

**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:36 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: REMINDER: RE: Private: North Spring Behavioral Plan

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**From:** [notification@uhsinc-secure.com](mailto:notification@uhsinc-secure.com) [<mailto:notification@uhsinc-secure.com>]  
**Sent:** Tuesday, January 10, 2012 11:37 AM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** REMINDER: RE: Private: North Spring Behavioral Plan

You have received a secure email from [mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov). This email has been secured due to the nature of the sensitive data that it contains. This message must remain private and be transmitted via a secure network.

To access this email, click on the link below. If you are unable to access the secure site below, please copy and paste the link displayed into the "Address" or "Location" field of your browser and press "Enter" or "Go".

If you have any issues, please contact ZixCorp via email at [support@zixcorp.com](mailto:support@zixcorp.com) or call (888) 576-4949 and select option 3.

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This message will expire on Jan 17, 2012 @ 16:32 (GMT).

<https://uhsinc-secure.com/s/e?m=ABDP5D2x8Jg8JM0OIEu53Hdp&em=christopher%2ecart%40dbhds%2evirginia%2egov>

**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:37 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Peer to Peer

**From:** [REDACTED]  
**Sent:** Wednesday, January 11, 2012 6:45 PM  
**To:** Cart, Christopher (DBHDS); Seymour, Mark (DBHDS)  
**Subject:** Peer to Peer

Good Evening Gentlemen,

On Tuesday, January 10<sup>th</sup>, while lining up from gym class to transition to another class, the first peer walked up to the second peer and hugged the second peer while he was standing in line. Staff redirected and the first peer let go of the second peer. Both boys reside on Echo had have been involved in a previous peer to peer on 11/5/11. No further contact was made and both boys guardians have been notified. If you have any questions or concerns, please let me know.

Thank you,

[REDACTED]  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
42009 Victory Lane  
Leesburg, VA 20176  
Tele: (703) 777-0800 x 117  
Cell: (301) 461-7039  
Fax: (703) 777-0812  
[REDACTED]

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**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:37 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: report

**Importance:** High

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 3:40 PM  
**To:** Chuck Collins; Chris Cart; Mark Seymour  
**Cc:** [REDACTED]  
**Subject:** FW: report  
**Importance:** High

Chuck, Chris and Mark S.:

Please see the report below as sent to me from our Intensive Care Case Manager. Also, note that the case manager did report this to Loudoun DSS CPS and they said it was not in their jurisdiction. If you could please let me know if this needs to be reported further I will be happy to see that it happens.

If you need anything else, please let me know.

Thanks,

[REDACTED]

[REDACTED], RHIT  
Compliance Coordinator

Northwestern Community Services Board  
209 W. Criser Road  
Front Royal, VA 22630

Phone: 540-636-4250 ext. 2237  
Fax: 540-636-7171

**This email may contain information belonging to the sender that is protected by Federal and State confidentiality regulations (Virginia Code 32.1-127, 42 C.F.R., Part 2 and 45 C.F.R. 160 and 164). If you are not the intended recipient please do not use or copy it for any purpose. If you have made copies, please destroy them. Thank you.**

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 3:36 PM  
**To:** [REDACTED]  
**Subject:** report

A client's ( ) father called me this morning and stated that he is concerned about a resident ( ) at North Springs where his daughter is placed for residential treatment. Father explained that his daughter told him on Sunday when he visited, that ( ) (resident) was touched inappropriately by a staff member of North Springs ( ) during their visit to the movies. Father claims that his daughter ( ) was seated next to ( ) and ( ) put his hand on ( ) inner thigh. ( ) then nudged my client ( ) and said, "see I told you he was doing it." ( ) told her father that ( ) claims this has happened more than once with this staff ( ) and that he flirts verbally with all the girls (residents) on the ( ) unit at the North Springs facility. ( ) also told her father that two other staff members are aware of what has occurred b/t ( ) and ( ) on the unit and one of their names is ( )

I contacted CPS out of Loudoun County on 1/30/12 and spoke with the intake worker who claimed this incident was not reportable to them.

I also contacted ( ) of North Springs Risk Management who claims they were aware of the allegation and doing an internal review of the matter.

( )  
Intensive Case Coordinator NWCSB  
494 North Main Street, Suite 200  
Woodstock VA 22660  
Office Phone (540) 459-5180 \*3023  
Cell Phone (540) 325-3816  
Fax (540) 459-6223

This email may contain information belonging to the sender that is protected by Federal and State confidentiality regulations (Virginia Code 32.1-127, 42 C.F.R., Part 2 and 45 C.F.R. 160 and 164). If you are not the intended recipient please do not use or copy it for any purpose. If you have made copies, please destroy them. Thank you.

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:37 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: report

**Importance:** High

**From:** Seymour, Mark (DBHDS)  
**Sent:** Monday, January 30, 2012 3:38 PM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** FW: report  
**Importance:** High

Chris,

Do you recall receiving a report of this allegation from North Spring?

Mark

**From:** [REDACTED]  
**Sent:** January 30, 2012 3:40 PM  
**To:** Chuck Collins; Chris Cart; Mark Seymour  
**Cc:** Mark Gleason  
**Subject:** FW: report  
**Importance:** High

Chuck, Chris and Mark S.:

Please see the report below as sent to me from our Intensive Care Case Manager. Also, note that the case manager did report this to Loudoun DSS CPS and they said it was not in their jurisdiction. If you could please let me know if this needs to be reported further I will be happy to see that it happens.

If you need anything else, please let me know.

Thanks,

[REDACTED]

[REDACTED] RHIT  
Compliance Coordinator

Northwestern Community Services Board  
209 W. Criser Road  
Front Royal, VA 22630

Phone: 540-636-4250 ext. 2237  
Fax: 540-636-7171

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---

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 3:36 PM  
**To:** [REDACTED]  
**Subject:** report

A client's ([REDACTED]) father called me this morning and stated that he is concerned about a resident ([REDACTED]) at North Springs where his daughter is placed for residential treatment. Father explained that his daughter told him on Sunday when he visited, that [REDACTED] (resident) was touched inappropriately by a staff member of North Springs ([REDACTED]) during their visit to the movies. Father claims that his daughter ([REDACTED]) was seated next to [REDACTED] and [REDACTED] put his hand on [REDACTED] inner thigh. [REDACTED] then nudged my client ([REDACTED]) and said, "see I told you he was doing it." [REDACTED] told her father that [REDACTED] claims this has happened more than once with this staff ([REDACTED]) and that he flirts verbally with all the girls (residents) on the [REDACTED] unit at the North Springs facility. [REDACTED] also told her father that two other staff members are aware of what has occurred b/t [REDACTED] and [REDACTED] on the unit and one of their names is [REDACTED].

I contacted CPS out of Loudoun County on 1/30/12 and spoke with the intake worker who claimed this incident was not reportable to them.

I also contacted [REDACTED] of North Springs Risk Management who claims they were aware of the allegation and doing an internal review of the matter.

[REDACTED]  
Intensive Case Coordinator NWCSB  
494 North Main Street, Suite 200  
Woodstock VA 22660  
Office Phone (540) 459-5180 \*3023  
Cell Phone (540) 325-3816  
Fax (540) 459-6223

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## Stith, Stella (DBHDS)

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:38 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Patient Complaint

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 5:35 PM  
**To:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** Patient Complaint

Good Evening Gentlemen,

On Friday evening, January 27, 2012, a female patient made a complaint to her fill-in therapist that a male staff member had put his hand on her thigh and tried to hold her hand Thursday, January 26, 2012, while at the movies. The staff member was not working on Friday and was moved to a different unit for his shift on Saturday. Loudon CPS was notified and the patient's guardian (Rappahannock DSS) was notified. The assistant admission's director followed up with the patient on Friday evening regarding the allegation due to both myself and the patient advocate going to the movies with the patients. On Sunday, January 29, 2012, the patient's grandmother visited the patient and took additional notes regarding the allegation. Initially CPS did not staff the original complaint but I did not have the additional notes the grandmother took regarding the incident. Contact was made with Rappahannock DSS regarding the name and contact information of the Loudon CPS worker so the additional notes could be relayed to the CPS worker. This afternoon CPS called back stating they were going to staff the case with SW [REDACTED] I have left a message for [REDACTED] and will be in contact with you both regarding her investigation.

If you have any additional questions or concerns, please let me know.

Thank you both,

[REDACTED]  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
42009 Victory Lane  
Leesburg, VA 20176  
Tele: (703) 777-0800 x 117  
Cell: (301) 461-7039  
Fax: (703) 777-0812  
[REDACTED]

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## Stith, Stella (DBHDS)

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:38 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Peer to Peer

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 5:46 PM  
**To:** Cart, Christopher (DBHDS); Seymour, Mark (DBHDS)  
**Subject:** Peer to Peer

Good Evening Gentlemen,

On January 30<sup>th</sup>, Female Patients were roll playing MDT beliefs in therapy group when Patient 1 called Patient 2 a name and Patient 2 went after Patient 1. Patient 1 hit Patient 2 and patient 2 hit patient 1 back. Staff separated the girls and patient 2 went to the quite room to take a cool down. Both girls were assessed and no injuries were noted. If you have any additional questions, please let me know.

[REDACTED]  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
42009 Victory Lane  
Leesburg, VA 20176  
Tele: (703) 777-0800 x 117  
Cell: (301) 461-7039  
Fax: (703) 777-0812  
[REDACTED]@uhsinc.com

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**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:38 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: (E-mailed via DBHDS Web Site ContactUs page)

**From:** Saltzberg, Les (DBHDS)  
**Sent:** Thursday, February 02, 2012 8:10 AM  
**To:** Cart, Christopher (DBHDS)  
**Cc:** Braggs, Chanda (DBHDS); Walsh, Margaret (DBHDS)  
**Subject:** FW: (E-mailed via DBHDS Web Site ContactUs page)

**From:** [REDACTED]  
**Sent:** Thursday, February 02, 2012 8:09 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks and if you can find out why they have not notified me that they took my son off of his medications last week. I can't find anywhere where I signed that do not have to notify me.

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 1:26 PM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

We will follow up.

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 1:22 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Yes, I would like for you to investigate. I think they may be less willing to punish him knowing that someone is watching them. I am concerned that I have not heard from him since our visit Sunday. He told me about a boy coming back from the time out room after being restrained with blood on him. I reported to VOPA and they said they would have someone look in to it. I have tried calling him but no call back. Usually with have a phone therapy session by now.

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 12:40 PM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

We would not tell them who complained but we would have to look at your son's record specifically and they would figure out that someone complained regarding your son. Given your concerns I would like to investigate your complaints but the final call is up to you.

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:21 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

**Please advise me in confidentiality per I feel my son will have consequences for my complaints.**

**12VAC35-115-50. Dignity**

**One staff member named [REDACTED] refers to the boys as dirty ass boys.**

5. Be provided with general information about program services, policies, and rules in writing and in the manner, format and language easily understood by the individual.

It took over a month for me to receive a unit specific handbook explaining rules and expectations. My son was told many times that some of the rules in his did not apply per it was outdated.

3. Live in a humane, safe, sanitary environment that gives each individual, at a minimum:

- e. Clean air, free of bad odors; and
- f. Room temperatures that are comfortable year round and compatible with health requirements.

My son complains about his dorm smells like urine all of the time. He also states that the staff turns the heat up go high that it is hard to sleep. The bed alarms go off throughout the night interrupting his sleep.

**12VAC35-115-70. Participation in decision making and consent.**

A. Each individual has a right to participate meaningfully in decisions regarding all aspects of services affecting him. This includes the right to:

1. Providers shall tell each individual and his authorized representative how he can access and request amendment of his own services record.
2. Providers shall permit each individual to see his services record when he requests it and to request amendments if necessary.
  - a. Access to all or a part of an individual's services record may be denied or limited only if a physician or a clinical psychologist involved in providing services to the individual talks to the individual, examines the services record as a result of the individual's request for access, and signs and puts in the services record permanently a written statement that he thinks access to the services record by the individual at this time would be reasonably likely to endanger the life or physical safety of the individual or another person or that the services record makes reference to a person other than a health care provider and the access requested would be reasonably likely to cause substantial harm to the referenced person. The physician

or clinical psychologist must also tell the individual as much about his services record as he can without risking harm to the individual.

b. If access is denied in whole or in part, the provider shall give the individual or his authorized representative a written statement that explains the basis for the denial, the individual's review rights, as set forth in the following subdivisions, how he may exercise them, and how the individual may file a complaint with the provider or the United States Department of Health and Human Services, if applicable. If restrictions or time limits are placed on access, the individual shall be notified of the restrictions and time limits and conditions for their removal. These time limits and conditions also shall be specified in the services record.

(1) If the individual requests a review of denial of access, the provider shall designate a physician or clinical psychologist who was not directly involved in the denial to review the decision to deny access. The physician or clinical psychologist must determine within a reasonable period of time whether or not to deny the access requested in accordance with the standard in subdivision 2 a of this subsection. The provider must promptly provide the individual notice of the physician's or psychologist's determination and provide or deny access in accordance with that determination.

I am not sure on what this means. I have requested copies of daily behavior reports on several occasions but have been denied. My son was also denied his right of attending his I.E.P. via telephone. He is [REDACTED] and has always attended his meetings. He did notify staff that he wanted to attend but was not allowed to do so.

**12VAC35-115-100. Restrictions on freedoms of everyday life.**

A. From admission until discharge from a service, each individual is entitled to:

1. Enjoy all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. These freedoms include:

a. Freedom to move within the service setting, its grounds, and the community;

B. The provider's duties.

1. Providers shall encourage each individual's participation in normal activities and conditions of everyday living and support each individual's freedoms.

2. Providers shall not limit or restrict any individual's freedom more than is needed to achieve a therapeutic benefit, maintain a safe and orderly environment, or intervene in an emergency.

Is it correct for a facility to not allow children to go outside in a fence secured area for periods of 3 weeks or more?

When he is no threat to himself or others and is not a risk to runaway.

Is it correct to take this privilege away for a child's math grade?

He is making A's in his other classes but has been put on restrictions for 3 weeks now for a low math grade? He is still on restrictions even after it was discussed in his I.E.P meeting to put accommodations for his low processing and handwriting difficulties.

No afternoon gym time, no personal recreation and early bedtime. He is also being held back on his levels in which determine discharge for vague reasons. I was told that he did his level because he was suppressing his feelings

6. Providers shall not use seclusion or restraint for any behavioral, medical, or protective purpose unless other less restrictive techniques have been considered and documentation is placed in the individual's services plan that these less restrictive techniques did not or would not succeed in reducing or eliminating behaviors that are

self-injurious or dangerous to other people or that no less restrictive measure was possible in the event of a sudden emergency.

Does this include two people carrying individual with out giving the individual a chance to walk on his own? It only happen once at the beginning of the program and my son was not hurt but am concern why he was not asked to get up of the floor on his own.

It was he second day being there and he was not complying with school. He was made to stand for 45 minutes in one place. He told me that he told them that his knee was hurting but they ignored him. He has Osgood-Schlatter's disease. When he sat down he was lifted up and carried by two men to the time out area. I did not think much of it at the time per the only thing I was told was that my son was kicking the wall. Recently my son has told me the whole story. I normally take to words of authorized caregivers over my son's words but they have not been upfront and truthful to me on several occasions.

They have not provided the services that they told me that the program had to offer. They told me that the children had the opportunity for music lessons, after school clubs and pet therapy. My son has not received any of those services. I was later told that there are no music lessons or clubs.

[REDACTED]  
[REDACTED]  
----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:05 AM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

That would be fine.

[REDACTED]  
**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:04 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

I have some concerns and I have read over the regulations book that you emailed emailed. I am not sure if the complaints that I have are within the statues. I could send you my concerns if you have to time to clarify them for me.

[REDACTED]  
----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 7:55 AM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

[REDACTED]  
**From:** [REDACTED]  
**Sent:** Tuesday, January 31, 2012 6:44 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks for clarifying this. This was information that was researched by someone else. That is why I needed clarifications. There are some concerns I have been it may not be in your department to help. Can you email me a copy of regulations for residential youth level c facilities? I would appreciate it. Thanks so much

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Tuesday, January 31, 2012 10:48 AM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

I have received your information. First a number of positions on this list do not require Licensing. Positions like Case Manager, Recreation Specialist, Assistant Director of Admissions, Admissions Director, Marketing, Director of Risk Management, etc do not require professional licenses. Although I have only checked a few names of your list several that you listed as unlicensed are licensed based on the Virginia Board of Health Professions Website. These include [REDACTED], Psychiatrist, [REDACTED] LPC, [REDACTED] LCSW, CSAC, [REDACTED] LCP. Some of the others may have their supervision registered by the Board of Health Professions but that would not be on the Website. Is there a complaint or specific issue you have.

**From:** [REDACTED]

**Sent:** Monday, January 30, 2012 4:13 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Let me know if you received the fax.

Thanks

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:19 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

804 692-0066.

**From:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:14 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Can I fax you information that I found and get you to help me verify whether or not my sources are correct? If so provide me with a fax number.

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:08 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

That would be me.

**From:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:07 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Whom would I speak with if I am concerned about accreditations and licenses of staff members of a private residential facility that receives state funding for residents where my child resides?

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Friday, January 27, 2012 7:59 AM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

I can only answer that generally. In general the legal guardian of a child has to be involved in any medication changes. Sometimes the legal guardian gives the Dr. permission in advance to make changes. If you have a specific situation that you are concerned about we can follow up and look at it.

**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 6:59 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Does this type facility have to notify parent in a change of medication or taking your child off of a medications that they have been on a long time?

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:41 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

Look under Psychiatric Solutions of Virginia.

**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:37 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks for the speedy reply. Can you tell me under what name that they are licensed under.

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:11 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

Yes they are. They have a Triennial license.

-----  
**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:09 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** (E-mailed via DBHDS Web Site ContactUs page)

Can you tell me if North Spring Behavior Healthcare in Leesburg, VA is DMHMRSAS-licensed and the status of that license

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:38 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: (E-mailed via DBHDS Web Site ContactUs page)

**From:** Saltzberg, Les (DBHDS)  
**Sent:** Thursday, February 02, 2012 8:10 AM  
**To:** Cart, Christopher (DBHDS)  
**Cc:** Braggs, Chanda (DBHDS); Walsh, Margaret (DBHDS)  
**Subject:** FW: (E-mailed via DBHDS Web Site ContactUs page)

**From:** [REDACTED]  
**Sent:** Thursday, February 02, 2012 8:09 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks and if you can find out why they have not notified me that they took my son off of his medications last week. I can't find anywhere where I signed that do not have to notify me.

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 1:26 PM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

We will follow up.

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 1:22 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Yes, I would like for you to investigate. I think they may be less willing to punish him knowing that someone is watching them. I am concerned that I have not heard from him since our visit Sunday. He told me about a boy coming back from the time out room after being restrained with blood on him. I reported to VOPA and they said they would have someone look in to it. I have tried calling him but no call back. Usually with have a phone therapy session by now.

[REDACTED]

----- Original Message -----



**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 12:40 PM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

We would not tell them who complained but we would have to look at your son's record specifically and they would figure out that someone complained regarding your son. Given your concerns I would like to investigate your complaints but the final call is up to you.

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:21 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

**Please advise me in confidenallity per I feel my son will have consequences for my complaints.**

**12VAC35-115-50. Dignity**

**One staff member named [REDACTED] refers to the boys as dirty ass boys.**

5. Be provided with general information about program services, policies, and rules in writing and in the manner, format and language easily understood by the individual.

It took over a month for me to receive a unit specific handbook explaining rules and expectations. My son was told many times that some of the rules in his did not apply per it was outdated.

3. Live in a humane, safe, sanitary environment that gives each individual, at a minimum:

- e. Clean air, free of bad odors; and
- f. Room temperatures that are comfortable year round and compatible with health requirements.

My son complains about his dorm smells like urine all of the time. He also states that the staff turns the heat up go high that it is hard to sleep. The bed alarms go off throughout the night interrupting his sleep.

**12VAC35-115-70. Participation in decision making and consent.**

A. Each individual has a right to participate meaningfully in decisions regarding all aspects of services affecting him. This includes the right to:

1. Providers shall tell each individual and his authorized representative how he can access and request amendment of his own services record.
2. Providers shall permit each individual to see his services record when he requests it and to request amendments if necessary.
  - a. Access to all or a part of an individual's services record may be denied or limited only if a physician or a clinical psychologist involved in providing services to the individual talks to the individual, examines the services record as a result of the individual's request for access, and signs and puts in the services record permanently a written statement that he thinks access to the services record by the individual at this time would be reasonably likely to endanger the life or physical safety of the individual or another person or that the services record makes reference to a person other than a health care provider and the access requested would be reasonably likely to cause substantial harm to the referenced person. The physician

or clinical psychologist must also tell the individual as much about his services record as he can without risking harm to the individual.

b. If access is denied in whole or in part, the provider shall give the individual or his authorized representative a written statement that explains the basis for the denial, the individual's review rights, as set forth in the following subdivisions, how he may exercise them, and how the individual may file a complaint with the provider or the United States Department of Health and Human Services, if applicable. If restrictions or time limits are placed on access, the individual shall be notified of the restrictions and time limits and conditions for their removal. These time limits and conditions also shall be specified in the services record.

(1) If the individual requests a review of denial of access, the provider shall designate a physician or clinical psychologist who was not directly involved in the denial to review the decision to deny access. The physician or clinical psychologist must determine within a reasonable period of time whether or not to deny the access requested in accordance with the standard in subdivision 2 a of this subsection. The provider must promptly provide the individual notice of the physician's or psychologist's determination and provide or deny access in accordance with that determination.

I am not sure on what this means. I have requested copies of daily behavior reports on several occasions but have been denied. My son was also denied his right of attending his I.E.P. via telephone. He is 16 years old and has always attended his meetings. He did notify staff that he wanted to attend but was not allowed to do so.

#### **12VAC35-115-100. Restrictions on freedoms of everyday life.**

A. From admission until discharge from a service, each individual is entitled to:

1. Enjoy all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others. These freedoms include:

a. Freedom to move within the service setting, its grounds, and the community;

B. The provider's duties.

1. Providers shall encourage each individual's participation in normal activities and conditions of everyday living and support each individual's freedoms.

2. Providers shall not limit or restrict any individual's freedom more than is needed to achieve a therapeutic benefit, maintain a safe and orderly environment, or intervene in an emergency.

Is it correct for a facility to not allow children to go outside in a fence secured area for periods of 3 weeks or more?

When he is no threat to himself or others and is not a risk to runaway.

Is it correct to take this privilege away for a child's math grade?

He is making A's in his other classes but has been put on restrictions for 3 weeks now for a low math grade? He is still on restrictions even after it was discussed in his I.E.P meeting to put accommodations for his low processing and handwriting difficulties.

No afternoon gym time, no personal recreation and early bedtime. He is also being held back on his levels in which determine discharge for vague reasons. I was told that he did his level because he was suppressing his feelings

6. Providers shall not use seclusion or restraint for any behavioral, medical, or protective purpose unless other less restrictive techniques have been considered and documentation is placed in the individual's services plan that these less restrictive techniques did not or would not succeed in reducing or eliminating behaviors that are

self-injurious or dangerous to other people or that no less restrictive measure was possible in the event of a sudden emergency.

Does this include two people carrying individual with out giving the individual a chance to walk on his own? It only happen once at the beginning of the program and my son was not hurt but am concern why he was not asked to get up of the floor on his own.

It was he second day being there and he was not complying with school. He was made to stand for 45 minutes in one place. He told me that he told them that his knee was hurting but they ignored him. He has Osgood-Schlatter's disease. When he sat down he was lifted up and carried by two men to the time out area. I did not think much of it at the time per the only thing I was told was that my son was kicking the wall. Recently my son has told me the whole story. I normally take to words of authorized caregivers over my son's words but they have not been upfront and truthful to me on several occasions.

They have not provided the services that they told me that the program had to offer. They told me that the children had the opportunity for music lessons, after school clubs and pet therapy. My son has not received any of those services. I was later told that there are no music lessons or clubs.

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:05 AM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

That would be fine.

**From:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 10:04 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

I have some concerns and I have read over the regulations book that you emailed emailed. I am not sure if the complaints that I have are within the statues. I could send you my concerns if you have to time to clarify them for me.

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Wednesday, February 01, 2012 7:55 AM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

**From:** [REDACTED]  
**Sent:** Tuesday, January 31, 2012 6:44 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks for clarifying this. This was information that was researched by someone else. That is why I needed clarifications. There are some concerns I have been it may not be in your department to help. Can you email me a copy of regulations for residential youth level c facilities? I would appreciate it. Thanks so much

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** Kevin  
**Sent:** Tuesday, January 31, 2012 10:48 AM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

I have received your information. First a number of positions on this list do not require Licensing. Positions like Case Manager, Recreation Specialist, Assistant Director of Admissions, Admissions Director, Marketing, Director of Risk Management, etc do not require professional licenses. Although I have only checked a few names of your list several that you listed as unlicensed are licensed based on the Virginia Board of Health Professions Website. These include [REDACTED] Psychiatrist, [REDACTED] LPC, [REDACTED] LCSW, CSAC, [REDACTED] LCP. Some of the others may have their supervision registered by the Board of Health Professions but that would not be on the Website. Is there a complaint or specific issue you have.

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 4:13 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Let me know if you received the fax.  
Thanks

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)  
**To:** [REDACTED]  
**Sent:** Monday, January 30, 2012 1:19 PM  
**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

804 692-0066.

**From:** [REDACTED]  
**Sent:** Monday, January 30, 2012 1:14 PM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Can I fax you information that I found and get you to help me verify whether or not my sources are correct? If so provide me with a fax number.

[REDACTED]

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:08 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

That would be me.

**From:** [REDACTED]

**Sent:** Monday, January 30, 2012 1:07 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Whom would I speak with if I am concerned about accreditations and licenses of staff members of a private residential facility that receives state funding for residents where my child resides?

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Friday, January 27, 2012 7:59 AM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

I can only answer that generally. In general the legal guardian of a child has to be involved in any medication changes. Sometimes the legal guardian gives the Dr. permission in advance to make changes. If you have a specific situation that you are concerned about we can follow up and look at it.

**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 6:59 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Does this type facility have to notify parent in a change of medication or taking your child off of a medications that they have been on a long time?

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:41 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

Look under Psychiatric Solutions of Virginia.

**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:37 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** Re: (E-mailed via DBHDS Web Site ContactUs page)

Thanks for the speedy reply. Can you tell me under what name that they are licensed under.

----- Original Message -----

**From:** Saltzberg, Les (DBHDS)

**To:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:11 PM

**Subject:** RE: (E-mailed via DBHDS Web Site ContactUs page)

Yes they are. They have a Triennial license.

-----  
**From:** [REDACTED]

**Sent:** Thursday, January 26, 2012 2:09 PM

**To:** Saltzberg, Les (DBHDS)

**Subject:** (E-mailed via DBHDS Web Site ContactUs page)

Can you tell me if North Spring Behavior Healthcare in Leesburg, VA is DMHMRSAS-licensed and the status of that license

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:39 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Thanks so much for your help.

**From:** Seymour, Mark (DBHDS)  
**Sent:** Thursday, February 02, 2012 11:23 AM  
**To:** Walsh, Margaret (DBHDS); Saltzberg, Les (DBHDS); Cart, Christopher (DBHDS)  
**Cc:** Collins, Chuck (DBHDS)  
**Subject:** FW: Thanks so much for your help.

Hello all,

I received your emails regarding North Spring and the young man, [REDACTED], whose parents are concerned about him. The email below is from an earlier response from this young man's mother, [REDACTED]. Between her initial email of January 3 and the one of January 5, I spoke with staff at North Spring and arranged for this young man to have appropriate participation in his meeting. At that time (early January), it appeared that the parents were hopeful that their son was receiving appropriate treatment at North Spring. Now, it appears this might not be the case.

Chris, I am available to join you at North Spring on Monday, February 6 at 10:00 AM.

Thanks

Mark

**From:** [REDACTED]  
**Sent:** January 05, 2012 8:02 AM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** Thanks so much for your help.

Thanks so much for your help. North Spring did contact me about the problem. The case manager called and confirmed that they would have him at the meeting. I was also contacted by the complaint department on all my concerns. I feel very satisfied that my son will get to voice his thoughts and be able to participate in his treatment. I feel that they will communicate better with me now.  
You are the Man!

[REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]

----- Original Message -----

**From:** Seymour, Mark (DBHDS)  
**To:** [REDACTED]  
**Sent:** Tuesday, January 03, 2012 8:59 AM  
**Subject:** RE: My son is in a residential treatment facility

Good morning,

I am glad to learn that you are advocating for your son to have meaningful participation in his treatment plan. Please let me know the facility in which your son resides.

Yours truly

**J. Mark Seymour, M.Div**  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** January 03, 2012 12:44 AM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** My son is in a residential treatment facility

I do not know if I am contacting the right person. If you can help with advice, let me know or maybe you know whom I can contact. My son is in a residential facility in VA. It was decided that he would do better in a residential school. FAPT approved the school that I felt would be best for him. It was hard making a decision per none of the programs offer enough details and are vague with answers when you ask them. I realize now that the program I choose for him is not the program that is what I feel is best for him. I was also misinformed by the program representative on what the program offers. My son is getting therapy on a regular basis but I found another program that I feel is better suited for him and would allow more family involvement. The school has agreed to conduct another FAPT meeting to see if he can be moved to another facility.

I would like my son to participate in this meeting per he is 16 and I feel he has a right to speak in his behalf.

I feel that my son does not have enough opportunity to speak out in team meetings and he feels that he will be "considered not being positive towards his progress" if he does speak out. He told me that the phone was pushed to the other side of the room during the phone conference with the school. This did not allow him to speak on his behalf.

I asked the facility if it could be arranged for him to attend the meeting. They did not seem to have a problem with it until I stated that I did not want their staff to attend because I felt that my son should feel comfortable saying what he needs to say. They now are talking about making it a phone conference instead of him attending with me personally. I feel that he will not be allowed to speak in private.

I also feel that their opinion is bias because they are receiving a lot of funding for him going there. I also feel that they are trying to convince FAPT in keeping him there against my wishes.

I signed and he signed voluntarily to go in this facility but I was told that if I pulled him out against medical advise that I could lose his funding for other programs.



## Stith, Stella (DBHDS)

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:39 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Walsh, Margaret (DBHDS)  
**Sent:** Monday, February 06, 2012 7:06 AM  
**To:** [REDACTED]  
**Cc:** Saltzberg, Les (DBHDS); Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** RE: Son in residential

Good morning,  
The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,  
I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s  
Regardless to the fact that he is making "A"s in the rest of his classes.

(No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime)  
He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.

2. They lied about the programs that they had to offer.
3. They do not give clear answers to my concerns or avoid the questions.
4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.
5. One staff member refers to the boys as "Dirty Ass Boys"
6. The distance is an obstacle for frequent participation and visitation.
7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got his report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems.

If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to

Silva Yhette from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting is educational needs meet per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.

\I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

[REDACTED]

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:39 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Walsh, Margaret (DBHDS)  
**Sent:** Tuesday, February 07, 2012 8:47 AM  
**To:** [REDACTED]  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]

[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)  
**To:** [REDACTED]

**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)  
**Sent:** Monday, February 06, 2012 7:06 AM  
**Subject:** RE: Son in residential

Good morning,

The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

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**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s Regardless to the fact that he is making "A"s in the rest of his classes. (No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime) He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.
2. They lied about the programs that they had to offer.
3. They do not give clear answers to my concerns or avoid the questions.
4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.
5. One staff member refers to the boys as "Dirty Ass Boys"
6. The distance is an obstacle for frequent participation and visitation.

7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got his report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

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My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems. If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to Silva Yhette from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential

program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting his educational needs met per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.

\I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

[REDACTED]

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:39 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Human Rights/ADA/IDEA/Medicaid Fraud Complaint. S.Smith - UHS/North Spring, Leesburg, VA

**From:** Braggs, Chanda (DBHDS)  
**Sent:** Tuesday, February 07, 2012 9:58 AM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** FW: Human Rights/ADA/IDEA/Medicaid Fraud Complaint. [REDACTED] - UHS/North Spring, Leesburg, VA

Chris, Are you aware of this situation at North Spring. Let me know.

*Chanda C. Braggs*  
Associate Director  
Office of Licensing  
VA Dept of Behavioral Health  
& Developmental Services  
1220 Bank Street  
Richmond, VA 23219  
Phone: (804) 786-3475  
Fax: (804) 692-0066  
e-mail: chanda.braggs@dbhds.virginia.gov

**From:** Saltzberg, Les (DBHDS)  
**Sent:** Tuesday, February 07, 2012 8:10 AM  
**To:** Braggs, Chanda (DBHDS)  
**Subject:** FW: Human Rights/ADA/IDEA/Medicaid Fraud Complaint. [REDACTED] - UHS/North Spring, Leesburg, VA

fyi

**From:** Walsh, Margaret (DBHDS)  
**Sent:** Tuesday, February 07, 2012 7:59 AM  
**To:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS)  
**Subject:** FW: Human Rights/ADA/IDEA/Medicaid Fraud Complaint. [REDACTED] - UHS/North Spring, Leesburg, VA

More on Northspring

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218



804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 7:50 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Human Rights/ADA/IDEA/Medicaid Fraud Complaint. [REDACTED] - UHS/North Spring, Leesburg, VA

Thank you. An additional complaint - I spoke to [REDACTED] last night and she stated that on January 26, 2012, [REDACTED] informed her UHS/North Spring had stopped giving him a medication he had been receiving for three years. As of last night, [REDACTED] had NOT been notified by UHS/North Spring that [REDACTED] was no longer receiving this medication. [REDACTED] is concerned that he is being set up to fail, by not having appropriate supports, and now apparently medications, in place that help him be successful. He and his mother are concerned that if he "loses it," because what he needs to be successful has not been provided, UHS/North Spring will then use his behavior as an excuse to get a court order to keep [REDACTED] at the facility against the parent's wishes. As noted in the previous complaints, [REDACTED] has been prevented by UHS/North Spring staff from making a complaint with appropriate contacts. Thank you for your attention to this matter. Please let me know if I can clarify any of the information or complaints I have shared with you. This is a situation which seems to be exploding quickly. I hope someone will be able to assess the situation early this week.

Thank you again,

[REDACTED]

On Feb 7, 2012, at 6:45 AM, Walsh, Margaret (DBHDS) wrote:

Thank you. The Department will follow up.

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Monday, February 06, 2012 2:01 PM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Human Rights/ADA/IDEA/Medicaid Fraud Complaint. S.Smith - UHS/North Spring, Leesburg, VA

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

Ms. Walsh,

Thank you for taking the time to talk to me this afternoon. I understand you were not able to comment on this situation directly to me, but did want to file a written, formal complaint based on the information I have received from the family. The mother and father are divorced, but share custody and, it is heartening to hear, are in agreement and working together to access the best services for their son. They both share concerns that this may not longer be the best, least restrictive placement for [REDACTED]. He is many hours away from his family, which prevents home visits, family visits to him, and full family participation in family therapy. Most of the family therapy sessions are done by phone because the local CSA program and Cave Spring High School IEP team refused to provide a transportation plan or funding for the family and UHS/North Spring seems to encourage phone participation vs. actual presence of the parents. (Despite much research showing phone participation in therapy is ineffective at best.) [REDACTED] was family placed at UHS/North Spring but was denied a change in placement on his IEP or ISP by the FAPT/CSA team and the IEP team. Based on false input from UHS/North Spring that Sean was making great progress on levels and in school, neither would agree to a change in ISP or IEP services which would allow [REDACTED] to move home or closer to home, where he could live and learn his least restrictive environment. The mother contacted me for advocacy assistance with the ISP and IEP. I was additionally contacted by astartforteens.org, who had been contact by the mother asking for an advocate contact in SW Virginia.

[REDACTED] reports making requests to staff at UHS/ North Spring in Leesburg, VA to make a written complaint to appropriate contacts about his concerns and human rights violations which are occurring. (Sounds as if the child is a strong advocate for himself.) In theory, complaints can be written out and left in a box, but another boy told [REDACTED] he put a complaint in the box months ago and nobody ever approached him about his concerns. [REDACTED] and the other boy suspect the complaint may still actually be physically in the box. It appears to be well known by the children at UHS/North Spring that nothing happens when a written complaint is placed in the box. [REDACTED] asked for additional information on how to file complaints that would not be ignored, as the other boy's appeared to have been. [REDACTED] is being denied the opportunity to file a complaint to appropriate contacts by staff because "it isn't a valid complaint" and staff do not seem to know what the process is for complaint, including contact with Human Rights staff or VOPA. The children definitely do not know or, as with [REDACTED], are denied access to make the complaints or express their concerns. There does not appear to be a clear process in place for complaints by the patients in this medical facility. [REDACTED] was told he had to talk to his counselor/therapist, [REDACTED] LCSW. [REDACTED] told [REDACTED] he was wasting treatment time complaining, and that this would just hold [REDACTED] back from treatment and would result in prolonging his treatment. [REDACTED] responded, "So you are telling me if I complain, I have to stay here longer?" [REDACTED] responded "I'm not saying that, (with a voice tone indicating he was saying exactly that) but we are not wasting our treatment time on this anymore." [REDACTED] provided [REDACTED] with no other direction or assistance on where [REDACTED] was to share his complaints and concerns.

[REDACTED] has stated directly to staff he is frustrated participating in the program because he is not allowed to advance up levels, even when he meets the requirements. At [REDACTED] IEP meeting on January 27, 2012

his case manager, by phone, in front of the IEP committee, told his family and the school [REDACTED] had progressed to Level 2 when he had not. He in fact checked his notes to assure documentation proving Sean was on Level 2. [REDACTED] mother [REDACTED] questioned the validity of the statement but was told it was true. IEP decisions at the meeting were made based on the information [REDACTED] had progressing successfully to Level 2 at UHS/North Spring, which was later shown to be false. Additionally [REDACTED] is concerned he is being denied his federally mandated free and appropriate education. [REDACTED] believes he is not being taught the topics and materials he needs to progress in high school. Additionally, multiple mandates from his IEP have not been followed, in violation of federal law, IDEA which has resulted in [REDACTED] failing math, which is then used to deny [REDACTED] an opportunity to progress on levels. In addition to being a denial of FAPE, this is discrimination based on his disability. [REDACTED] is not provided the support and services he needs to access material and information so he can pass his courses and then is denied progress on levels, which keeps him at the facility and away from his home and family longer. This is a denial of an opportunity to live and learn in a least restrictive environment, because the facility is not providing what he needs to be successful with his disabilities (as described in his ISP and IEP) and have falsely told the family [REDACTED] cannot leave until UHS/North Spring staff approve, after he progresses up the levels.

This child was placed at this UHS facility by his parents, not the courts, for truancy. He has been attending school without fail for three months. His paperwork clearly states he is not a flight risk and has had not physical altercations or problems. (His issue was not attending school, he has no discipline issues other than normal teen rudeness, talking back, etc.) I am concerned staff are antagonizing this child by not letting him progress, then ignoring his complaints until he "loses it." [REDACTED] has stated fear to his mother that this will happen. [REDACTED] will then end up with a criminal record after being antagonized, if that's what it takes to keep him there. This is what happened to my son in a UHS/PSI facility so I am familiar with the process.

Through FERPA and FOIA, the mother has requested all of his educational, therapy, and medical records and they have not been provided by UHS/North Spring, the CSA/FAPT, or the schools. She has additionally asked for Medicaid billing records from all because she believes Medicaid is being billed for services not provided or provided by staff not qualified to provide them. She is specifically concerned about the amount of therapy being billed for vs. what Sean is actually receiving and the qualifications of who is providing the therapy.

Additionally, the child and family are not allowed free access and private communication with each other. The mother had a supposedly private conversation with [REDACTED] and then [REDACTED] therapist brought up details of the conversation later, even though neither [REDACTED] or his mother had shared the information with the therapist. [REDACTED] is not a flight risk, but has not been allowed off campus with his parents, has not been allowed home for visits, there are no plans for visits home or any type of step down program.

UHS/North Spring has falsely indicated they, not the parents, were the only ones allowed to bring [REDACTED] to Roanoke at the end of the month for a court hearing. The parents would not be "allowed" by UHS/North Spring to transport [REDACTED] or have [REDACTED] spend the night before at home before the hearing, which is a CHINS hearing brought by the parents for assistance in [REDACTED] truancy at school. There are no custody issues. The two birth parents share complete custody and are in agreement and working together to help their son.

The parents seem to be trying very hard to work with the system in place, even as they question it. It appears to me that a great first, good faith step would be to let [REDACTED] have at least one short off campus visit with one or both of his parents this upcoming weekend. Parents are anxious, and rightly so, when denied contact private with their children.

Please let me know if I can provide any additional information to you.

Sincerely,

A blacked-out rectangular area redacting the signature of the sender.

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:40 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Seymour, Mark (DBHDS)  
**Sent:** Tuesday, February 07, 2012 11:47 AM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** FW: Son in residential

Hi Chris,  
Do you and I want to conference call [REDACTED] (although I'm not sure how to do that)?  
Mark

**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 10:42 AM  
**To:** Seymour, Mark (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

It may be better to follow up by giving the guardian a phone call. That way we are sure about where the information is going. I suggest that either you or Chris give the mother(guardian) to provide an update on the status of the investigation. Also, please note the additional emails I sent from [REDACTED] on this case as well.

Please keep us posted on this as it goes forward and let me know about phoning the mother.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** Seymour, Mark (DBHDS)  
**Sent:** Tuesday, February 07, 2012 10:30 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Margaret,

I did not copy this response to [REDACTED] in the event you wished to convey it in some other manner. I am also unclear as to whether these emails come from the young man's mother (his legal guardian) or from his step-father father ([REDACTED]) who, according to North Spring records, is not a legal guardian.

Chris, let us know if you have a different understanding of this.

Thanks

Mark

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:12 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, [REDACTED], regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.  
*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this).  
Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*
- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.  
*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*
- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.  
*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED]*

██████████ to find the reason for the resident being in the hall in the first place. ██████████ stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.

- The resident made allegations of verbal abuse by a specific staff member, alleging that the staff member referred to him by several derogatory names, and then addressed the entire unit of children in an inappropriate manner.

*Chris and I found this allegation by the resident to be very compelling. ██████████ will investigate and interview staff.*

- The resident stated that children are restrained by being forcibly extended at the waist while sitting on the ground until their noses hit the floor.

*The physics of such a position seemed unlikely. ██████████ stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*

- The resident stated that staff make fun of children during restraints.

*The resident reported that this is his understanding given to him by peers. Chris and I spoke with ██████████ regarding this observation. Staff should be mindful of how they communicate with one another and with children during a restraint.*

- This resident complained that he has not attended his IEPs.

*Chris and I emphasized with ██████████ the need for all residents to be able to have meaningful participation in all aspects of their treatment. In the case of this particular resident, it seems that there is conflict between his mother (legal guardian) and his locality. We also noted that the family has made requests for the resident to physically attend his FAPT meetings, but to do so would have entailed a six-hour round trip for perhaps a twenty-minute meeting. We emphasized with ██████████ the need for North Spring to be in frequent and meaningful contact with this resident's mother in order to ensure helpful communication and positive outcomes.*

I know that Chris may have some other perspectives on this meeting from his notes.

Thanks

Mark

**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** ██████████

**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)

**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

---

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED], [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]  
[REDACTED]

[REDACTED]  
[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)

**To:** [REDACTED]

**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)

**Sent:** Monday, February 06, 2012 7:06 AM

**Subject:** RE: Son in residential

Good morning,

The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you



Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s

Regardless to the fact that he is making "A"s in the rest of his classes.

(No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime)

He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.

2. They lied about the programs that they had to offer.

3. They do not give clear answers to my concerns or avoid the questions.

4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.

5. One staff member refers to the boys as "Dirty Ass Boys"

6. The distance is an obstacle for frequent participation and visitation.

7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got is report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems.

If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to Silva Yhette from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of

confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting his educational needs met per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.  
I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

**[REDACTED]**  
**[REDACTED]**

## **Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:40 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring RTC Com Inv

**From:** Cart, Christopher (DBHDS)  
**Sent:** Wednesday, February 08, 2012 8:36 AM  
**To:** Seymour, Mark (DBHDS); Walsh, Margaret (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Braggs, Chanda (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** RE: North Spring RTC Com Inv

Mark,

Thank you for the comprehensive response, I completely agree. I would only add that during our unannounced review of the complete physical plant we found the environment to be calm, well structured, and all children engaged in both school and/or active treatment. It appears both the therapeutic and educational programs are well designed and implemented by staff. North Spring has also maintained an excellent reporting history over the past three years, reports are typically comprehensive, rarely minimized and include appropriate follow-up. Unfortunately the child has been in multiple facilities and discharged by the family before completing treatment and against doctors orders. It appears the child's FAPT team is concerned this will happen again and has stated they will not fund further treatment if he does not complete the North Spring program. The child's mother/guardian and step father/not guardian have moved from the area to Roanoke and apparently would like him closer to home. At his point there are no violations in the area of treatment. I will have the provider respond in writing to each allegation and forward that explanation to the family and us.

I plan on issuing multiple violations for the physical plant including: heat is not evenly distributed to bathrooms (cold) and bedrooms causing some bedrooms to be very warm and others cold, multiple bedroom doors have rigid metal plates pulling off the door, multiple bathrooms are in disrepair and require maintenance, multiple magnetic exterior doors require weather stripping to close significant gaps allowing weather and bugs to enter. At the time of the inspection the entire interior of the building was being painted, entire roof was being replaced, and the plant engineer conveyed approved plans to replace all the metal frame/bedroom doors, renovate all the bathrooms (viewed one completed), and a plan is pending approval to replace the entire HVAC system. They have spent at least two million on the physical plant over the past 18 months and appear to be spending an additional two million over the next 18 months. The building is old however I am satisfied with their plans.

Thanks  
Chris

**From:** Seymour, Mark (DBHDS)  
**Sent:** Tuesday, February 07, 2012 10:12 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, Kelly Neverson, regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.  
*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this). Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*
- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.  
*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*
- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.  
*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED] to find the reason for the resident being in the hall in the first place. [REDACTED] stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.*
- The resident made allegations of verbal abuse by a specific staff member, alleging that the staff member referred to him by several derogatory names, and then addressed the entire unit of children in an inappropriate manner.  
*Chris and I found this allegation by the resident to be very compelling. [REDACTED] will investigate and interview staff.*
- The resident stated that children are restrained by being forcibly extended at the waist while sitting on the ground until their noses hit the floor.

*The physics of such a position seemed unlikely. ██████████ stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*

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*The resident reported that this is his understanding given to him by peers. Chris and I spoke with ██████████ regarding this observation. Staff should be mindful of how they communicate with one another and with children during a restraint.*
- This resident complained that he has not attended his IEPs.  
*Chris and I emphasized with ██████████ the need for all residents to be able to have meaningful participation in all aspects of their treatment. In the case of this particular resident, it seems that there is conflict between his mother (legal guardian) and his locality. We also noted that the family has made requests for the resident to physically attend his FAPT meetings, but to do so would have entailed a six-hour round trip for perhaps a twenty-minute meeting. We emphasized with ██████████ the need for North Spring to be in frequent and meaningful contact with this resident's mother in order to ensure helpful communication and positive outcomes.*

I know that Chris may have some other perspectives on this meeting from his notes.

Thanks

Mark

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**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** ██████████  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218

804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED], [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]

[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)  
**To:** [REDACTED]  
**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)  
**Sent:** Monday, February 06, 2012 7:06 AM  
**Subject:** RE: Son in residential

Good morning,  
The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

---

**From:** Kevin [mailto:klochner@cox.net]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are ~~mentally mistreating~~ mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges away from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s

Regardless to the fact that he is making "A"s in the rest of his classes.

(No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime)

He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.

2. They lied about the programs that they had to offer.

3. They do not give clear answers to my concerns or avoid the questions.

4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.

5. One staff member refers to the boys as "Dirty Ass Boys"

6. The distance is an obstacle for frequent participation and visitation.

7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got his report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.



They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems.

If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to [REDACTED] from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting is educational needs meet per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.

I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

[REDACTED]

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## Stith, Stella (DBHDS)

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:40 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring RTC Com Inv

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**From:** Walsh, Margaret (DBHDS)  
**Sent:** Wednesday, February 08, 2012 11:12 AM  
**To:** Seymour, Mark (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Braggs, Chanda (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** RE: North Spring RTC Com Inv

Thank you Mark. Sounds like a good plan. Please let me know the outcome of your conversation with [REDACTED].

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

---

**From:** Seymour, Mark (DBHDS)  
**Sent:** Wednesday, February 08, 2012 11:08 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Braggs, Chanda (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** RE: North Spring RTC Com Inv

Hello Margaret,

Chris and I conferred on this case this morning ([REDACTED] complaints regarding her son's treatment at North Spring). I then spoke with [REDACTED] (risk manager at North Spring) and found that she is planning on contacting [REDACTED] today. After [REDACTED] speaks with [REDACTED], I will contact [REDACTED] to see if she feels her complaints have been appropriately addressed by North Spring.

Mark

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**From:** Cart, Christopher (DBHDS)  
**Sent:** February 08, 2012 8:36 AM  
**To:** Seymour, Mark (DBHDS); Walsh, Margaret (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Braggs, Chanda (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** RE: North Spring RTC Com Inv

Mark,

Thank you for the comprehensive response, I completely agree. I would only add that during our unannounced review of the complete physical plant we found the environment to be calm, well structured, and all children engaged in both school and/or active treatment. It appears both the therapeutic and educational programs are

well designed and implemented by staff. North Spring has also maintained an excellent reporting history over the past three years, reports are typically comprehensive, rarely minimized and include appropriate follow-up. Unfortunately the child has been in multiple facilities and discharged by the family before completing treatment and against doctors orders. It appears the child's FAPT team is concerned this will happen again and has stated they will not fund further treatment if he does not complete the North Spring program. The child's mother/guardian and step father/not guardian have moved from the area to Roanoke and apparently would like him closer to home. At his point there are no violations in the area of treatment. I will have the provider respond in writing to each allegation and forward that explanation to the family and us.

I plan on issuing multiple violations for the physical plant including: heat is not evenly distributed to bathrooms (cold) and bedrooms causing some bedrooms to be very warm and others cold, multiple bedroom doors have rigid metal plates pulling off the door, multiple bathrooms are in disrepair and require maintenance, multiple magnetic exterior doors require weather stripping to close significant gaps allowing weather and bugs to enter. At the time of the inspection the entire interior of the building was being painted, entire roof was being replaced, and the plant engineer conveyed approved plans to replace all the metal frame/bedroom doors, renovate all the bathrooms (viewed one completed), and a plan is pending approval to replace the entire HVAC system. They have spent at least two million on the physical plant over the past 18 months and appear to be spending an additional two million over the next 18 months. The building is old however I am satisfied with their plans.

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**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, [REDACTED] regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.

*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this).*

*Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*

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*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED] to find the reason for the resident being in the hall in the first place. [REDACTED] stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.*
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*Chris and I found this allegation by the resident to be very compelling. [REDACTED] will investigate and interview staff.*
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*The physics of such a position seemed unlikely. [REDACTED] stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*
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I know that Chris may have some other perspectives on this meeting from his notes.

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Mark

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**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** [REDACTED]  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

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Margaret S. Walsh, Director  
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1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
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**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

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[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)

**To:** [REDACTED]

**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)

**Sent:** Monday, February 06, 2012 7:06 AM

**Subject:** RE: Son in residential

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1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

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**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
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Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

**Sarah Leitner**  
540-397-3203

## Stith, Stella (DBHDS)

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:40 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Seymour, Mark (DBHDS)  
**Sent:** Friday, February 10, 2012 10:10 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Cart, Christopher (DBHDS); Braggs, Chanda (DBHDS); [REDACTED]  
**Subject:** FW: Son in residential

Good morning all,

I had a call in to North Spring yesterday evening to discuss the progress of [REDACTED], so that I could be up-to-date prior to contacting his mother [REDACTED] in order to assess her satisfaction with the program's intervention on behalf of her son (see emails below). This morning I received a call back from [REDACTED], Risk Manager at North Spring. [REDACTED] informed me that [REDACTED] contacted North Spring yesterday. [REDACTED] had been in consultation with her attorney to discuss the court order for [REDACTED] to participate in services at North Spring. [REDACTED] faxed the court order to North Spring, as prior to yesterday there was apparently no such document on record at the facility. [REDACTED] explained that, after consultation with her attorney, it was determined that [REDACTED] was ordered to "participate" in services at North Spring, but there was no compelling order to "complete" services. Based upon the counsel she received regarding the court order, [REDACTED] arrived at North Spring last night (2/9) and signed [REDACTED] out AMA at 11:20 PM.

It is noteworthy that North Spring had already started facilitating math tutoring with [REDACTED] (this began yesterday, as his performance in math class was an area of significant concern). The facility also, as requested by OHR and OL, provided private telephone access for [REDACTED], of which he availed himself yesterday in order to speak with his mother. I will, of course, continue to follow the investigation of allegations of verbal and physical abuse.

Mark

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 09, 2012 3:57 PM  
**To:** [REDACTED]  
**Subject:** RE: Son in residential

[REDACTED]

Thank you for this very detailed explanation of your interactions with [REDACTED] and his mother. As I noted on my voicemail to you, I am not sure what else I could ask for, other than the possibility of an education specialist to evaluate [REDACTED] learning style when it comes to math...however, you are already proposing a tutor to assist him, so this should answer the question as to how [REDACTED] comprehends/learns math.

Your very detailed plan for [REDACTED] is straightforward and oriented toward success. I hope he and his mom will avail themselves of all that is being offered. I trust you have also sent this email to Chris.

Please also let Chris and me know of the progress toward helping [REDACTED] make private calls, as well as the progress in investigating his allegations against staff.

Thanks

Mark

J. Mark Seymour, M.Div  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** February 09, 2012 2:44 PM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** RE: Son in residential

Good Afternoon Mark,

It was nice to see both you and Chris on Monday and thanks for following up with me yesterday regarding [REDACTED]. I spoke with [REDACTED] yesterday regarding [REDACTED] complaints and concerns and my plan moving forward. I reminded [REDACTED] that we spoke back in January when she had concerns about [REDACTED] attending his FAPT meeting in person instead of by phone and being able to privately talk to his team. [REDACTED] stated she remembered and I asked since then what issues/concerns does she have. [REDACTED] stated that she did not call me because her trust with North Spring did not start off on the right foot because she feels she was not informed what type of program [REDACTED] was going to when they made the decision to send [REDACTED] to North Spring. [REDACTED] went over her various concerns which are similar to those listed below. I understand that [REDACTED] is in a difficult situation, she does not believe [REDACTED] needs this level of care but if she discharges [REDACTED] ([REDACTED] is the guardian) then he will not receive funding FAPT to get other services he needs. I can't assist [REDACTED] in making this decision but explained that I can try to figure out on our end what issues/concerns can be addressed. I explained my plan to [REDACTED] and immediately went to meet with [REDACTED] for two and a half hours.

[REDACTED] had a treatment team meeting yesterday and told the team that he is refusing to do anything until he feels his rights and needs are being met. He is upset that he was not able to attend his IEP meeting on 1/27/12, and [REDACTED] has filed a complaint with the VA Department of Education. I had previously read both [REDACTED] IEP and admission's paper work prior to meeting with [REDACTED] and talking to [REDACTED]. [REDACTED] IEP was from October and my understand another IEP is not completed until a year later. I asked our Director of Education and she did not have an IEP meeting scheduled for 1/27/12. I have inquired from [REDACTED] [REDACTED] case manager what type of meeting took place and believe it may have been an meeting with [REDACTED] home school board but not an IEP meeting.

Both [REDACTED] and [REDACTED] have a very different interpretation of [REDACTED] IEP. [REDACTED] explained that his IEP said he could use word processor and a calculator at all times. I showed [REDACTED] his IEP and explained that is not what it says as I explained his Educational goals both while at North Spring and when admitted. My conclusion is that these services were provided at a previous placement there for [REDACTED] and [REDACTED] believe these services are written into the IEP. I did a few math problems with [REDACTED] to see "his way" of learning math. I have received his educational progress reports where [REDACTED] was receiving all A's and 1 B except for math which he was failing. [REDACTED] explained that was last quarter and now he is not doing any work because he doesn't feel like he is going to ever get out of North Spring. My concerns, as I explained them to [REDACTED] was that he isn't attempting to try to complete his math work. He isn't showing his work, even if it is done in "his way"

he either refuses or hands in a paper with the answers to certain questions that were provided as examples in the back of the book.

I quickly saw that [REDACTED] was beginning to doubt that I was going to be able to help him get out of North Spring and that I was just another person that was going to listen to his complaints and not assist him with discharge. I took a sentence that [REDACTED] said "there were things I wanted to work on when I came to North Spring" and asked for him to explain further. [REDACTED] said he wants to work on his relationship with his family (communication), school and his depression. [REDACTED] and I came up with this plan together.

- [REDACTED] has his level 1 with enough days to go up for his level 2 on Wednesday.
  - [REDACTED] will complete the level petition to go up for his level 2 on Wednesday
  - I will review his past level petition and the reason's he wasn't able to obtain his level previous.
  - I am meeting with [REDACTED] therapist and unit coordinator next Monday to review the level petition prior to Wednesday's unit meeting
- [REDACTED] is not doing well on any classes do to his lack of motivation and not completing any assignments this quarter
  - I spoke with [REDACTED] staff member this morning and requested that he accompany [REDACTED] to each class today to get a missing list of assignments that need to be completed.
  - I am meeting with [REDACTED] today at 2:45 to review the list and attempt to get a plan to address the missing assignments and get his grades up.
  - Since [REDACTED] is struggling with Math, arrangements have been made to [REDACTED] to receive additional help to get his math grades up, this is all dependent on [REDACTED] putting in the work.
  - I have followed up internally and externally regarding the IEP meeting on 1/27/12, to find out what the meeting was about, who attended and why [REDACTED] was not able to attend. I told [REDACTED] and [REDACTED] that I will let them both know what I find out.
  - The school system mentioned that [REDACTED] had a court order to complete treatment, which we do not have a copy of and did not realize there was a court order in place. This has been requested of the locality to assist us in resolving [REDACTED] concerns as well.
- [REDACTED] is having difficulty finding motivation and misses his family, he stated he was working towards his level 2 so that he could go on passes with his family.
  - I have contacted his case manager, [REDACTED] to get the Medicaid Cab information together for [REDACTED]. [REDACTED] We will provide [REDACTED] with this information in addition to offering more face to face family therapy sessions, the weekend family MDT training sessions and when [REDACTED] gets his level 2 therapeutic passes. I am hoping that with the transportation piece figured out [REDACTED] will be able to visit [REDACTED] on a more consistent basis.
  - I spoke with [REDACTED] therapist and he is currently providing two weekly phone and will encourage [REDACTED] to attend face to face sessions and the weekend trainings.
  - [REDACTED] stated that his bio- father should be on his contact log and I told him I will follow up with [REDACTED] to confirm this request and then will follow up with [REDACTED] case manager.
- [REDACTED] is requesting daily reports. I explained in writing to [REDACTED], [REDACTED] case manager what form needs to be completed for a release of records and explained it to [REDACTED] as well when I spoke to her yesterday. [REDACTED] emailed [REDACTED] the form and I hope to have all requested records sent out on Monday if I receive the request today or tomorrow.

[REDACTED] has court on the 23<sup>rd</sup> or 24<sup>th</sup> of February, I explained the important of showing the best possible picture to the Judge when he attends court. Regardless if [REDACTED] decides to discharge [REDACTED] prior to this court date, [REDACTED] agrees the above referenced list needs to be addressed to show the best possible outcome. I will follow up with [REDACTED] Lochner tomorrow regarding [REDACTED] plan listed above and the outcomes of the issues/concerns that [REDACTED] presented. If you have any additional questions or concerns, or if I forgot something please let me know.

Thanks,

[REDACTED]

**From:** Seymour, Mark (DBHDS) [mailto:Mark.Seymour@dbhds.virginia.gov]  
**Sent:** Wednesday, February 08, 2012 10:37 AM

**To:** [REDACTED]  
**Subject:** FW: Son in residential

J. Mark Seymour, M.Div  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:30 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Margaret,

I did not copy this response to [REDACTED] in the event you wished to convey it in some other manner. I am also unclear as to whether these emails come from the young man's mother (his legal guardian) or from his step-father father ([REDACTED]) who, according to North Spring records, is not a legal guardian.

Chris, let us know if you have a different understanding of this.

Thanks

Mark

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**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:12 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, [REDACTED], regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.

*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this).*

*Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated*

frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.

- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.  
*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*
- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.  
*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED] to find the reason for the resident being in the hall in the first place. [REDACTED] stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.*
- The resident made allegations of verbal abuse by a specific staff member, alleging that the staff member referred to him by several derogatory names, and then addressed the entire unit of children in an inappropriate manner.  
*Chris and I found this allegation by the resident to be very compelling. [REDACTED] will investigate and interview staff.*
- The resident stated that children are restrained by being forcibly extended at the waist while sitting on the ground until their noses hit the floor.  
*The physics of such a position seemed unlikely. [REDACTED] stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*
- The resident stated that staff make fun of children during restraints.  
*The resident reported that this is his understanding given to him by peers. Chris and I spoke with [REDACTED] regarding this observation. Staff should be mindful of how they communicate with one another and with children during a restraint.*
- This resident complained that he has not attended his IEPs.

Chris and I emphasized with [REDACTED] the need for all residents to be able to have meaningful participation in all aspects of their treatment. In the case of this particular resident, it seems that there is conflict between his mother (legal guardian) and his locality. We also noted that the family has made requests for the resident to physically attend his FAPT meetings, but to do so would have entailed a six-hour round trip for perhaps a twenty-minute meeting. We emphasized with [REDACTED] the need for North Spring to be in frequent and meaningful contact with this resident's mother in order to ensure helpful communication and positive outcomes.

I know that Chris may have some other perspectives on this meeting from his notes.

Thanks

Mark

---

**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** [REDACTED]  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

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**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED], [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]  
[REDACTED]

[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)

**To:** [REDACTED]

**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)

**Sent:** Monday, February 06, 2012 7:06 AM

**Subject:** RE: Son in residential

Good morning,

The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

---

**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s Regardless to the fact that he is making "A"s in the rest of his classes. (No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime) He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.
2. They lied about the programs that they had to offer.
3. They do not give clear answers to my concerns or avoid the questions.



4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.

5. One staff member refers to the boys as "Dirty Ass Boys"

6. The distance is an obstacle for frequent participation and visitation.

7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got his report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems. If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to [REDACTED] from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting is educational needs meet per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.

\I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

[REDACTED]

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**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:40 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Walsh, Margaret (DBHDS)  
**Sent:** Friday, February 10, 2012 11:38 AM  
**To:** Seymour, Mark (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Cart, Christopher (DBHDS); Braggs, Chanda (DBHDS); [REDACTED]  
**Subject:** RE: Son in residential

Thank you Mark.

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** Seymour, Mark (DBHDS)  
**Sent:** Friday, February 10, 2012 10:10 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS); Cart, Christopher (DBHDS); Braggs, Chanda (DBHDS); [REDACTED]  
**Subject:** FW: Son in residential

Good morning all,

I had a call in to North Spring yesterday evening to discuss the progress of [REDACTED], so that I could be up-to-date prior to contacting his mother ([REDACTED]) in order to assess her satisfaction with the program's intervention on behalf of her son (see emails below). This morning I received a call back from [REDACTED], Risk Manager at North Spring. [REDACTED] informed me that [REDACTED] contacted North Spring yesterday. [REDACTED] had been in consultation with her attorney to discuss the court order for [REDACTED] to participate in services at North Spring. [REDACTED] faxed the court order to North Spring, as prior to yesterday there was apparently no such document on record at the facility. [REDACTED] explained that, after consultation with her attorney, it was determined that [REDACTED] was ordered to "participate" in services at North Spring, but there was no compelling order to "complete" services. Based upon the counsel she received regarding the court order, [REDACTED] arrived at North Spring last night (2/9) and signed [REDACTED] out AMA at 11:20 PM.

It is noteworthy that North Spring had already started facilitating math tutoring with [REDACTED] (this began yesterday, as his performance in math class was an area of significant concern). The facility also, as requested by OHR and OL, provided private telephone access for [REDACTED] of which he availed himself yesterday in order to speak with his mother. I will, of course, continue to follow the investigation of allegations of verbal and physical abuse.

Mark

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 09, 2012 3:57 PM  
**To:** [REDACTED]  
**Subject:** RE: Son in residential

[REDACTED]

Thank you for this very detailed explanation of your interactions with [REDACTED] and his mother. As I noted on my voicemail to you, I am not sure what else I could ask for, other than the possibility of an education specialist to evaluate [REDACTED] learning style when it comes to math...however, you are already proposing a tutor to assist him, so this should answer the question as to how [REDACTED] comprehends/learns math.

Your very detailed plan for [REDACTED] is straightforward and oriented toward success. I hope he and his mom will avail themselves of all that is being offered. I trust you have also sent this email to Chris.

Please also let Chris and me know of the progress toward helping [REDACTED] make private calls, as well as the progress in investigating his allegations against staff.

Thanks

Mark

**J. Mark Seymour, M.Div**  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
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fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** February 09, 2012 2:44 PM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** RE: Son in residential

Good Afternoon Mark,

It was nice to see both you and Chris on Monday and thanks for following up with me yesterday regarding [REDACTED]. I spoke with [REDACTED] yesterday regarding [REDACTED] complaints and concerns and my plan moving forward. I reminded [REDACTED] that we spoke back in January when she had concerns about [REDACTED] attending his FAPT meeting in person instead of by phone and being able to privately talk to his team. [REDACTED] stated she remembered and I asked since then what issues/concerns does she have. [REDACTED] stated that she did not call me because her trust with North Spring did not start off on the right foot because she feels she was not informed what type of program [REDACTED] was going to when they made the decision to send [REDACTED] to North Spring. [REDACTED]. Lochner went over her various concerns which are similar to those listed below. I understand that [REDACTED] is in a difficult situation, she does not believe [REDACTED] needs this level of care but if she discharges [REDACTED] ([REDACTED] is the guardian) then he will not receive funding FAPT to get other services he needs. I can't assist [REDACTED] in making this decision but explained that I can try to figure out on our end what issues/concerns can be addressed. I explained my plan to [REDACTED] and immediately went to meet with [REDACTED] for two and a half hours.

had a treatment team meeting yesterday and told the team that he is refusing to do anything until he feels his rights and needs are being met. He is upset that he was not able to attend his IEP meeting on 1/27/12, and has filed a complaint with the VA Department of Education. I had previously read both IEP and admission's paper work prior to meeting with and talking to . IEP was from October and my understanding another IEP is not completed until a year later. I asked our Director of Education and she did not have an IEP meeting scheduled for 1/27/12. I have inquired from , case manager what type of meeting took place and believe it may have been a meeting with home school board but not an IEP meeting.

Both and have a very different interpretation of IEP. explained that his IEP said he could use word processor and a calculator at all times. I showed his IEP and explained that is not what it says as I explained his Educational goals both while at North Spring and when admitted. My conclusion is that these services were provided at a previous placement there for and believe these services are written into the IEP. I did a few math problems with to see "his way" of learning math. I have received his educational progress reports where was receiving all A's and 1 B except for math which he was failing. explained that was last quarter and now he is not doing any work because he doesn't feel like he is going to ever get out of North Spring. My concerns, as I explained them to was that he isn't attempting to try to complete his math work. He isn't showing his work, even if it is done in "his way" he either refuses or hands in a paper with the answers to certain questions that were provided as examples in the back of the book.

I quickly saw that was beginning to doubt that I was going to be able to help him get out of North Spring and that I was just another person that was going to listen to his complaints and not assist him with discharge. I took a sentence that said "there were things I wanted to work on when I came to North Spring" and asked for him to explain further. said he wants to work on his relationship with his family (communication), school and his depression. and I came up with this plan together.

- has his level 1 with enough days to go up for his level 2 on Wednesday.
  - will complete the level petition to go up for his level 2 on Wednesday
  - I will review his past level petition and the reasons he wasn't able to obtain his level previous.
  - I am meeting with therapist and unit coordinator next Monday to review the level petition prior to Wednesday's unit meeting
- is not doing well on any classes due to his lack of motivation and not completing any assignments this quarter
  - I spoke with staff member this morning and requested that he accompany to each class today to get a missing list of assignments that need to be completed.
  - I am meeting with today at 2:45 to review the list and attempt to get a plan to address the missing assignments and get his grades up.
  - Since is struggling with Math, arrangements have been made to to receive additional help to get his math grades up, this is all dependent on putting in the work.
  - I have followed up internally and externally regarding the IEP meeting on 1/27/12, to find out what the meeting was about, who attended and why was not able to attend. I told , and that I will let them both know what I find out.
  - The school system mentioned that had a court order to complete treatment, which we do not have a copy of and did not realize there was a court order in place. This has been requested of the locality to assist us in resolving concerns as well.
- is having difficulty finding motivation and misses his family, he stated he was working towards his level 2 so that he could go on passes with his family.
  - I have contacted his case manager, to get the Medicaid Cab information together for . We will provide with this information in addition to offering more face to face family therapy sessions, the weekend family MDT training sessions and when gets his level 2 therapeutic passes. I am hoping that with the transportation piece figured out will be able to visit on a more consistent basis.

- o I spoke with [REDACTED]'s therapist and he is currently providing two weekly phone and will encourage [REDACTED] to attend face to face sessions and the weekend trainings.
- o [REDACTED] stated that his bio- father should be on his contact log and I told him I will follow up with [REDACTED]. [REDACTED] to confirm this request and then will follow up with [REDACTED] case manager.
- o [REDACTED] is requesting daily reports. I explained in writing to [REDACTED], [REDACTED] case manager what form needs to be completed for a release of records and explained it to [REDACTED] as well when I spoke to her yesterday. [REDACTED] emailed [REDACTED] the form and I hope to have all requested records sent out on Monday if I receive the request today or tomorrow.

[REDACTED] has court on the 23<sup>rd</sup> or 24<sup>th</sup> of February, I explained the important of showing the best possible picture to the Judge when he attends court. Regardless if [REDACTED] decides to discharge [REDACTED] prior to this court date, [REDACTED] agrees the above referenced list needs to be addressed to show the best possible outcome. I will follow up with [REDACTED] tomorrow regarding [REDACTED] plan listed above and the outcomes of the issues/concerns that [REDACTED] presented. If you have any additional questions or concerns, or if I forgot something please let me know.

Thanks,

[REDACTED]

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**From:** Seymour, Mark (DBHDS) [mailto:Mark.Seymour@dbhds.virginia.gov]  
**Sent:** Wednesday, February 08, 2012 10:37 AM  
**To:** [REDACTED]  
**Subject:** FW: Son in residential

J. Mark Seymour, M.Div  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

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**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:30 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Margaret,

I did not copy this response to [REDACTED] in the event you wished to convey it in some other manner. I am also unclear as to whether these emails come from the young man's mother (his legal guardian) or from his step-father father ([REDACTED]) who, according to North Spring records, is not a legal guardian.

Chris, let us know if you have a different understanding of this.

Thanks

Mark

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:12 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, [REDACTED], regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.  
*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this). Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*
- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.  
*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*
- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.  
*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED] to find the reason for the resident being in the hall in the first place. [REDACTED] stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.*

- The resident made allegations of verbal abuse by a specific staff member, alleging that the staff member referred to him by several derogatory names, and then addressed the entire unit of children in an inappropriate manner.  
*Chris and I found this allegation by the resident to be very compelling. [REDACTED] will investigate and interview staff.*
- The resident stated that children are restrained by being forcibly extended at the waist while sitting on the ground until their noses hit the floor.  
*The physics of such a position seemed unlikely. [REDACTED] stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*
- The resident stated that staff make fun of children during restraints.  
*The resident reported that this is his understanding given to him by peers. Chris and I spoke with [REDACTED] regarding this observation. Staff should be mindful of how they communicate with one another and with children during a restraint.*
- This resident complained that he has not attended his IEPs.  
*Chris and I emphasized with [REDACTED] the need for all residents to be able to have meaningful participation in all aspects of their treatment. In the case of this particular resident, it seems that there is conflict between his mother (legal guardian) and his locality. We also noted that the family has made requests for the resident to physically attend his FAPT meetings, but to do so would have entailed a six-hour round trip for perhaps a twenty-minute meeting. We emphasized with [REDACTED] the need for North Spring to be in frequent and meaningful contact with this resident's mother in order to ensure helpful communication and positive outcomes.*

I know that Chris may have some other perspectives on this meeting from his notes.

Thanks

Mark

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**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** [REDACTED]  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.



Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED], [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]

[REDACTED]  
[REDACTED]

----- Original Message -----

**From:** Walsh, Margaret (DBHDS)  
**To:** [REDACTED]  
**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)  
**Sent:** Monday, February 06, 2012 7:06 AM  
**Subject:** RE: Son in residential

Good morning,  
The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s

Regardless to the fact that he is making "A"s in the rest of his classes.

(No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime)

He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.

2. They lied about the programs that they had to offer.

3. They do not give clear answers to my concerns or avoid the questions.

4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.

5. One staff member refers to the boys as "Dirty Ass Boys"

6. The distance is an obstacle for frequent participation and visitation.

7.They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got is report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems.

If feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to [REDACTED] from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful.

As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting is educational needs meet per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.  
I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**



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**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:41 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring Question

**From:** [REDACTED]  
**Sent:** Monday, February 13, 2012 2:31 PM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** North Spring Question

Chris,  
We have a therapist who is filling in for a therapist out on maternity leave from a sister facility Jefferson Trail. Jefferson Trail is scheduled to close late February. Does she need to complete a criminal background check and CPS check prior to working with the children since she is a transfer from a VA facility and has already cleared both?  
Thanks!

[REDACTED]  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
42009 Victory Lane  
Leesburg, VA 20176  
Tele: (703) 777-0800 x 117  
Cell: (301) 461-7039  
Fax: (703) 777-0812  
[kelly.neverson@uhsinc.com](mailto:kelly.neverson@uhsinc.com)

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**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:41 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** [REDACTED]  
**Sent:** Monday, February 13, 2012 2:50 PM  
**To:** Cart, Christopher (DBHDS)  
**Cc:** Seymour, Mark (DBHDS)  
**Subject:** RE: Son in residential

Just wanted to catch you both up with where we are in regards to [REDACTED].

Thursday, February 9<sup>th</sup>, [REDACTED] arrived at North Spring at 11:30 pm to discharge [REDACTED]. She had met with an attorney earlier that day who brought her attention to a loop hole in the Court Order for [REDACTED]. The phrase that was used stated [REDACTED] must "participate in treatment" and not "complete treatment". Both [REDACTED] and [REDACTED] believe they could argue that [REDACTED] participated in treatment.

On Friday, [REDACTED] from Roanoke Schools visited. She contacted us about visiting [REDACTED] and touring the facility. When she learned that [REDACTED] was discharged she stated she was very disappointed with [REDACTED]'s decision but planned on visiting regardless. [REDACTED] spent a little over 2 hours touring the facility, meeting our Medical director and discussing [REDACTED] case. [REDACTED] took additional information with her and stated that she will be referring other children as she was pleased with the services offered. [REDACTED] has court scheduled for 2/21/12, and [REDACTED] stated she will be in touch with us due to the uncertainty that [REDACTED] will be successfully in the community.

If you have any additional questions, please let me know!

[REDACTED]

**From:** [REDACTED]  
**Sent:** Thursday, February 09, 2012 2:44 PM  
**To:** 'Seymour, Mark (DBHDS)'  
**Subject:** RE: Son in residential

Good Afternoon Mark,

It was nice to see both you and Chris on Monday and thanks for following up with me yesterday regarding [REDACTED]. I spoke with [REDACTED] yesterday regarding [REDACTED] complaints and concerns and my plan moving forward. I reminded [REDACTED] that we spoke back in January when she had concerns about [REDACTED] attending his FAPT meeting in person instead of by phone and being able to privately talk to his team. [REDACTED] stated she remembered and I asked since then what issues/concerns does she have. [REDACTED] stated that she did not call me because her trust with North Spring did not start off on the right foot because she feels she was not informed what type of program [REDACTED] was going to when they made the decision to send [REDACTED] to North Spring. [REDACTED] went over her various concerns which are similar to those listed below. I understand that [REDACTED] is in a difficult situation, she does not believe [REDACTED] needs this level of care but if she discharges [REDACTED] ([REDACTED] is the guardian) then he will not receive funding FAPT to get other services he needs. I can't assist [REDACTED] in making this decision but explained that I can try to figure out on our end what

issues/concerns can be addressed. I explained my plan to [REDACTED] and immediately went to meet with [REDACTED] for two and a half hours.

[REDACTED] had a treatment team meeting yesterday and told the team that he is refusing to do anything until he feels his rights and needs are being met. He is upset that he was not able to attend his IEP meeting on 1/27/12, and [REDACTED] has filed a complaint with the VA Department of Education. I had previously read both [REDACTED] IEP and admission's paper work prior to meeting with [REDACTED] and talking to [REDACTED]. [REDACTED] IEP was from October and my understand another IEP is not completed until a year later. I asked our Director of Education and she did not have an IEP meeting scheduled for 1/27/12. I have inquired from [REDACTED] [REDACTED]'s case manager what type of meeting took place and believe it may have been an meeting with [REDACTED] home school board but not an IEP meeting.

Both [REDACTED] and [REDACTED] have a very different interpretation of [REDACTED] IEP. [REDACTED] explained that his IEP said he could use word processor and a calculator at all times. I showed [REDACTED] his IEP and explained that is not what it says as I explained his Educational goals both while at North Spring and when admitted. My conclusion is that these services were provided at a previous placement there for [REDACTED] and [REDACTED] believe these services are written into the IEP. I did a few math problems with [REDACTED] to see "his way" of learning math. I have received his educational progress reports where [REDACTED] was receiving all A's and 1 B except for math which he was failing. [REDACTED] explained that was last quarter and now he is not doing any work because he doesn't feel like he is going to ever get out of North Spring. My concerns, as I explained them to [REDACTED] was that he isn't attempting to try to complete his math work. He isn't showing his work, even if it is done in "his way" he either refuses or hands in a paper with the answers to certain questions that were provided as examples in the back of the book.

I quickly saw that [REDACTED] was beginning to doubt that I was going to be able to help him get out of North Spring and that I was just another person that was going to listen to his complaints and not assist him with discharge. I took a sentence that [REDACTED] said "there were things I wanted to work on when I came to North Spring" and asked for him to explain further. [REDACTED] said he wants to work on his relationship with his family (communication), school and his depression. [REDACTED] and I came up with this plan together.

- [REDACTED] has his level 1 with enough days to go up for his level 2 on Wednesday.
  - [REDACTED] will complete the level petition to go up for his level 2 on Wednesday
  - I will review his past level petition and the reason's he wasn't able to obtain his level previous.
  - I am meeting with [REDACTED] therapist and unit coordinator next Monday to review the level petition prior to Wednesday's unit meeting
- [REDACTED] is not doing well on any classes do to his lack of motivation and not completing any assignments this quarter
  - I spoke with [REDACTED] staff member this morning and requested that he accompany [REDACTED] to each class today to get a missing list of assignments that need to be completed.
  - I am meeting with [REDACTED] today at 2:45 to review the list and attempt to get a plan to address the missing assignments and get his grades up.
  - Since [REDACTED] is struggling with Math, arrangements have been made to [REDACTED] to receive additional help to get his math grades up, this is all dependent on [REDACTED] putting in the work.
  - I have followed up internally and externally regarding the IEP meeting on 1/27/12, to find out what the meeting was about, who attended and why [REDACTED] was not able to attend. I told [REDACTED] and [REDACTED] that I will let them both know what I find out.
  - The school system mentioned that [REDACTED] had a court order to complete treatment, which we do not have a copy of and did not realize there was a court order in place. This has been requested of the locality to assist us in resolving [REDACTED] concerns as well.
- [REDACTED] is having difficulty finding motivation and misses his family, he stated he was working towards his level 2 so that he could go on passes with his family.
  - I have contacted his case manager, Owen to get the Medicaid Cab information together for [REDACTED] [REDACTED]. We will provide [REDACTED] with this information in addition to offering more face to face family therapy sessions, the weekend family MDT training sessions and when [REDACTED] gets his level 2 therapeutic passes. I am hoping that with the transportation piece figured out [REDACTED] will be able to visit [REDACTED] on a more consistent basis.

- o I spoke with [redacted]'s therapist and he is currently providing two weekly phone and will encourage [redacted] to attend face to face sessions and the weekend trainings.
- o [redacted] stated that his bio- father should be on his contact log and I told him I will follow up with [redacted] to confirm this request and then will follow up with [redacted] case manager.
- [redacted] is requesting daily reports. I explained in writing to [redacted], [redacted] case manager what form needs to be completed for a release of records and explained it to [redacted] as well when I spoke to her yesterday. [redacted] emailed [redacted] the form and I hope to have all requested records sent out on Monday if I receive the request today or tomorrow.

[redacted] has court on the 23<sup>rd</sup> or 24<sup>th</sup> of February, I explained the important of showing the best possible picture to the Judge when he attends court. Regardless if [redacted] decides to discharge [redacted] prior to this court date, [redacted] agrees the above referenced list needs to be addressed to show the best possible outcome. I will follow up with [redacted] tomorrow regarding [redacted] plan listed above and the outcomes of the issues/concerns that [redacted] presented. If you have any additional questions or concerns, or if I forgot something please let me know.  
Thanks,  
[redacted]

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**From:** Seymour, Mark (DBHDS) [mailto:Mark.Seymour@dbhds.virginia.gov]  
**Sent:** Wednesday, February 08, 2012 10:37 AM  
**To:** [redacted]  
**Subject:** FW: Son in residential

J. Mark Seymour, M.Div  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

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**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:30 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Margaret,

I did not copy this response to [redacted] in the event you wished to convey it in some other manner. I am also unclear as to whether these emails come from the young man's mother (his legal guardian) or from his step-father father ([redacted]) who, according to North Spring records, is not a legal guardian.

Chris, let us know if you have a different understanding of this.

Thanks

Mark

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**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:12 AM



**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, Kelly Neverson, regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.

*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this).*

*Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*

- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.

*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*

- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.

*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while cursing and kicking the wall. We have asked [REDACTED] to find the reason for the resident being in the hall in the first place. [REDACTED] stated that North Spring does not employ techniques of having students stand for 45 minutes at a wall. Clearly, this young man was experiencing distress during that first full day at the facility, and it may be that an immediate immersion into the classroom environment immediately following an arduous day of admissions procedures and a late arrival at the unit the night before may have been contraindicated.*

- The resident made allegations of verbal abuse by a specific staff member, alleging that the staff member referred to him by several derogatory names, and then addressed the entire unit of children in an inappropriate manner.

*Chris and I found this allegation by the resident to be very compelling. [REDACTED] will investigate and interview staff.*

- The resident stated that children are restrained by being forcibly extended at the waist while sitting on the ground until their noses hit the floor.

*The physics of such a position seemed unlikely. [REDACTED] stated that restraints typically involve a child in a seated position with staff members holding ankles and arms to prevent injury. I have observed this technique on North Spring video taken from hall cameras, and have not observed children being forcibly pushed forward. Still, this young man's allegation should not be dismissed out of hand, as the full accuracy of an allegation, versus its intent, are sometimes different things. I think it is fair to say that, although he is a sizable resident, he has been frightened by the observation of peers being restrained (and it is noteworthy that this young man has been in no restraints himself while at North Spring; it is also noteworthy that North Spring has significantly reduced the number of restrictive interventions).*

- The resident stated that staff make fun of children during restraints.

*The resident reported that this is his understanding given to him by peers. Chris and I spoke with [REDACTED] regarding this observation. Staff should be mindful of how they communicate with one another and with children during a restraint.*

- This resident complained that he has not attended his IEPs.

*Chris and I emphasized with [REDACTED] the need for all residents to be able to have meaningful participation in all aspects of their treatment. In the case of this particular resident, it seems that there is conflict between his mother (legal guardian) and his locality. We also noted that the family has made requests for the resident to physically attend his FAPT meetings, but to do so would have entailed a six-hour round trip for perhaps a twenty-minute meeting. We emphasized with [REDACTED] the need for North Spring to be in frequent and meaningful contact with this resident's mother in order to ensure helpful communication and positive outcomes.*

I know that Chris may have some other perspectives on this meeting from his notes.

Thanks

Mark

---

**From:** Walsh, Margaret (DBHDS)  
**Sent:** February 07, 2012 8:47 AM  
**To:** [REDACTED]  
**Cc:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Mark Seymour from the Office of Human Rights and Chris Cart of the Office of Licensing went to North Spring yesterday. I have not heard from them yet about the outcome. Mark and Chris are copied on this email so they may provide an update on the status of the investigation.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services

1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Tuesday, February 07, 2012 8:36 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Re: Son in residential

I need to know what was founded or whether you are still investigation. Today on our phone therapy session with the [REDACTED], [REDACTED] was asked on what complaints he had and if they were valid. I tried to get [REDACTED] not to discuss it but he told him about it all. I am wondering if this is appropriate for the therapist to be asking.

[REDACTED]

[REDACTED]

----- Original Message -----  
**From:** Walsh, Margaret (DBHDS)  
**To:** [REDACTED]  
**Cc:** Saltzberg, Les (DBHDS) ; Seymour, Mark (DBHDS) ; Cart, Christopher (DBHDS)  
**Sent:** Monday, February 06, 2012 7:06 AM  
**Subject:** RE: Son in residential

Good morning,  
The Office of Human Rights is working together with the Office of Licensing to investigate the situation. It is my understanding that Mr. Cart and Mr. Seymour will be at North Spring this week to look into your concerns.

Thank you

Margaret S. Walsh, Director  
Office of Human Rights  
Dept. of Behavioral Health and Developmental Services  
1220 Bank Street  
Richmond, Virginia 23218  
804-786-2008  
fax-804-371-2308

**From:** [REDACTED]  
**Sent:** Saturday, February 04, 2012 10:27 AM  
**To:** Walsh, Margaret (DBHDS)  
**Subject:** Son in residential

Hi,

I have concerns with the residential treatment center that my son is residing. He was placed there upon recommendation of the school. I agreed per he was refusing to go to school and we were having problems at home. I now regret my decisions per I do not agree with their methods and I feel like they are mentally mistreating my child. I tried to get him moved but FAPT would not agree. I am told that if I take him out against medical advice that I could lose funding for any services that he needs.

My concerns with the facility are:

1. They continue to take privileges any from my son per having difficulty in math and handwriting. (He has average intelligence but very low processing speed and is borderline dysgraphia) Noted in from previous school reports and I.E.P s Regardless to the fact that he is making "A"s in the rest of his classes. (No free time privileges, No opportunity to earn extra phone calls home, Early Bedtime) He is been punished for not getting all the work done. His teacher also refused his work on several occasions because it was sloppy despite his handwriting difficulties.

2. They lied about the programs that they had to offer.

3. They do not give clear answers to my concerns or avoid the questions.

4. He was not allowed to go outside for the first 18 days upon arrival. Now it has been over 3 weeks since he has been outside. They have a fence area for recreation but he was not allowed to utilize it.

5. One staff member refers to the boys as "Dirty Ass Boys"

6. The distance is an obstacle for frequent participation and visitation.

7. They do allow his participation in FAPT meetings having an opportunity to speak in private with the school.

They wait until he got is report card with all "A"s except for math to tell me that he would be on privilege restriction until he got his math grade up. No free time, no going to the gym, early bedtime and not being able to earn extra phone calls home.

8. They are not allowing him to move up in his levels for vague reasons. He was not allowed to achieve his level because they said that he was suppressing his feelings. He achieved 28 non-sequence days out of 29 days but they denied him.

When I questioned this they changed it to that he was not doing things in a timely manner. Now it is back to him needing to improve on math.

9. They will not provide daily reports to me (weekly, monthly or at all) as requested and no real explanation on why they will not. I only get the team meeting report and last time it took almost a month to arrive.

10. My son frequently does not get adequate sleep during the night per the bed alarms are always going off.

My son has to voice his thoughts on this in therapy via telephone conference between his therapist and I. When he tries to talk about it (in a very mature and reasonable manner, he is told that complaining will just hold him back.

They did not allow him to attend his I.E.P on 1/27 via phone conference with the school. He stated to several staff members that he wanted to attend. The only representative from North Spring that attended was his Case Manager. He lied to the school on what level that my son is on. I told him to verify for sure, again he told me that my son was on level 2. My son is still on level one; I confirmed it with the therapist on 2/29. He is still on level 1 and has received a safety for talking after bedtime.

They took him off of his medication for his depression and still have not notified me of this. He has been on this medication for 3 years now. The side effects of being taken off of Abilify suddenly can cause extreme irritability and cause him more problems. I feel that their program is set up to make kids fail and discourage them. I feel this is their way on keeping them in as long as they can to receive funding.

I do not feel continuing to take away all privileges (which are very few) for having problems in one subject, (when a child is trying so hard) is therapy. I would consider this mentally abusive.

I have report my concerns to Les Salsberg and he state that he would investigate. I am waiting to hear back from him. I have also contacted Medicaid about the level of care my child is receiving. I have also file a complaint with DOE on my son not being able to attend his I.E.P. meeting. I have also spoken to [REDACTED] from VOPA. She stated as of now we don't have enough for intake. She did give me some suggestions and was very helpful. As she suggested, I have requested an assessment for Assistive technology, but they have 65 days to comply. Meanwhile they continue to use punitive actions against my son for his disabilities.

I do not feel this is the right placement for my son and that he would do fine in a least restrictive environment. The school has put my in a position that I cannot choose what I feel is best for my son. They are basing it on the fact that a least restriction environment did not work in the past. My son did not receive the wrap around services from coming home from his last residential program. It was a change in localities and a lot of confusion. I did not push them for these services enough because I was not educated enough on how valuable they were. He also was not getting is educational needs meet per it was not until this year that the school tested him for low processing speed. I feel like most of his frustration at school was because nobody was giving him assistance in that area.

I have not trust in the facility per the lies and deception. This is an obstacle for us to move forward. My son has no trust or faith in them creating an obstacle in his treatment. I feel that they are doing more harm than good for my son.

I need to get my son moved as soon as possible with losing his right for wrap around services and private day school

Please Advise, if you can help.

**North Spring Behavior Healthcare Leesburg, VA**

[REDACTED]

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**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:41 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare/Sean Tyler Smith

**From:** Seymour, Mark (DBHDS)  
**Sent:** Tuesday, February 14, 2012 10:58 AM  
**To:** Cart, Christopher (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare/[REDACTED]

Chris,  
I was out sick yesterday and did not see this until today. After reading [REDACTED]'s email (or is it [REDACTED]) three times, I'm not really certain what she is asking for. She indicates that she has established a good rapport with [REDACTED], so I am curious as to why she is not contacting [REDACTED] further (other than for the disposition of our investigation).  
Mark

**From:** Kevin [<mailto:klochner@cox.net>]  
**Sent:** February 13, 2012 6:33 AM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** North Spring Behavior Healthcare/[REDACTED]

Can you get me an update on the investigation. [REDACTED]/North Spring Behavior Healthcare? I pulled my child out per his treatment was getting worse. His safety was a concern for me. Please contact us for details. I need some documentation of the investigation for the school and for his court date on Feb 21st for a chins order requiring his participation at North Spring. I had to make a parental decision on protecting my child. He said that there should be video to document some of these events. [REDACTED], risk management at North Spring assisted us in his discharge on 02/09/12. I think she would be most likely to give honest answers.

[REDACTED]

[REDACTED]

[REDACTED]

**Stith, Stella (DBHDS)**

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**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:41 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** Seymour, Mark (DBHDS)  
**Sent:** Tuesday, February 14, 2012 11:13 AM  
**To:** [REDACTED], Cart, Christopher (DBHDS)  
**Subject:** RE: Son in residential

Thanks, [REDACTED] Obviously, [REDACTED] had not been in contact with her son's school system.  
Mark

**From:** [REDACTED]  
**Sent:** February 13, 2012 2:50 PM  
**To:** Cart, Christopher (DBHDS)  
**Cc:** Seymour, Mark (DBHDS)  
**Subject:** RE: Son in residential

Just wanted to catch you both up with where we are in regards to SS.

Thursday, February 9<sup>th</sup>, [REDACTED] arrived at North Spring at 11:30 pm to discharge [REDACTED]. She had met with an attorney earlier that day who brought her attention to a loop hole in the Court Order for [REDACTED]. The phrase that was used stated [REDACTED] must "participate in treatment" and not "complete treatment". Both [REDACTED] and [REDACTED] believe they could argue that [REDACTED] participated in treatment.

On Friday, [REDACTED] from Roanoke Schools visited. She contacted us about visiting [REDACTED] and touring the facility. When she learned that [REDACTED] was discharged she stated she was very disappointed with [REDACTED] decision but planned on visiting regardless. [REDACTED] spent a little over 2 hours touring the facility, meeting our Medical director and discussing [REDACTED] case. [REDACTED] took additional information with her and stated that she will be referring other children as she was pleased with the services offered. [REDACTED] has court scheduled for 2/21/12, and [REDACTED] stated she will be in touch with us due to the uncertainty that [REDACTED] will be successfully in the community.

If you have any additional questions, please let me know!  
[REDACTED]

**From:** [REDACTED]  
**Sent:** Thursday, February 09, 2012 2:44 PM  
**To:** 'Seymour, Mark (DBHDS)'  
**Subject:** RE: Son in residential

Good Afternoon Mark,

It was nice to see both you and Chris on Monday and thanks for following up with me yesterday regarding [REDACTED] I spoke with [REDACTED] yesterday regarding [REDACTED] complaints and concerns and my plan moving forward. I reminded [REDACTED]

██████████ that we spoke back in January when she had concerns about ██████████ attending his FAPT meeting in person instead of by phone and being able to privately talk to his team. ██████████ stated she remembered and I asked since then what issues/concerns does she have. ██████████ stated that she did not call me because her trust with North Spring did not start off on the right foot because she feels she was not informed what type of program ██████████ was going to when they made the decision to send ██████████ to North Spring. ██████████ went over her various concerns which are similar to those listed below. I understand that ██████████ is in a difficult situation, she does not believe ██████████ needs this level of care but if she discharges ██████████ (██████████ is the guardian) then he will not receive funding FAPT to get other services he needs. I can't assist ██████████ in making this decision but explained that I can try to figure out on our end what issues/concerns can be addressed. I explained my plan to Ms. Lochner and immediately went to meet with ██████████ for two and a half hours.

██████████ had a treatment team meeting yesterday and told the team that he is refusing to do anything until he feels his rights and needs are being met. He is upset that he was not able to attend his IEP meeting on 1/27/12, and ██████████ has filed a complaint with the VA Department of Education. I had previously read both ██████████ IEP and admission's paper work prior to meeting with ██████████ and talking to ██████████. ██████████ IEP was from October and my understand another IEP is not completed until a year later. I asked our Director of Education and she did not have an IEP meeting scheduled for 1/27/12. I have inquired from ██████████, ██████████ case manager what type of meeting took place and believe it may have been an meeting with ██████████ home school board but not an IEP meeting.

Both ██████████ and ██████████ have a very different interpretation of ██████████ IEP. ██████████ explained that his IEP said he could use word processor and a calculator at all times. I showed ██████████ his IEP and explained that is not what it says as I explained his Educational goals both while at North Spring and when admitted. My conclusion is that these services were provided at a previous placement there for SS and Ms. Lochner believe these services are written into the IEP. I did a few math problems with ██████████ to see "his way" of learning math. I have received his educational progress reports where ██████████ was receiving all A's and 1 B except for math which he was failing. ██████████ explained that was last quarter and now he is not doing any work because he doesn't feel like he is going to ever get out of North Spring. My concerns, as I explained them to ██████████ was that he isn't attempting to try to complete his math work. He isn't showing his work, even if it is done in "his way" he either refuses or hands in a paper with the answers to certain questions that were provided as examples in the back of the book.

I quickly saw that ██████████ was beginning to doubt that I was going to be able to help him get out of North Spring and that I was just another person that was going to listen to his complaints and not assist him with discharge. I took a sentence that ██████████ said "there were things I wanted to work on when I came to North Spring" and asked for him to explain further. ██████████ said he wants to work on his relationship with his family (communication), school and his depression. ██████████ and I came up with this plan together.

- ██████████ has his level 1 with enough days to go up for his level 2 on Wednesday.
  - ██████████ will complete the level petition to go up for his level 2 on Wednesday
  - I will review his past level petition and the reason's he wasn't able to obtain his level previous.
  - I am meeting with ██████████'s therapist and unit coordinator next Monday to review the level petition prior to Wednesday's unit meeting
- ██████████ is not doing well on any classes do to his lack of motivation and not completing any assignments this quarter
  - I spoke with ██████████ staff member this morning and requested that he accompany ██████████ to each class today to get a missing list of assignments that need to be completed.
  - I am meeting with ██████████ today at 2:45 to review the list and attempt to get a plan to address the missing assignments and get his grades up.
  - Since ██████████ is struggling with Math, arrangements have been made to ██████████ to receive additional help to get his math grades up, this is all dependent on ██████████ putting in the work.
  - I have followed up internally and externally regarding the IEP meeting on 1/27/12, to find out what the meeting was about, who attended and why ██████████ was not able to attend. I told ██████████ and ██████████ that I will let them both know what I find out.



- o The school system mentioned that [REDACTED] had a court order to complete treatment, which we do not have a copy of and did not realize there was a court order in place. This has been requested of the locality to assist us in resolving [REDACTED] concerns as well.
- o [REDACTED] is having difficulty finding motivation and misses his family, he stated he was working towards his level 2 so that he could go on passes with his family.
  - o I have contacted his case manager, [REDACTED] to get the Medicaid Cab information together for [REDACTED] [REDACTED]. We will provide [REDACTED] with this information in addition to offering more face to face family therapy sessions, the weekend family MDT training sessions and when [REDACTED] gets his level 2 therapeutic passes. I am hoping that with the transportation piece figured out [REDACTED] will be able to visit [REDACTED] on a more consistent basis.
  - o I spoke with [REDACTED] therapist and he is currently providing two weekly phone and will encourage [REDACTED] [REDACTED] to attend face to face sessions and the weekend trainings.
  - o [REDACTED] stated that his bio- father should be on his contact log and I told him I will follow up with Ms. Lochner to confirm this request and then will follow up with [REDACTED]s case manager.
- o [REDACTED] is requesting daily reports. I explained in writing to [REDACTED]s case manager what form needs to be completed for a release of records and explained it to [REDACTED] as well when I spoke to her yesterday. Owen emailed [REDACTED] the form and I hope to have all requested records sent out on Monday if I receive the request today or tomorrow.

[REDACTED] has court on the 23<sup>rd</sup> or 24<sup>th</sup> of February, I explained the important of showing the best possible picture to the Judge when he attends court. Regardless if [REDACTED] decides to discharge [REDACTED] prior to this court date, [REDACTED] agrees the above referenced list needs to be addressed to show the best possible outcome. I will follow up with [REDACTED] [REDACTED] tomorrow regarding [REDACTED] plan listed above and the outcomes of the issues/concerns that [REDACTED] presented. If you have any additional questions or concerns, or if I forgot something please let me know.  
Thanks,

**From:** Seymour, Mark (DBHDS) [mailto:Mark.Seymour@dbhds.virginia.gov]  
**Sent:** Wednesday, February 08, 2012 10:37 AM  
**To:** [REDACTED]  
**Subject:** FW: Son in residential

J. Mark Seymour, M.Div  
 Senior Human Rights Advocate  
 Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
 phone: 540-332-2149  
 toll free: 877-600-7437  
 fax: 540-332-8314  
 WSH  
 P.O. Box 2500  
 Staunton, VA 24402-2500

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 07, 2012 10:30 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Margaret,

I did not copy this response to [REDACTED] in the event you wished to convey it in some other manner. I am also unclear as to whether these emails come from the young man's mother (his legal guardian) or from his step-father father ([REDACTED]) who, according to North Spring records, is not a legal guardian.

Chris, let us know if you have a different understanding of this.

Thanks

Mark

---

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**Sent:** February 07, 2012 10:12 AM  
**To:** Walsh, Margaret (DBHDS)  
**Cc:** Cart, Christopher (DBHDS); Saltzberg, Les (DBHDS); Collins, Chuck (DBHDS)  
**Subject:** RE: Son in residential

Good morning,

Chris and I reviewed North Spring during the morning and afternoon yesterday, spending a significant part of the afternoon meeting with the young man in question, reviewing his file, and speaking with North Spring's risk manager, Kelly Neverson, regarding him.

This bright, articulate young man met us in private and provided the following list of concerns:

- He understands that the grievance boxes, which are placed in each unit, are not checked by staff on a regular basis.

*This young man noted that he had my telephone number and was going to call me, but had not. I observed human rights posters prominently displayed on each unit (there was no poster in the lobby area or staff time-clock room, and a citation will be requested for this).*

*Chris and I reviewed the grievance box concern with [REDACTED]. She stated that the boxes are unlocked and the contents read two or three times per week. Some units seem to not generate any responses in the boxes. I will recommend that the boxes be checked daily, irrespective of the anticipated frequency of usage. Chris and I also emphasized the right of a child to communicate grievances in other ways than a written grievance, including through the therapist, the risk manager, the advocate, etc.*

- The resident is dissatisfied with the lack of opportunity for private phone conversations. He stated that it is difficult to ensure privacy when speaking on the unit wall phones.

*Chris and I asked [REDACTED] to provide the opportunity for this resident, as well as his peers, to have access to a private phone in an area which can be observed, but not heard, by staff. It was agreed that such calls could be accomplished in the meeting room known as "the fishbowl." Although the name is somewhat ominous, I have had meetings in this room, and it is actually conducive to privacy, being three or four steps down from a main lobby area and out of the line of direct traffic. It is a glass enclosed room, which contains only a conference table and chairs. It should be appropriate for ensuring privacy as well as safety. [REDACTED] agreed to make this room available to the resident.*

- The resident stated he was not treated with dignity or respect. Specifically, he stated that on his first full day at the facility he was removed from his classroom (for putting his head on the desk) and required to stand for forty-five minutes in the hallway. When he could no longer stand, he stated he sat down and was then physically removed to time out room.

*Chris and I reviewed the record and spoke with [REDACTED] regarding this allegation. The record is inconclusive on this matter; although the record shows that the student was indeed sitting in the hall on the date in question, and was then escorted, it is unclear as to the antecedent to this escort. The record does show that the resident was in the hall blocking other students' movement with his body, while*

~~Kevin Lochner~~  
~~XXXXXXXXXX~~

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:42 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare [REDACTED]

**From:** Seymour, Mark (DBHDS)  
**Sent:** Friday, February 17, 2012 8:48 AM  
**To:** [REDACTED]  
**Cc:** Cart, Christopher (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare/[REDACTED]

Good morning [REDACTED]

Have you been able to interview staff and/or children regarding the allegation of verbal abuse noted below?

THanks

Mark

**From:** Seymour, Mark (DBHDS)  
**Sent:** February 17, 2012 8:46 AM  
**To:** [REDACTED]  
**Subject:** RE: North Spring Behavior Healthcare/[REDACTED]

[REDACTED]

I did not mean to imply that the investigation of alleged verbal abuse is closed. It remains open.

Yours truly

J. Mark Seymour, M.Div  
Senior Human Rights Advocate  
Virginia Department of Behavioral Health and Developmental Services  
[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)  
phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** February 16, 2012 7:19 PM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** Re: North Spring Behavior Healthcare/[REDACTED]

Mr. Seymour,

I was dismayed to read your response after your investigation of my concerns about my son's treatment at UHS/North Spring. Is it

considered acceptable for a child to be removed from a medication and not notify the parents? A staff member referring to the children as "The Dirty Ass Boys" is not a problem? Not fulfilling the accommodations on an IEP and then punishing the child for not being successful without the mandated accommodations is ok? I would like to request a list of our concerns with a response to each one. I would like to request a copy of the investigation and report filled out by you and DBHDS.

You final statement regarding continued treatment of my son, does that mean continued treatment at North Spring particularly? Could you clarify why you believe his treatment there should continue?

I respectfully disagree with your findings and would like to know the process and contacts for an appeal of your findings.

Sincerely,

[REDACTED]

[REDACTED]

----- Original Message -----

**From:** Seymour, Mark (DBHDS)

**To:** [REDACTED]

**Cc:** Walsh, Margaret (DBHDS) ; Cart, Christopher (DBHDS) ; [REDACTED]

**Sent:** Thursday, February 16, 2012 10:00 AM

**Subject:** RE: North Spring Behavior Healthcare/[REDACTED]

Good morning [REDACTED]

I visited your son, with Mr. Christopher Cart, Licensing Specialist, at North Spring on February 6. At that time, Mr. Cart and I also spoke with [REDACTED], North Spring Risk Manager. In response to our review of your son's treatment, [REDACTED] implemented, within 24 hours of our visit, a series of interventions regarding your son's educational program. [REDACTED] also honored our request that your son be afforded opportunities to make private telephone calls off the unit. It is my understanding that he was able to utilize this opportunity in a call to you, just prior to your removing him from the program.

While I remain concerned about the circumstances surrounding your son's first day on campus and will request that North Spring provide me with a full description of how students, as well as parents, are oriented, Mr. Cart and I found the following: DBHDS Licensing and Human Rights finds the allegations of inappropriate treatment unfounded, and believe that continued treatment of this young man would be beneficial.

Yours truly,

J. Mark Seymour, M.Div

Senior Human Rights Advocate

Virginia Department of Behavioral Health and Developmental Services

[mark.seymour@dbhds.virginia.gov](mailto:mark.seymour@dbhds.virginia.gov)

phone: 540-332-2149

toll free: 877-600-7437

**From:** [REDACTED]  
**Sent:** February 16, 2012 7:19 PM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** Re: North Spring Behavior Healthcare/[REDACTED]

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Your final statement regarding continued treatment of my son, does that mean continued treatment at North Spring particularly? Could you clarify why you believe his treatment there should continue?

I respectfully disagree with your findings and would like to know the process and contacts for an appeal of your findings.

Sincerely,

[REDACTED]

[REDACTED]

----- Original Message -----

**From:** Seymour, Mark (DBHDS)  
**To:** [REDACTED]  
**Cc:** Walsh, Margaret (DBHDS) ; Cart, Christopher (DBHDS) ; [REDACTED]  
**Sent:** Thursday, February 16, 2012 10:00 AM  
**Subject:** RE: North Spring Behavior Healthcare/[REDACTED]

Good morning [REDACTED]

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the following: DBHDS Licensing and Human Rights finds the allegations of inappropriate treatment unfounded, and believe that continued treatment of this young man would be beneficial.

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phone: 540-332-2149  
toll free: 877-600-7437  
fax: 540-332-8314  
WSH  
P.O. Box 2500  
Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** February 13, 2012 6:33 AM  
**To:** Seymour, Mark (DBHDS)  
**Subject:** North Spring Behavior Healthcare/[REDACTED]

Can you get me an update on the investigation. [REDACTED]/North Spring Behavior Healthcare? I pulled my child out per his treatment was getting worse. His safety was a concern for me. Please contact us for details. I need some documentation of the investigation for the school and for his court date on Feb 21st for a chins order requiring his participation at North Spring. I had to make a parental decision on protecting my child. He said that there should be video to document some of these events. [REDACTED], risk management at North Spring assisted us in his discharge on 02/09/12. I think she would be most likely to give honest answers.

[REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]

**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:42 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Joint Commission

-----Original Message-----

**From:** [REDACTED]  
**Sent:** Wednesday, February 22, 2012 6:48 AM  
**To:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** Joint Commission

Good Morning Gentlemen,

[REDACTED] M.Ed., LPC, LCSW is currently on site to perform our Joint Accreditation Survey. I am available by email if you have any questions, but it may take longer than usually for me to respond or you will be receiving emails early in the morning or late in the evening.

Hope all is well, if you have any questions please let me know.

Thanks,  
[REDACTED]

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## **Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:42 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring Program Summary

**From:** [REDACTED]  
**Sent:** Wednesday, February 22, 2012 7:24 AM  
**To:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** North Spring Program Summary

Good Morning Gentlemen,

You asked that I provide you with a program summary of the modalities that we are currently using at North Spring. Sorry it took me longer to respond that I would have liked. I have tried to give you as much as possible with out going overboard©

### **Mode Deactivation Therapy (MDT)**

The idea of MDT was derived from Alford & Beck and their decision to expand cognitive behavioral therapy into more global constructs they called 'modes'.

The process of moving MDT from theory to practice includes DBT. MDT approaches the child's beliefs and behaviors through finding the grain of truth and validating them rather than challenging the cognitive distortions. The other major similarity between DBT and MDT is the use of balancing the dialectical thinking of the client.

Considering reinforcement history in the context of a person provides the MDT-informed clinician with a more complete assessment of the specific behaviors of that person. MDT evaluates the adolescent's patterns of behaviors through examining their core beliefs and their fears/avoids paradigm. Interventions are focused on helping the adolescent become more aware of these "modes" by making connections between their acting out behaviors and their beliefs.

Acceptance and Commitment Therapy (ACT) techniques such as, acceptance, mindfulness and defusion are cornerstones of current MDT practice.

Clearly an adaptation is necessary. The children we treat have long histories of sexual, physical, and/or emotional abuse. Often they respond in ways that are interpreted as characteristic of personality and/or conduct disorders. These are youngsters that may respond by committing sexual offenses, aggressive acts, and/or other aberrant behaviors. MDT is a methodology that addresses dysfunctional schemas through systematically assessing and restructuring underlying compound core beliefs - beliefs that often found their genesis in trauma experiences.

To change behavior of individuals there must be a restructuring of the experiential components and a corresponding cognitive restructuring of the structural components. The dysfunctional experiential and structural learning (conscious and unconscious) develop dysfunctional schemas that generate high levels of anxiety, fear, general irrational thoughts and feelings, as well as aberrant behaviors. This system is self-reinforcing and protected by the development of a conglomerate multiple clustered compound core beliefs - often interpreted as burgeoning personality disorders. Mode Deactivation Therapy includes centering, imagery and relaxation techniques (mindfulness) to facilitate cognition. This is followed by balance training, which teaches the youngster to balance his perception and interpretation of


information and internal stimuli. MDT is built on the mastery system for youngsters. They move through a workbook at the rate of learning that accommodates their individual learning style. The system is designed to allow the youngster to experience success prior to undertaking more difficult materials. MDT focuses first upon structured assessment and case conceptualization, which then leads naturally into an individualized intervention plan.

### **PARENT MANAGEMENT TRAINING (PMT)**

As a way of addressing compounding presenting problems for children with sexual behavior problems, the utilization of Parent Management Training (PMT) is included in treatment interventions. PMT was crafted by Alan Kazdin, Ph.D., ABPP. PMT provides that structure to train parents to manage their child's behavioral problems in the home and at school. In PMT, parent-child interactions are modified in ways that are designed to promote prosocial child behavior and to decrease antisocial or oppositional behavior. Over 40 years of research support the efficacy of this intervention to address conduct related concerns in children under the age of 15.

At NSBH, the Mental Health Technicians and Educational Personnel are trained to utilize PMT concepts and interventions as they interact with the children and work to replace non-compliant, disruptive behaviors with compliant, prosocial interactions. Reinforcement of prosocial and nondeviant behavior is central to treatment. The program utilizes reinforcement and loss of privileges, contingent on the child's behavior, to provide consequences consistently, to attend to appropriate behaviors and to ignore inappropriate behaviors, to apply skills in prompting, shaping and fading. There is an extensive amount of practice and shaping of the desired behavior throughout all interactions with the children.

Treatment sessions include instruction in social learning principles and techniques. The therapist provides a brief overview of underlying concepts, models the techniques for the parents and coaches parents in implementing the procedures. The procedures and interaction patterns practiced in the sessions are then used in the by the parents throughout interactions with their child.

  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
42009 Victory Lane  
Leesburg, VA 20176  
Tele: (703) 777-0800 x 117  
Cell: (301) 461-7039  
Fax: (703) 777-0812  
[kelly.neverson@uhsinc.com](mailto:kelly.neverson@uhsinc.com)

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**Stith, Stella (DBHDS)**

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:43 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Med Error

**From:** [REDACTED]  
**Sent:** Wednesday, February 22, 2012 7:31 AM  
**To:** Seymour, Mark (DBHDS); Cart, Christopher (DBHDS)  
**Subject:** Med Error

Good Morning Again,

While stocking medication from the pharmacy, the nurse noted that a new admission on Alpha had received the wrong dose from the pharmacy. His olanzapine was received from the pharmacy with the wrong label "to be given at both 630 and 2000". His doctor's order was to receive 1.25 mg at 6:30am and 2.5mg at 2000. The child's vitals were taken, the Medical Director and guardian were notified. If you have any questions, please let me know.

[REDACTED]

Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare  
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## Stith, Stella (DBHDS)

---

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:43 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: Son in residential

**From:** [REDACTED]  
**Sent:** Thursday, February 23, 2012 5:20 PM  
**To:** Seymour, Mark (DBHDS)  
**Cc:** Cart, Christopher (DBHDS)  
**Subject:** Son in residential

Good Evening Mark,

Things have been busy, so I apologize for not getting back to you sooner. In regards to the allegation of staff referring to the kids as "Dirty ass boys" The staff member involved was interviewed and denied the allegation. ( [REDACTED] had also alleged that he called him a "little shit") In conversation the staff member said he may have said the word "shit" by accident but assured me it was never towards the children or referring to the child in derogatory names. Staff was provided education on cursing and a therapeutic approach with the milieu.

During this investigation I learned a lot about my male patients on Delta unit. I met with the boys individually including two of [REDACTED] roommates who [REDACTED] named as witnesses to the cursing by staff. I asked each of the patient specific questions regarding the staff on the unit, ways we can improve the unit, what could be done differently, any concerns they have, what would they do differently if they could do anything. While a few said minimal, other's gave me tons of feedback. They did not talk about staff cursing at them or being called names. Consistency was the biggest issue. The day staff has a different routine than the evening staff, some staff offer more prompts than others, consequences aren't always following the patient handbook. I have a few great ideas in the works and would like to increase the empowerment that are patients have in the program. The kids did a great job of articulating themselves and it was well worth the time spent.

[REDACTED] asked that myself, [REDACTED] (Education Director) [REDACTED] (Testing Coordinator) and [REDACTED] (Case Manager) sit in on [REDACTED]'s IEP meeting on February 17<sup>th</sup>. The IEP Team presented an unified position that [REDACTED] needed residential care. They asked North Spring to discuss the accommodations made for [REDACTED] IEP and pointed out a calculator was never written into the IEP, which was one of mom and [REDACTED]'s complaints. Mom was with an attorney, who I could not clearly hear her name. [REDACTED] referred to other allegations that had not been brought up prior. When asked North Spring response I stated I was not informed of any prior allegations. I was asked about the allegation of verbal abuse and stated the same response that is above and our conversation with the staff member.

[REDACTED] had court on Tuesday, the 21<sup>st</sup> and while he has been discharged from North Spring, I believe this is not the last we have heard from the family. We were notified that mom filed a complaint with the Department of Education based on the allegation of neglect of [REDACTED] IEP. We are currently in the process of aiding that investigation.

If you have any additional questions or concerns, please let me know. Or if I have forgotten to address something, things have been busy so I wouldn't put it past me. My Joint Commission review will be over tomorrow and I will follow up with you.

Thanks again,

[REDACTED]  
Director of Risk Management/Performance Improvement  
North Spring Behavioral Healthcare

42009 Victory Lane  
Leesburg, VA 20176  
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**Stith, Stella (DBHDS)**

---

**From:** Saltzberg, Les (DBHDS)  
**Sent:** Tuesday, March 06, 2012 9:04 AM  
**To:** Stith, Stella (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare/Sean Tyler Smith

fyi

**From:** Cart, Christopher (DBHDS)  
**Sent:** Tuesday, March 06, 2012 8:49 AM  
**To:** Saltzberg, Les (DBHDS)  
**Subject:** FW: North Spring Behavior Healthcare/Sean Tyler Smith

FYI, below is our finding, I have not put everything in OLIS however plan to have it completed by the end of the week. Also sent all e-mails to Stella.

Thanks  
Chris

**From:** Seymour, Mark (DBHDS)  
**Sent:** Thursday, February 16, 2012 10:00 AM  
**To:** [REDACTED]  
**Cc:** Walsh, Margaret (DBHDS); Cart, Christopher (DBHDS); [REDACTED]  
**Subject:** RE: North Spring Behavior Healthcare/[REDACTED]

Good morning [REDACTED]

I visited your son, with Mr. Christopher Cart, Licensing Specialist, at North Spring on February 6. At that time, Mr. Cart and I also spoke with [REDACTED], North Spring Risk Manager. In response to our review of your son's treatment, [REDACTED] implemented, within 24 hours of our visit, a series of interventions regarding your son's educational program. [REDACTED] also honored our request that your son be afforded opportunities to make private telephone calls off the unit. It is my understanding that he was able to utilize this opportunity in a call to you, just prior to your removing him from the program.

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Staunton, VA 24402-2500

**From:** [REDACTED]  
**Sent:** February 13, 2012 6:33 AM

**To:** Seymour, Mark (DBHDS)

**Subject:** North Spring Behavior Healthcare/[REDACTED]

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[REDACTED]

[REDACTED]