the phone. I asked for ER Supervisor, learned that I was speaking to Crystal, who would not leave me her last name. I gave her my name, my contact information and stated precisely why I was calling which was to file a complaint against her.

I spoke with Robin, the evening Administrator. She would not give me Crystal's last name. I provided my name and other identifying information as well as context of my complaint against the ER social worker. I subsequently learned that there were 3 ER social Workers "running around seeking inpatient services for [REDACTED]" (per [REDACTED]). I also learned that the social workers were not able to procure services because [REDACTED] was not verbal.

Contacted Re: Complaint Against ER Social Worker 12/4/15

Joe Roth - CEO

Allen Twig - Dir. EPS

Michael Smith - EPS
301 - 790 - 8250

Robin Saulsberry - RN, ANS - filed complaint
Nursing supervisor