EXHIBIT XIII.

Mr. StevenWinkler- Mr. Kapneck's brother-in-law emails

To: C.T.P.H.C. (CEO) Marian Fogan, (Clinical Director) Mr. Scott Moran, Ms. Iris Mielke- (MDH) Mr. Bryan Mroz, Ms. Katherine Jou- (OPD) Esq. Mr. Sanjeev Varghese-Ms. Nubia Henry

October 29, 2023- July 23, 2023- January 21, 2023- January 17, 2023- November 8, 2022- October 20, 2022- October 5, 2022- September 17, 2022- January 4, 2021- December 29, 2020- December 07, 2020

EXHIBIT FACTS/INFO. SHEET



*Due to time constraints, the page herein has not been fully constructed. The "Facts/Info. Sheet" was designed to assist the Finder of Fact when considering exculpatory /substantive information extracted from the following exhibit.

*See Exhibit IV. for a completed "Facts/Info. Sheet"

Pt. Michael Kapneck - URGENT

2 messages



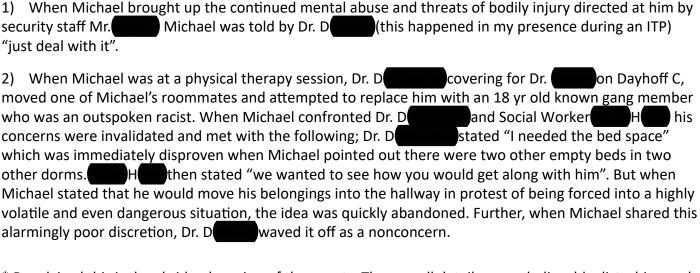
To all concerned parties,

To begin, SGHC patient Michael Kapneck hereby formally requests that this email and its entire contents be added to his chart. As the department is well aware, my brother-in-law Michael Kapneck's court appointed attorney (Secretary) withdrew his appearance under the false pretense that Michael had ample funds for his own legal representation. This last-minute manipulation by the OPD (Office of the Public Defender) has caused an absolute train wreck, stifling Michael's movement, treatment and overall faith in the process, which was already terribly undermined. It has also been known that Michael's hospital course has been riddled with controversies, many of which have been recognized by the resident's grievance system, the office of healthcare quality, Disability Rights Maryland and a multitude of Michael's Psychiatrists. As if by design, the unbridled barrage of mental abuse is allowed to continue with impunity.

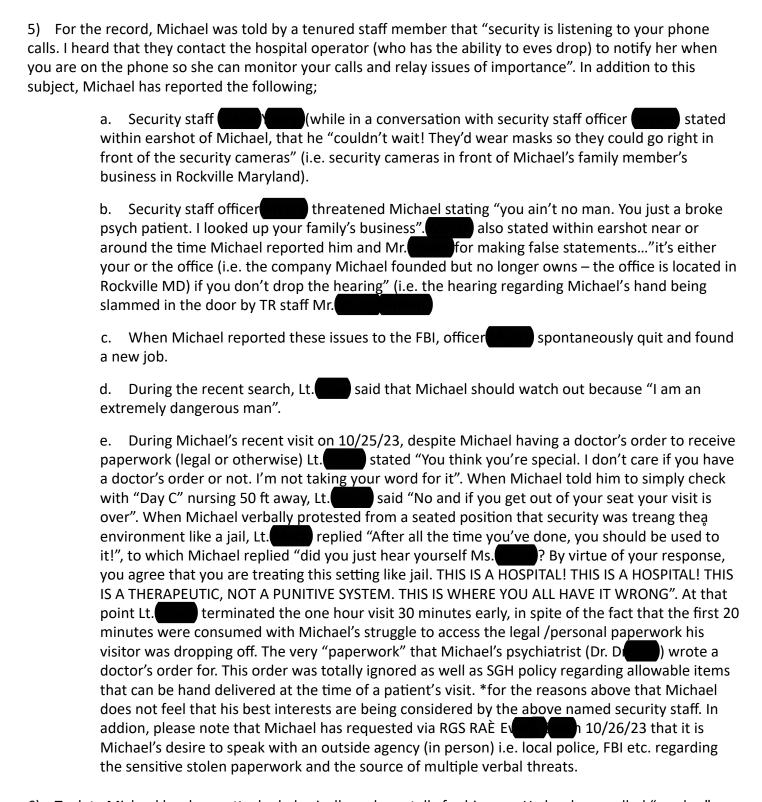
In the past, I have personally contacted Montgomery Country Police regarding threats directed at Michael and his family (as part of his family, those threats have been directed at me) from gang members. To my shock Michael was placed on a ward which housed two self professed gang members and a security staff (officer proudly displayed a tattoo on his forearm, declaring his affiliation with this horrendous criminal gang. Michael was in such fear that he brought this to the attention of his treating psychiatrist (Dr. D who had a conference call with SGH clinical director Dr. C but little was done to protect Michael from the seemingly endless mental abuse that came from security staff Mr. This continued through Michael's hospital course and became so detrimental to his health and safety that we requested a transfer on multiple occasions, to no avail. We were met instead with multiple resistance.

It should be noted that Dr. Head of Admissions at SGH who obviously knew about the members who were stationed on Dayhoff C, worked with CTPHC's M to have Michael transferred to that particular unit. Despite the voluminous documentation covered in the attached emails (i.e. exhibits 12 & 13) pertaining to this subject, it should also be stated that when Michael was transferred to the Red Bricks Building, he was placed on a unit with three known Gang members which sparked the attached ' REFERENCE & SGH POLICY VIOLATIONS EMAIL" / request for transfer; i.e. see Transfer Req #1 & transfer Req #2 – which were IGNORED. While these above items might seem like mere talking points concerning Michael's situation, they became the focal point of his daily fears at SGH for what should be obvious reasons. The very entity which was supposed to be treating Michael's condition, created a fertile environment which not only undermines his treatment in progress, but has in many ways exacerbated it. Dr. B and So should be fully investigated for their direct involvement in this scandal.

EXAMPLES



- * Be advised this is the abridged version of the events. The overall details are unbelievably disturbing and available upon request.
- 3) Since Michael has been on Dayhoff C (approx. 10 months) Dr. D routinely expresses the following points at the beginning of each Community Meeting. Namely; "we want an environment free of violence or the threat of violence. We want an environment of respect and with that, all patients should speak respectfully to staff and vice versa. Hence, if a staff treats you poorly or is being disrespectful, bring it to my attention and it will be dealt with". But as the months unfolded, he later changed that declaration by stating; "when you have an issue with a staff member and you bring it to my attention, you put me in a precarious position". Thereby in essence stating the first example; "if you have a problem just deal with it". This method of governing subordinates has proven to be ineffective as the next example will reflect.
- 4) Michael's room was recently searched, led by Lt. & Lt. two security staff who have continually berated Michael, constantly targeting and triggering him and treating him unfairly / unprofessionally. SGHC020587 CONTRABAND AND CONTRABAND SEARCHES POLICY & PROCEDURE states (on Pg. 1 under policy B. & C.)...B. "patients' rights, dignity, privacy and safety shall be protected during necessary search procedures". C. "all searches shall be reasonable and conducted at the lowest level of invasiveness that is consistent with health and safety". Yet, despite the above noted, Michael's property was ransacked and literally obliterated; i.e. family pictures ripped off walls, permissible hygiene items seized and not returned, hospital issued items (unaltered) removed, doctor approved \$90.00 down pillows taken and not returned but most importantly, all emails provided herein (i.e. exhibits 12 & 13) which for obvious reasons places Michael and his entire family at risk. THIS SHOULD HAVE BEEN DEALT WITH A LONG TIME AGO. Especially, when Michael and his family member Ms. Nubia Horning reported to Dr. that the only mail that Michael hasn't received over a 15 year time period of incarceration, was a piece of mail Michael requested by phone, which contained an email naming the staff members affiliate There are times where it seems like I'm quite literally watching a page out of the Soviet Gulag Archipelago or the movie "Shawshank Redemption" in how abusive these staff members are. Why haven't they been FIRED?! I can assure you that if it was your family member suffering under this injustice THEY WOULD BE.



6) To date Michael has been attacked physically and mentally for his race. He has been called "cracker", "Nazi", "white boy". Being called a "Nazi" is especially painful as Michael is Jewish. In addition, he has watched the majority of the west African nursing staff who are Muslim, rally around the terror attacks perpetrated by Hamas against Jews in Israel – all of which despite being discussed with his doctor, has gone unaddressed. In order to keep things as accurate as possible, Dr. Despite has made several attempts to quell the flood of unprovoked assaults mentioned above.

- 7) Michael would like to state for the record that the director of nursing on Dayhoff C Mr. New who knew Michael from CTPHC, has dragged Michael's name through the mud since his admission to SGH going as far as to say "here, I will destroy you". In addition, he admitted stating such, to head nurse Ms. G
- 8) Also see attached "additional SGH policy violations" to support Michael's over-all declaration regarding the treatment of issues / concerns he has had while at Spring Grove.

These are just a few of the more recent examples of Michael's maltreatment while a patient at SGH, but Michael feels it is also extremely important to address the statements and concerns regarding his upcoming October 31, 2023 Conditional Release Hearing (CRH). Concerns noted below

- a. S V acted as Michael's attorney full well knowing that Michael did not "own" Universal Lightning Protection Inc. Rather, he was simply the founder of the revived company. Please see attached screen shot; i.e. "S Screen Shot". Mind you, that screen shot is from February 2023. Despite the "screen shot" S filed a MOTION FOR POSTPONEMENT AND A MOTION TO VACATE, 4 plus months well after the aforementioned screen shot?!
- b. Michael has petitioned the OPD on multiple occasions requesting their representation. Despite providing a plethora of information supporting his indigency status, the OPD has evaded and declined. * see attached example of "info" submitted to the OPD (i.e. WAIVER OF COSTS & AFFIDAVIT OF INDIGENCY docs).
- c. Michael is also concerned about the following statements made by Dr. D
 - 1. Dr. Digital told Michael; "don't talk about bad stuff in the up and coming CRH". Thereby effectually telling Michael what to say in his hearing?!
 - 2. Dr. D told Michael that; "if you don't go through with the CRH, you cannot stay under my care".
 - 3. Dr. Despite then contradicted himself by stating, "it would be malpractice to move you to another unit". I personally heard Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in Dr. Despite Michael feeling that there are a considerable number of errors / inconsistencies in
 - 4. Dr. Die told Michael (on multiple occasions) as well as myself on our recent telephone conference call (10/26/23), that he would not move Michael to another unit / out of his care until he was approved by the courts (i.e. the ALJ & both county judges) for a conditional release. But he refused to put it in writing which concerns Michael deeply.

^{*}but despite Michael's concerns with the above stated, he wants all concerned parties to know that he DOES believe in Dr. D and values their therapeutic relationship. It is for those reasons and those reasons alone that Michael is moving forward with his CRH despite all of the other pending, past and poten ally future issues.

This concern was made known to Dr. Diagram & Mr. Bland Man (please see attached transferred discretion)
email) nearly 10+ months ago. Michael's fears regarding this issue are not unfounded due to how Michael's
transfers have been horribly mishandled in the past; i.e. failure to observe security protocols in prior
transfer requests, has now caused his present concerns over his safety to become extremely exacerbated.
Michael also wants it to be known (for the record) that despite doing nearly 10+ years in the Maryland
Dept of Corrections, he has NEVER had any issues with anyone, especially not with any gangs! (i.e. Michael
has never started any trouble with them). Michael felt threatened yet again as recently as 10/26/23 by
security staff officer who said "think about your family" implying that the will retaliate against
Michael by harming his family. That being said, along with Michael's security concerns, he wanted it to be
documented that should anything happen to him, his family or his family's business once he has been
released, the following security staff must be fully investigated for any involvement in connection with
crimes involving threats, assaults and / or murder; head security staff
(who is missing an eye from a gang shootout), Lt.
Lt. State This would include checking their cell phones which is directly related to Dr.
's Conditional Release Report dated May 8, 2023, paragraph 5 on page 10 wherein it states; [sic]
"thus, when he witnesses a staff member not doing their jobs by talking on their cell phones when they
shouldn't be". It should also be noted that in lieu of the above along with policy and procedure
SGHC090303 Use of cellular phones, personal digital assistance and radio pagers ("beepers"), the staff
ARE using their phones regularly, excessively and without impunity. Michael has diligently tried to bring
attention to this issue many times but has been met with indifference. This area of concern should be fully
investigated and rectified.

In conclusion, I want to apologize for this lengthy, voluminous and complex correspondence. Thank you for your patience and forbearance. Per what we all hope will be Michael's imminent conditional release, his chief concern is that his "placement" to a community program be handled with the utmost discretion and confidentiality. On a positive note, Michael is looking forward to a successful outcome regarding his long awaited CRH on Oct 31, 2023. That outcome of course, being the court following the recommendations of the hospital for a condional release. Michael wants nothing more than to rejoin his family and to be a reintegrated as a productive member of society.

Sincerely,
Steve W
(202)

Urgent Legal Situation Re: Pt. Michael Kapneck

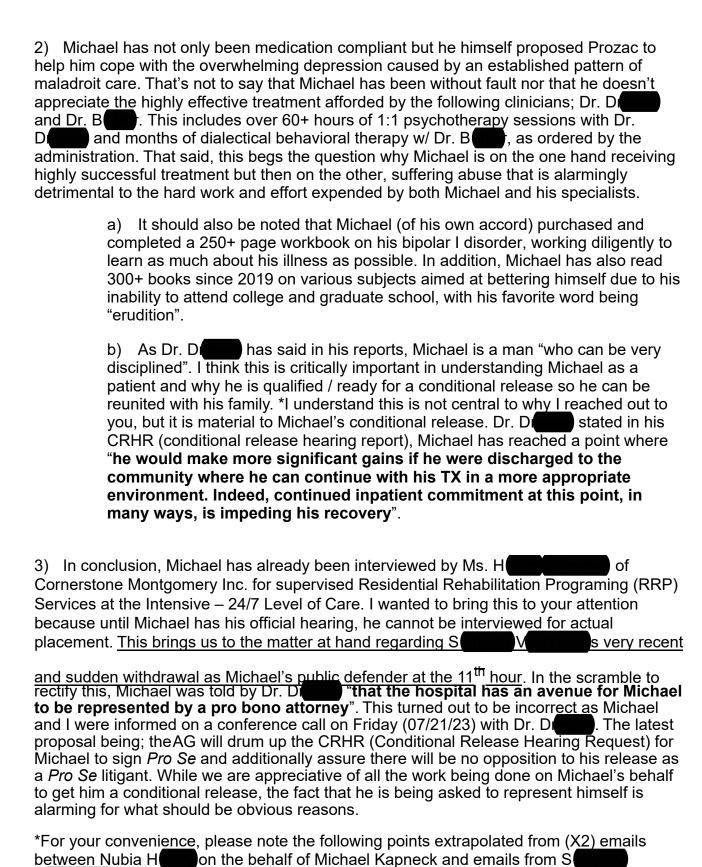
Steve W @hotmail.com>
To: B M M -MDH-< @maryland.gov>
Cc: Nubia H @gmail.com>

Sun, Jul 23, 2023 at 10:05 AM



I really appreciate you taking my call on Friday. Sorry to burden you with this latest issue, but your involvement is critically necessary at this juncture. Before delving into the urgent matter at hand, which we briefly discussed on Friday, it's important to establish insight into this situation by summarizing several material developments related to Michael's hospital course to date. I will attempt to be as succinct as possible, but you need to be fully informed as to exactly what has taken place to date, relative to Michael's TX and his conditional release.

- 1) Despite Dr. M s previous characterization of Michael while he was at CTPHC, Michael has flourished at Spring Grove despite tremendous adversity / less ideal conditions;
 - a) Michael was physically assaulted without provocation twice, both of which resulted in emergency room visits. As a result, he is still being treated for problems with his vision. This is supported by documentation in his chart as well as by direct information; i.e. I was on the phone with him when he was attacked the first time. The latter was discussed during his latest ITP.
 - the gang member I emailed you about on January 17, 2023The latest issue with officer resulted in a full fledged investigation by the resident grievance system (Ms. Electron and the law office of Terry D. Mason (Part The reason I am mentioning this is because when this was discussed at length at Michael's ITP's, Michael was quelched and told "just deal with it". I witnessed this first hand.
 - c) Despite Michael's highly successful therapeutic alliance with his original and current treating psychiatrist (Dr. D.), Michael was suddenly moved during Dr. D. s leave of absence (when he had his knees operated on), despite Michael being told he would not be moved. The reason this is incredibly important is because of the manipulative manner in which it was conducted and the psychological stress Michael was subjected to. Dr. D. himself stated as much on Friday (07/21/23) during our conference call [sic] "when I found out what they had done, I was outraged by this".

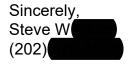


which were forwarded subsequently for your review.

- a) Per our conversation on Friday, S is claiming that Michael is the owner of Universal Lightning Protection and as such, has ample funds for private representation. He claims that Michael told him this which makes no sense considering the fact Michael sent him an email on 02/06/23 explaining this in detail to the contrary. It should be noted that Michael's email date was prior to providing any services from the office of the Public, giving S over FIVE MONTHS to contest Michael's financial situation. Despite the above. S also provided the following legal representation over the past five months; i.e. extensive legal advice, multiple conference calls, filing a Motion for Postponement and a motion to vacate his jury trial, with Michael and his TX's full expectation that S would be representing Michael at his long awaiting ALJ hearing. This point in and of itself completely contradicts the core basis of s accusations. *please see subsequent forwarded email for confirmation.
- b) Additionally, S originally requested information from Michael Kapneck re: [sic] "Universal Lightning Protection Inc.'s tax filings and financial statements" (06/30/23). Per the emails forwarded to you, Michael DID offer an official letter from the accountant (07/09/23) which then caused S to change his story AGAIN; i.e. that Michael perjured himself, further complicating things.
- c) As I mentioned on Friday, Michael and I tried to reach out to the Office of the Public Defender to no avail. On 07/21/23 Michael answered the patient phone and to his surprise it was Mr. V calling for another patient. When Michael tried to get a straight answer out of him regarding this sudden turn of events, Mr. V was very evasive, only confirming his decision to withdraw his appearance. For the record, Michael's doctor, DBT therapist and TX team are SHOCKED and APPALLED. Dr. D went as far as to state that in his entire career, he has never seen anything like this.

In closing, (by law) patients are to be afforded an annual hearing determining release. But due to the Covid pandemic and this recent turn of events, Michael has been waiting for over four years! But as mentioned above, despite tremendous adversity at CTPHC and Spring Grove, Michael has made good use of his time and continues to maintain a positive attitude towards returning to his family and society. I want you to know as well, that I have been very hard on Mike in the past, including not speaking with him at times as it was necessary in showing him "tough love". But I am ECSTATIC at the progress Michael has made over the past 2 years, especially under Dr. Discourse Care. This why Michael and I talk almost every morning for 1 hr per a doctor's order. Dr. Discourse been an absolute BLESSING as he has addressed Michael's much needed substance abuse problem, prescribing Michael Suboxone in addition to his psychiatric medication.

He has made a huge investment of time in Michael meeting with him 2 to 3 times a week, which is unheard of. This brings us to the most important issue at hand; the current legal conundrum regarding Michael's conditional release. As already noted, Dr. Different the FRB and the CFRB all concur that Michael is ready to be released but he cannot be released without a hearing. How can Michael go into such a critically important hearing without legal representation?! I really appreciate you looking into this matter.



From: Steve W @hotmail.com> @ent: Saturday, January 21, 2023 7:29 AM

To: Black and MDH- < @maryland.gov>

Cc: s @maryland.gov <

Subject: Re: patient Michael Kapneck UPDATE

Hello B

Thank you for taking the time to speak with me on the phone recently - I really appreciate it. I wanted to give you an update on my brother-in-law Michael Kapneck.

Mike was recently moved from the Covid isolation unit where he had been recovering from Covid, to unit Red Brick 2. I was recently on an ITP call with Mike's new TX and there were a couple of things said during that call I found troubling. The most serious was the response I got when I raised the issue that Mike has once again, been placed into a unit with two gang members. Psychologist Dr. We tried to dismiss this by implying that this usually has more to do with "a patient's fears" than any real danger (the rest of the TX seemed to rubber stamp this IDIOTIC statement). Considering the fact that Mike has already been attacked once by two gang members and that I had to call Rockville City Police to warn them about a threat against a business Mike founded in Rockville, I found Dr. We statement to be ALARMING and downright OFFENSIVE. I had to then "reinvent the wheel" by pointing out what Dr. We should already know - or does know and is ignoring - that Mike has already been attacked and threatened multiple times by members in what is obviously racist hatred against Mike for the simple reason that he is white. This is why Dr. Deep had a member moved off of his unit at Mike's insistence when he arrived at Spring Grove. Dr. We and other members of Mike's TX tried to backtrack and assure me that they take these threats seriously but in a blatant CYA move to cover his initial statement, Dr. We then said "we cannot 100% guarantee that a patient will never be attacked".

Well, here is how serious Mike's current situation is. Mike just overheard one of the gangmembers who is a PST, who Mike is. Mr. on his unit asking Spring Grove staff member replied "I don't know but I'll find out". I don't think I need to remind you of how deeply penetrated is into CTPHC and Spring Grove, which means that when Mr. goes back to this gang member with information he got from the network, it is going to be the equivalent of pouring gallons of gasoline on the raging fire of racist hatred buring inside this gang member. It is for this reason that Mike is exercising his right to request a transfer to the Finan center. I will once again remind you that almost two years ago, doctors at CTPHC had all agreed he should be moved the Finan Center. Mike's bags were already packed and he was about to be moved when at the last minute it was determined he could not be moved there because his brother Tadd Kapneck was already there and this could cause a conflict. Tadd has since been moved to an assisted living program so there is no reason that Mike cannot be moved there. Dr. Wilk's response to my concern clearly shows me that he is not competent to be treating my brother-in-law let alone any other patient. I know this sounds rather harsh but what could be more critical to a patient's well being than their physical safety?! There needs to be a bond of trust formed between not only the patient and their TX but also between concerned family members. I know for a fact that gang members at CTPHC and Spring Grove regularly carry around weapons as the security is very lax. Such a flippant initial response from Dr. We and Mike's current TX team gives me no confidence in their ability to properly care for and treat my brother-in-law.

In conclusion, I will reiterate what I said in my last email to you; we are respectfully requesting that steps be taken immediately to have Michael transferred to the Finan center for his own safety and wellbeing. IMPORTANT: I cannot stress enough how important his transfer is to be done in the strictest secrecy due to the fact that if members find out he is to be transferred they may try to attack him. This is at the request of Michael, myself, his sister Bianca and Nubia H (the mother of Michael's son), all of whom have a release of information and are involved in his treatment.

Sincerely,

Steve W (202) From: Steve W @hotmail.com>

Sent: Tuesday, January 17, 2023 8:06 AM

To: E @maryland.gov>

Cc: s@maryland.gov

Subject: Re: patient Michael Kapneck IMPORTANT

Hello Mr. Mi

I hope all is well. It's unfortunate that I have to reach out once again regarding Michael's situation at Spring Grove. As per my last email, Michael was moved to a ward (Dayhoff "C") where two self-declared gang members were also housed. In addition, a guard by the name of officer openly brandishes tattoos of his affiliation with the gang. Although Dr. Discontinuous did have one of the members transferred to another ward, it has become apparent that it wasn't enough. The reason is because security guard has become very aggressive with Michael by making threatening statements and went as far as meddling with his snacks and private property. All though there is no direct evidence, he is the only common denominator in all of the issues Michael has been dealing with at Spring Grove. Please feel free to contact Ms. Chapter Dayhoff "C" Charge Nurse, to verify this (Ms. Gallows who made this known to Michael's TX).

Above all this, it's most disappointing that once Dr D left to have his knee surgery, the abuse was escalated by officer and other staff members associated with the thereby resulting in Michael's transfer to another building (Red Brick 1). The issue now is that it has become apparent that there are many more members of Spring Grove's security who are affiliated with the They are all abusive towards Michael for one reason – Michael is white. I want to be clear that this is not because of any other "misunderstanding" between these security guards and Michael. It is a racially motivated predatorial situation where these guards are out to get Michael due to incidents which happened at CTPHC with other members – namely when he was attacked by gang members because they blamed Michael for the transfer of a member, as I pointed out in a previous email. The fact that these current guards know and are abusing Michael accordingly, dovetails to a much larger threat to the overall security at Spring Grove, jeopardizing the safety of any other white patients due to the racist nature of the sentire mindset. The complicity of these guards has now influenced multiple patients who are also members.

In essence Mr. New we are hereby respectfully requesting Michael's transfer to The Thomas B. Finan Center in Cumberland where Michael's brother Tadd was previously housed. The Finan Center is a much better placement for my brother-in-law for several reasons. First, given the fact that the Finan Center is located in Cumberland, there are no members / affiliates who work there. Michael has been able to verify this both, because he has been housed in that area before and he has spoken with several other patients who have been there who have also verified this. Secondly and more importantly, in 2020-2021 Michael was already accepted there and ready to be transferred until it was realized that his brother Tadd was there and housed in the cottages where they wanted to place Michael. In short, Michael's brother Tadd Kapneck has been moved from the cottages to assisted living, thereby no longer creating an issue with Michael's being transferred.

I understand that it is well within a patient's right to request a transfer but this situation is much more urgent based on the fact that Michael has already been attacked by members and is frequently

threatened by them — which is why at one point I had to contact Rockville City Police when members threatened to have other members on the outside, attack a family business which Michael is the founder of. We are therefore respectfully requesting that steps be taken immediately to have Michael transferred to the cottages at Cumberland for his own safety and wellbeing. IMPORTANT: I cannot stress enough how important his transfer is to be done in the strictest secrecy due to the fact that if members find out he is to be transferred they may try to attack him. This is at the request of Michael, myself, his sister Bianca and Nubia Hampel (the mother of Michael's son), all of whom have a release of information and are involved in his treatment.

Sincerely,

Steve W (202)

From: Steve W @hotmail.com>
Sent: Tuesday, November 8, 2022 9:01 PM

To: E maryland.gov>
Subject: Re: THANK YOU (patient Michael Kapneck)

Hello Mr. M

I am sending you this email to thank you for what you did for my brother-in-law Michael Kapneck by having him moved from CTPHC to Spring Grove. Thank you for your careful consideration of my prior emails in pointing out both; his TX teams' diagnosis of Michael's condition / recommendations of treatment as well as grave concerns regarding Michael's safety. I understand that in your role as Director of the MDH Healthcare System, you are very busy and have many responsibilities. Taking the time to read my emails and investigate these matters speaks volumes as to your care and concern for patients currently treated within the MDH Healthcare System. It also shows that you understand the importance of family involvement in a patient's treatment plan and that you can be trusted.

This segues to safety concerns at Spring Grove which you may or may not be aware of. I am sharing this with you because I believe that you can be trusted to take appropriate action. It appears that the gang has also penetrated this facility as well, via both patients and staff (one of the guards openly displays a tattoo). When Michael was moved to Spring Grove he was placed in the same unit as a very high ranking gang member, right across the hallway from him. Mike was made aware of this patient as well as a second gang member and that both of them readily have access to regular items which could easily be fashioned into weapons / shanks. Shortly after Mike was moved, he was approached by several staff members on Dayhoff C who had heard from staff members at CTPHC as to why Mike was moved, which means that Spring Grove staff who are either directly involved with the or sympathetic with them also know. While Michael's safety is a concern, he is by no means the only patient who could be affected by gang members. Dr. Di swell aware of this dilemma as he has already had to deal with another one of his nongang member. Dr. Di was in fact, so concerned for Michael's safety that he had to place him on a 1:1 for his protection. He is doing everything he can to address the situation, including seeing to it that these two gang members are moved. While it is entirely possible that at least one of these gang members may already have been moved by now, there is an ongoing concern of retaliation by gang members against Mike. It is for this reason that any and all information about Michael needs to be held in the strictest confidence - EVEN when it comes to staff members. I am still shocked at how information is so easily passed around from one staff member to another eventually making its way to other patients and gang members.

Other than these serious safety issues, Michael has adjusted quite well to being at Spring Grove. He really likes Dr. Discourant and gets along quite well with him. Dr. Discourant has placed Michael on a Suboxone Maintenance Program because he understands that Michael is a high functioning patient with addiction issues. This is very important in Michael's treatment and recovery because the goal is as always, to rehabilitate patients so that with appropriate management and accountability, they can once again become functioning members of society. This is especially important in light of Michael's upcoming trial which will determine his future placement, hopefully into some type of assisted living program in his hometown of Rockville Maryland. This is why secrecy is of the utmost importance in regards to Michael's situation; i.e. gang members are extremely vicious and vengeful and will go to great

lengths to retaliate against anyone who they believe has crossed them. In Michael's case, once these gang members are moved they will probably blame Michael for it and try to retaliate. That retaliation may not be limited to physical attacks against him. The gang is HQ'd in They all know Mike is part owner of a business in Rockville so Mike's business partners and employees are currently on high alert. Seeing that Michael's trial is soon approaching, it is important that the details of Michael's placement be kept in strict confidence. If word leaks out as to his placement and any other details of his life and treatment for that matter, gang members on the outside may look to retaliate against him wherever he is placed; i.e. it would be far safer for Michael if they don't know.

In conclusion, I once again want to thank you for all that you have done, not only for my brother-in-law but for all the patients in the MDH Healthcare system. Your appointment as Director was indeed a wise choice. If you have any further questions for me, please do not hesitate to reach out, either by replying to this email or you can reach me on my cell.

Sincerely,

Steve W (202)

From: Steve W @hotmail.com>
Sent: Thursday, October 20, 2022 11:32 AM

To: B@maryland.gov>
Subject: Re: CTPHC patient Michael Kapneck - EMERGENCY

Mr. M

I want to begin by thanking you for responding to my last email. I appreciate your taking time to answer and look into my brother-in-law's situation. I must however, correct multiple inaccuracies in the account given to you, regarding Michael Kapneck's time at CTPHC.

You stated in your email that "Mr. Kapneck is considered dangerous and a threat to staff members and other patients" and that "the safety and health of our patients and staff is top priority for the MDH Healthcare System, which oversees CTPHC...". But the facts show the opposite is true – facts which I pointed out in my last email, which you did not address in your reply; e.g. Michael has not had any behavioral notes in quite a while, has NEVER been put on 1:1 or 2:1, never been put in seclusion nor ever required "emergency medication"; i.e. it has been clearly documented by Embedding of Disability Rights Maryland and Remarkable With RGS (Resident's Grievance System) that the two times this was done it was COMPLETELY UNJUSTIFIED; e.g. Remarkable Company found that Michael's grievance against being put on emergency meds in that incident was 100% "Valid". Ms. Cannot similar in the other incident, was primarily based on upon CTP Officer as statement that "I was sitting within 6 feet of Mr. Kapneck and charge nurse Ms. Remarkable conversation and at no time did Mr. Kapneck threaten anyone, use profanity, or even raise his voice". I would encourage you to access the video of that particular incident and / or ANY OTHER SITUATION CITED by DRM and you will see that Michael did nothing wrong.

Thankfully Michael was recently moved off of the Admissions Unit, but it's worth considering why he was moved there in the first place. This happened AGAINST the advice of his entire treatment team for what should be obvious reasons – Michael IS NOT a danger to anyone. Let's consider for a moment what actions on the part of a patient would necessitate such a move back to admissions level. Here are four actual examples which have happened since Michael has been at CTPHC; in one incident, a patient was moved to admissions after he jumped over the nurse's station and destroyed charts which incited other patients to riot. In another a patient broke a staff member's jaw . Another patient was caught with a large quantity of drugs and in yet another incident, patient assaulted multiple female staff members, one of which resulted in her having to have rotator cuff surgery. Michael has NEVER done anything remotely close to these kinds of incidents, which begs the question WHY he was moved to the Admissions Unit in the first place. Michael's being moved from Admissions not withstanding, there is no legitimate reason \$\frac{1}{2} \text{ Michael's being moved Michael's treatment team in this matter and why Mr. Michael continues to do so.

Dr. Samuland Dr. Shave all stated on the record that Michael's affect of irritability and frustration are a direct result of his "demoralization" which is a direct result and consequence of negative, and even traumatic incidents which have occurred during his time at CTPHC – some of which involve the way he has been abused by staff. Regarding inappropriate things Michael has said to staff during his time there, contrary to what certain staff members claim, THERE IS NO EVIDENCE that Michael ever threatened any staff member with physical violence. And as far as inappropriate

comments made, do I need to remind you that CTPHC is a MENTAL Hospital? While inappropriate comments are unacceptable, there is a sharp distinction made between such and physical threats. While Michael has defended himself against unprovoked physical assaults, THERE IS NO EVIDENCE Michael has ever threatened anyone with physical violence.

On the contrary, Dr. Catholical has stated on the record that Michael "is not a danger to others". Michael is in fact known throughout the hospital as an empath with compassion and sympathy towards other patients of all races and genders. My understanding is that any inappropriate comments made towards others were a reflection of those same comments made towards him regarding his race and gender. Once again, CTPHC is a MENTAL hospital and the context of such comments made does matter.

Your claim that "Mr. Kapneck's transfer to another unit was delayed due to his suboxone taper treatment which ended on September 29, 2022" is completely misinformed. It is a FACT that Michael's entire treatment team believes he should be on suboxone indefinitely and it is the standard of care in the U.S. to treat patients with addiction issues accordingly; i.e. Michael's treatment team believes he needs to be treated for addiction issues. Furthermore, patient was on the admissions unit but his suboxone treatment was not "tapered" before he was moved back to 1A. I'm not asking you to discuss any patient other than Michael. I am simply encouraging you to consider that this is yet another example that Michael is being treated differently by Samuel AGAINST the advice of his treatment team.

Lastly, Michael's safety and well being IS STILL IN DANGER at CTPHC. Per my last email, Michael was viciously attacked by and another patient. Like all the other violent attacks Michael Kapneck has suffered during his time at CTPHC, this attack was not only unprovoked but racially motivated. When my brother-in-law was recently moved off of the admissions unit, certain staff tried to move him into the same room as patient who recently attacked him! What is going on in there?! Had it not been for my brother-in-law's adamant refusal to go into that room and Dr. Further intervention to move my brother-in-law to a different room, who knows what could have happened.

CLEARLY, the "safeguards" at CTPHC has in place are NOT working. While patient been completely moved, my brother-in-law is still in serious danger from several other gang members associated with who continue to pose a serious threat to Michael Kapneck and other patients at CTPHC – especially white patients. In addition to the risk of even more racially motivated attacks, large quantities of drugs and weapons are still being smuggled into CTPHC. If you think I'm exaggerating, gang member recently offered Michael free drugs on 10/19 at approx. 10:30AM. Michael immediately turned the drugs over to Dr. If you have any idea the risk my brother-in-law is taking in doing this???? If So May passes this information on to the wrong staff member, IT WILL get back to these gang members. Patients are still regularly terrorized and beaten yet nothing is done about it. What is it going to take for those in authority there to put an end to this? A homicide???? These gang members have already threatened my brother-in-law that if he presses charges against them, the next beating will be a MURDER via a weapon smuggled into CTPHC.

It is LONG since time that my brother-in-law should have been moved to another facility, if for no other reason than for his SAFETY. Multiple doctors at CTPHC concur with this. How is it that Michael's past FIVE TX TEAMS have all concurred that Michael should not be at CTPHC and yet Samuel continues

to go against their professional advice and block Michael being moved to a more appropriate facility???? They have all stated on the record that he's not "symptomatic" – there have been no psychiatric medication changes in over a year, Michael has never been violent nor threatened anyone with violence and yet Some continues to override his treatment team's advice, including moving Michael to another facility. At this point, this is already egregious and negligent malpractice.

Mr. Mr. you have been warned. If anything happens to my brother-in-law from this, I will hold you and personally responsible for NEGLIGENCE. Please move him to another facility NOW.

Sincerely,

Steve W

From: Steve W@hotmail.com>
Sent: Wednesday, October 5, 2022 10:04 PM

To: t @maryland.gov @maryland.gov @maryland.gov > Subject: Re: CTPHC patient Michael Kapneck - EMERGENCY

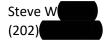
Mr. M

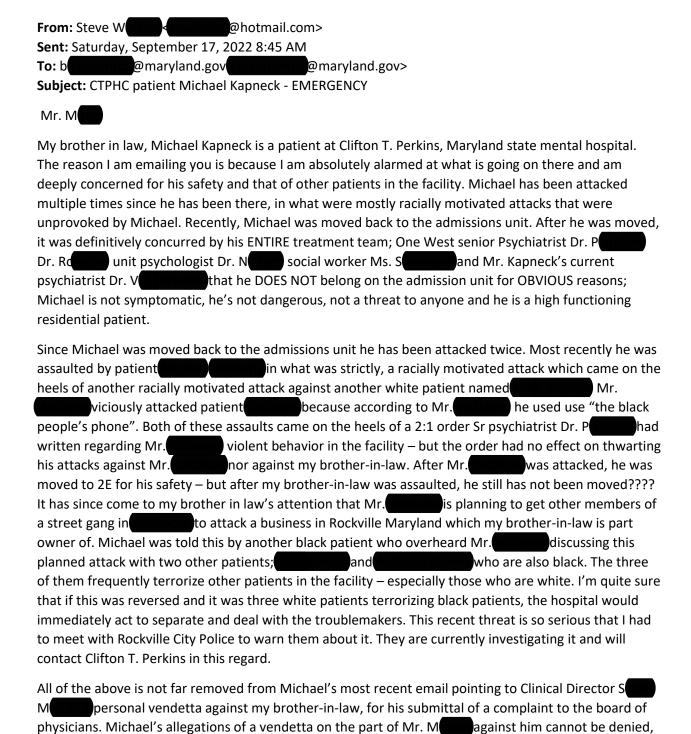
This is now the second email I am sending you regarding my brother-in-law Michael Kapneck who is a patient at Clifton T. Perkins. To date I have received no reply, no phone call from you in regards to my first email, but I cannot say that I am surprised. Michael was recently attacked again, which now comes to a total of approximately TEN ATTACKS since he has been there. Of the ten times he has been attacked, it has been corroborated that EVERY SINGLE ATTACK was unprovoked on his part. Most of these attacks were racially motivated and some were even instigated by staff. In this most recent assault, one of the two patients who attacked my brother-in-law, is none other than If you go back and reread my last email you will see that I warned you about patient SEVEN TIMES. This recent vicious assault was absolutely racially motivated as clearly declared such by using discriminatory language in his disdain for Caucasians; calling them "cracker", "white bitch" and "white devil" and going as far as attacking white patients for "using the black peoples' phone", yet you did NOTHING in response to my warnings. The other attacker involved in this recent attack is in Clifton T. Perkins because he MURDERED HIS CELL MATE. Need I say more? This attack could have EASILY been prevented had YOU and / or the clinical director S Medium heeded the advice of my brother-in-law's treatment TX team, all of whom repeatedly stated that my brother-inlaw should have never been moved to the admissions ward in the first place and kept insisting that he be transferred off of the admissions unit. In this recent attack, Mr. and the other attacker locked my brother-in-law in a room and beat him so badly that he sustained very serious injuries to his right jaw, left hip and hand. Had it not been for a security guard who happened to see what was going on, it would have been far worse.

Are you not at all concerned about this? What if he had been killed? Are you aware of the fact that many of the patients being transferred to Clifton T. Perkins from the state penitentiary are smuggling weapons in by hiding them in their rectum? What if Michael's attackers had a shank?! This hospital is not safe, let alone the appropriate treatment facility for my brother-in-law. LAP Telegon More stated ON THE RECORD a year and a half ago (see attached) that Michael Kapneck's personal safety at the facility is compromised, yet clinical director Second More Management of the facility is compromised, yet clinical director Second More Management of the facility prevent Michael's transfer to a more appropriate facility, but he has seen to it that Michael has been put in very dangerous situations again and again - AGAINST the advice of Michael's treatment teams. The threat to his safety has not ended with Michael being moved off the admissions unit either. Michael was moved over to the SAME UNIT AS and INTO THE SAME ROOM???? In case you forgot how patient is involved in all of this, go back and reread my previous email. Had it not been for Michael's refusal to share the same room with patient as well as the intervention of Dr. Full who had Michael moved to a different room, he would have ended up sharing a room with

This is DESPICABLE and per my last email yet another example of Standard Spersonal vendetta against my brother-in-law. There is a GLARING and OVERWHELMING amount of evidence that Michael should have been moved to another facility long ago, yet Standard Continues to block this. That evidence is ON THE RECORD from; LAP the advice of multiple treatment teams who have worked with Michael, the fact that Michael is at Gold Level and that he has not had any notes of any behavioral issues for quite a while.

The bottom line is that Michael needs to be moved out of Clifton T. Perkins for his own safety. When can I expect a phone call in regards to this?!





considering the following;

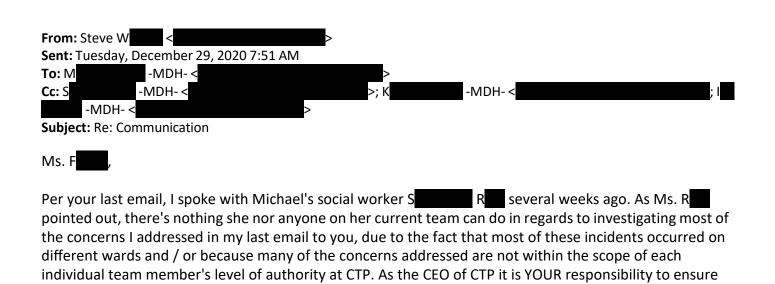
- 1. "Invalidating" RGS supposes "valid" findings of abuse. *See 2nd paragraph on page 5 of the DRM Investigation.
- 2. Overriding somatic orders for this writer's double pillow and seat cushion, despite confirmed arthritis and extreme pain (w/out consultation).
- 3. Going along with the "order" to restrain and forcibly medicate this writer despite video confirmation that the writer was peacefully sitting at a table (by himself), on an enclosed porch, with no other patients on the milieu.
- 4. Called for "security" because this writer respectfully inquired about "fresh air" while Dr. M was administering COVID tests. Thereby, absolutely blowing the situation out of proportion.
- 5. Vehemently going against Howard County ER Dr's orders and this writers TX Team, "overriding" their collective decision to place this writer on a Suboxone taper. *regardless of the illicit, peccant act, the patient's physical life was in danger while undergoing the withdrawal epoch. Mind you, that this writer's presentation was so alarming, it was determined by CTP primary care physician to send this writer to the ER! * It should also be noted that other patients have been on suboxone while here at CTP, while Dr. Mass been Clinical Director. i.e. Why the personal attacks? Does their origin stem from (as this writer has said all along), "Dr. Mass retaliation/retribution for this writer submitting a complaint to the Board of Physicians re: Dr. S
- 6. The FACT Mr. M has frequently overridden Michael's entire treatment teams!
- 7. The FACT that Rockville City Police had to be contacted to deal with a threat made by patient to attack a business Michael is part owner of in Rockville.

In conclusion, my brother-in-law has been told over a dozen times that he should be moved out of Clifton T. Perkins to Thomas B. Finan center or Spring Grove or, conditionally released to a group home. He has been told this consistently by various treatment teams but to date, NOTHING has been done in this regard because Mr. M continues to block it. Michael's move back to the admissions unit is preposterous considering that according to Michael, since 2019 only three patients have been moved back to admissions; one for breaking a staff member's jaw, another for being in possession of a large quantity of street drugs and the other for inciting a full-scale riot on a ward.

At this point considering the danger Michael is in, I would like a phone call explaining what the next steps will be in this regard. You can call me anytime on my cell phone at (202) Michael needs to be moved out of Clifton T. Perkins for his own safety. When can I expect a phone call?!

Sincerely,
Steve W

From: Steve W r < >
Sent: Monday, January 4, 2021 8:40 AM To: M -MDH- V Cc: S -MDH- >; K -MDH- -MDH- > >; I
Subject: Re: Steven W emails to CTP
Ms. F
Per my last email December 29, 2020, I now understand that on the heels of the violent against Michael, he was once AGAIN transferred back to unit TWO EAST where he has already been sexually harassed by staff member who is a sexual predator and openly harasses patients sexually. In addition, I understand that charge nurse blatantly lied about the circumstances / FACTS regarding Mike's first "seclusion" on TWO EAST. Michael was abruptly transferred to ONE SOUTH where there was AGAIN questionable circumstances/ FACTS regarding Michael's first "restraint / forced medication" by John Marsh, Psychiatrist Dr Gord and Clinical Director South Marsh. Had this action been justified, the security video would have been retained for evidence and documentation supporting CTP staff's claims that this action was justified. The FACT IS - IT WAS NOT RETAINED. This is a glaring, tacit admission that putting Michael in restraints and forcing him to take said medication was not justified and was done so based on LIES with malicious intent. Then to hear of the abuse Michael suffered from John forcing Michael's right leg / knee into the restraint chair despite Michael's pleas not to do so due to the swelling in his knee from an infection was beyond outrageous. This resulted in Michael being transferred to Howard County emergency room for FIVE DAYS. Michael's filed grievance over this situation was found to be VALID, so there is no excusing it nor explaining it away. This is also why complaints were filed to the Maryland Board of Physicians Health Care Quality and the Civil Rights Department.
I also understand that Michael was then transferred to TWO WEST where he was forced to take medication by charge nurse O. whose report was 100% refuted by none other than CTP security officer who stated in his written report that "at no time did he hear Michael threaten anyone, curse or yell" nor did nursing staff ask for his assistance (complaints to Maryland Board of Physicians Health Care Quality and the Civil Rights Department were submitted). And now, on the heels of the assault, you transfer him back to TWO EAST where he was sexually harassed and lied about?! No wonder the collective consensus from the majority of Michael's doctors (i.e. Dr.'s Kara, Sara and Dr Jan) is that "Michael has been demoralized by his treatment while at CTP".
These are undeniably, egregious violations of proper patient care, chiefly because moving Michael repeatedly is antithetical to Michael establishing any therapeutic alliances with his treating team-members, i.e. the same doctor, therapist, social worker etc. In light of one disturbing incident after another involving either, CTP staff's utter incompetence or their abuse of Michael and violations of his rights; at a minimum, his treatment is being completely undermined. I therefore have absolutely no confidence in CTP's ability to effectively treat my brother-in-law, nor any other patient for that matter.
I ONCE AGAIN demand an answer as to what is being done to fully investigate and rectify these multitudinous incidents and most importantly, what is being done to move him to a less dangerous facility which will be far more conducive to his treatment and a patient of his functionality.
Respectfully,
Steve W



In your last email you stated; "Administration will follow up as appropriate". I therefore want to know what "Administration" is doing to "follow up" on the many concerns I cited in my email to you, including; the four times Michael was violently attacked, staff abuses towards Michael and other patients and clear violations of Michael's and other patient's rights as well as hospital security protocols and other standards.

that YOUR staff on each and every ward are doing their jobs and following security and legal protocols

according to whatever their specific roles are.

Well, you can add to that long list what is now A FIFTH VIOLENT ATTACK against Michael. I was deeply troubled to hear that Michael was violently attacked yesterday by patient who is in CTP hospital for first degree murder. I understand that patient is extremely violent and was recently involved in another incident in which he slashed a patient's throat with a razor from ear to ear on TWO EAST. In his attack on Michael which occurred yesterday morning, although a security code had been called in regards to patient first attempt to attack Michael, he was able to elude twenty security officers who had responded to that code and violently assault Michael who was on the ward porch collecting his paperwork. Michael was punched and scratched by patient in this violent attack, causing bleeding around Michael's eye, nose and mouth.

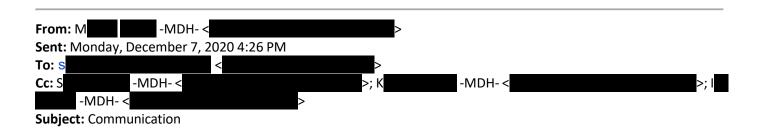
What is going on in there?! This is not the FIRST or SECOND or THIRD or even the FOURTH attack against Michael but the FIFTH VIOLENT ATTACK?! I am demanding that a full investigation be conducted into this and that the security camera footage of this incident dated 12/28/2020 between approximately 8:30 AM and 9:30 AM be retained for future evidence.

Based on the FACTUAL EVIDENCE I have listed in my last email as well as this FIFTH violent attack against Michael, I am absolutely APPALLED at the lack of security and care for Michael and other patients in CTP. I echo Dr. Markets and Dr. Same 's advisement and recommendation that Michael be moved to a less dangerous facility which would OBVIOUSLY be far better for his treatment regimen. Shuffling Mike from ward to ward in CTP is completely unacceptable for what should be by now, OBVIOUS reasons.

In conclusion, I remind you once again that as CEO of CTP it is YOUR responsibility to ensure that the long list of incidents I listed in my last email, including the many violations of Michael's and other patient's rights, violations of Hospital security protocols as well as this recent violent attack be fully investigated. I demand to know what actions YOU are going to take in regards to addressing the many violations of Michael's and other patient's rights. I also demand to know what actions YOU are taking to see to it that CTP Doctor's recommendations / advisement that Michael be moved to a less dangerous facility are fulfilled.

Respectfully,

Steve W



*Pursuant to the notice below Saint Michaels Mission is unable to share C.T.P.H.C. CEO's Meeting response to Mr. Will (many) cares/concerns. Rest assured, the response was wholly inadequate as was the vast majority of interactions between Michael's family and representatives from the Maryland Department of Health.

Maryland Department of Health is committed to customer service. Click here to take the Customer Satisfaction Survey.

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