

# **EXHIBIT D**

Somervell County Salon

State of Texas

County of Tarrant

**Sworn Declaration of Justus Peters, M.D.**

Justus Peters being first duly sworn upon his oath states:

1. My name is Justus Peters. I am a licensed medical doctor in the state of Texas. I reside at 9304 Ravenswood Rd., Granbury, TX, 76049. I understand that I am under oath and subject to the penalties for perjury. All the statements made in this Sworn Declaration are true to my personal knowledge, except where it states that I learned or was told something, in which case it is true that I learned or was told the matter stated.
2. I attended medical school at Creighton University, in Overton, Nebraska. I graduated from medical school in 2005. Afterwards, I interned at the Texas Tech Health Science Center, in El Paso, Texas. I completed a residency in family practice at John Peter Smith Hospital, in Fort Worth, Texas. Prior to attending medical school, I was a registered nurse licensed in the states of Oklahoma and Nebraska, largely practicing in emergency departments and intensive care units.
3. I began to work part time, through a business known as EmCare, "moonlighting" at Glen Rose Medical Center, beginning in 2007. Glen Rose Medical Center is a public hospital operated by the Somervell County Hospital District. I began to work full time at Glen Rose Medical Center starting in 2009. At that time, I joined the medical staff and a contract was issued to me by an entity known as Glenrose Healthcare Inc. On June 5, 2015, I gave 60 days notice of my departure from employment at Glen Rose Medical Center. One reason I gave that notice, was that a series of administrative practices and decisions at Glen Rose Medical Center that were no longer tolerable. Another important reason was to spend more time with my children.
4. Since they came to practice at Glen Rose Medical Center, I have become very familiar with Jay Turk, M.D. and Shelley Turk, R.N.. Based upon my personal knowledge and observations, it is fair to say that they both push hard and consistently for the right things to happen in hospital practice, particularly with regard to patient care and patient safety. Doctor Turk is a fine and skilled physician, one of the best on the Glen Rose medical staff. Shelley Turk was undoubtedly the best nurse at Glen Rose Medical Center until she was terminated in late June 2015.
5. Doctor Turk wrote a detailed letter to the administration of Glen Rose Medical Center dated June 15, 2014, detailing deficiencies and needed areas of improvement at the hospital. His letter was directed to the issues of patient care, patient safety, or both. I signed that letter myself because I agreed with him. A copy is attached. At the time, I was the Chief of the Medical Staff at Glen Rose Medical Center. Unfortunately, the letter was largely ignored. I have personally described the reaction to the sending of this letter

about urgently needed changes as, "hitting a stone wall".

6. Another effort to improve patient care and patient safety at Glen Rose Medical Center, which Doctor and Mrs. Turk were squarely behind, was reflected in a hospital survey and report by the Texas Organization for Rural and Community Hospitals (TORCH). The TORCH report included recommendations that were similar to the changes advocated by Doctor and Mrs. Turk. I was present in 2014 when the Board of Trustees of the Somervell County Hospital District voted in 2014, not to implement the TORCH recommendations.

7. I was told, and I also know by some personal knowledge, that Doctor and Mrs. Turk, after running into "stone walls" about urgently needed patient safety and patient care improvements at Glen Rose Medical Center, responded by expanding the scope of their advocacy to political efforts with members of the Somervell County Hospital District, reporting to multiple governmental agencies, and generally trying to draw public attention to patient care and patient safety issues at this public hospital. As Doctor and Mrs. Turk's actions, speaking out about these issues, moved from internal efforts, which were being largely ignored, to external efforts, the administration responded hostilely, and the attitude of much of the medical staff changed. For example, a series of meetings were set up in 2015 by the Clinic Administrator to talk about Jay Turk and the problems he was causing. When I found out about the subject matter for discussion, I refused to attend the meetings. By 2015 it was clear that the administration and the majority of the medical staff wanted Doctor Turk to be gone.

8. The Glen Rose Medical Center is administratively run and managed substantially by people who have very little, if any, medical training. For example, I learned that the Quality Director Kelly Van Zandt, is not a nurse, doctor, or any other kind of licensed healthcare professional. Yet she has been given the special responsibility of judging medical quality issues and making public statements about the quality of the Glen Rose Medical Center in multiple venues including to the public and the Board of Trustees of the Somervell County Hospital District. Based upon my personal observations of her, she does not have the requisite skill, training or experience to hold that job or exercise those responsibilities.

9. I also learned that the Glen Rose Medical Center Executive Director, Ray Reynolds, has a Masters Degree in Business Administration. He is not a, nurse, doctor, or any other kind of trained healthcare professional. Overall, it is regrettably obvious that the administration of the Glen Rose Medical Center is more focused upon "numbers", especially "dollars", than patient care and patient safety.

10. Based upon my years of professional experience with them, I can testify that Doctor and Mrs. Turk are people of very high integrity, and very high medical competence. The retaliation against them for speaking out about patient care and quality issues has been open and obvious.

11. This was a complex and developing situation. I may well be able to give additional

testimony, if called upon to do so in the future. I understand that the Sworn Declaration may be used by attorneys for Doctor and Mrs. Turk in administrative proceedings, or in litigation. They have my permission to do so.

  
\_\_\_\_\_  
Justus Peters, M.D.

9/29/15  
\_\_\_\_\_  
Date

Somervell County Salon

Dear Mr. Reynolds

The last time I wrote you I pointed out that for over two years I and several of the other doctors have been reporting to you that there were serious problems with the nursing leadership on the med-surg floor. For the first several months after I arrived I would frequently bring you my concerns. I would invariably be assured that it would be addressed, corrected, looked into etc. Nothing ever changed, so I stopped wasting my time bringing my concerns to you. After several patients died as a result of these problems, I wrote you the letter pointing out that since administration was notified of these problems, all of administration shares in the responsibility of these deaths. Apparently the letter spurred some action because one of the nurse leaders that were part of the problem left shortly thereafter. However, that alone was only a small step towards solving the problems. You have pointed out on several occasions that the ER and radiology departments work very well. Both of those departments work well because they have working leaders. We still need clinically strong leaders, who are willing to work!, for med-surg, the CNO, and the OR.

The current director of the OR has been there several months and is still not oriented to her department. Not only does she not work in her department she doesn't even know how to work in her department. You have repeatedly admitted that she was a poor choice and wasn't working out. Yet, unbelievably, you appointed her as interim CNO. She has failed to orient to the OR, the floor, the ER, or the omnicell so essentially she can't provide significant help anywhere in the hospital.

There have also been several surgeons who have either stopped coming here or have significantly decreased their case load here because of the poor performance of the OR. I have personally spoken to four of them and they all gave poor comments concerning the OR director. I subsequently passed this information on to you. Again, nothing was done. When we discussed this last, you said that you only needed her to be in the CNO position until the hospital went through the joint commission inspection and that as soon as we were through that she would be let go. Once again you have not followed through with your word. Instead, you have promoted someone that not only performed poorly in their department but actually cost this hospital money because of decreased procedures in the OR. But she is still here, espousing the same nursing leadership philosophy that I have been fighting against ever since I arrived here.

The interim CNO believes that a manager shouldn't have to work in their department, or work hard at all. That may be so in a large hospital, but in a small hospital it is wasteful of resources, provides a poor example to others and leads to poor nursing care. As I have mentioned before the hospital in Bowie provided excellent medical and nursing care, but when they changed to CNOs that didn't have strong clinical skills and didn't stay involved with patient care, our nursing care declined noticeably. This brings me to the current med-surg director. He does have the clinical skills to perform well in this department but I believe he has been influenced by the CNO to not directly work in his department. But we desperately need someone to actually work in the med-surg department in order to improve patient care. Due to the influence of this CNO there was a significant delay in his orienting to the floor and gaining access to the omnicell. I was beginning to believe that he would be as worthless as the CNO until this past weekend. Once again there was a problem with the care of patients on the floor.

This involved a patient I admitted on 6/7/14. The family of my patient complained to the ER nurse concerning the lack of care by the floor nurses. This was written up by the ER nurse and given to her manager and to the chief-of-staff, both of whom happened to be working that night. They both wrote responses reporting the continued problems on the floor. The good news is that after those reports went out, I saw a remarkable improvement in the med-surg director. He came in and worked Sunday and assisted me in rounds and taking care of the patients. This improvement has continued this week so far, making me pleasantly surprised. Hopefully, he will stop being influenced by the CNO and this improvement will continue. Now if we can get him and his staff to cross-train in the ER where we can expose the floor nurses to more acute patients and to codes in particular, I believe we will finally see some of the improvements that I have been trying to get you to do for almost three years now. The bad news is that on Monday morning, because she sent out that memo, you called the ER director to your office to reprimand her for not getting along with CNO and the med-surg director. She was even threatened with being fired and told to not report any more complaints, even though she was doing exactly what she was supposed to. Are you are trying to hide the fact that the problems still haven't been fixed under your watch? I, and I believe the other doctors, will continue to insist that everyone continue to bring problems to our attention and to yours so that we can improve our hospital into a facility that provides excellent care of our patients.

I should be able to focus the majority of my efforts directly on medicine, but I am spending way too much time trying to protect my hospital patients from your decisions and your management team. Might I make a simple suggestion? Rather than reprimand an employee for reporting problems, why not just fix the problem? I might also add that the ER manager has been working under direct orders from some of the physicians, me included. I have instructed her, since I have not seen any interest for improvement from upper management, if you see a problem on the med-surg unit correct it if you can and if not write it up and report it. This appeared to be the best option, since the physician complaints were being ignored, and, I might add, this option was beginning to show signs of slight improvement on the floor.

As you well know, I have declined to sign a new contract despite being offered more vacation time and a significant increase in salary. As much as I would appreciate these perks, I place improvement of our patient care of utmost importance. I ask you to perform your duty to protect the patients in our hospital. The results to date are unacceptable. You have had more than two and a half years to address these problems.

  
J. Turk M.D.

As of today, Dr. Peters reports hope in the nursing leaders getting involved in the patient care more. This would be turn for the better.

  
6/15/14