

1 **IN THE SUPREME COURT OF THE STATE OF NEVADA**

2 LEE E. SZYMBORSKI,

3 Appellant,

4 vs.

5 SPRING MOUNTAIN TREATMENT
6 CENTER; and DARRYL DUBROCA,
7 in his official capacity,

8 Respondents.

Supreme Court No. 66398

District Court Case No. A700178

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11 **RESPONDENTS SPRING MOUNTAIN TREATMENT CENTER**
12 **AND DARRYL DUBROCA'S ANSWERING BRIEF**
13

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and Darryl Dubroca

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JURISDICTIONAL STATEMENT

This Court has jurisdiction over plaintiff's appeal pursuant to NRAP 3A(b)(1) governing appeals as of right following a final judgment of a district court in a civil case. On June 24, 2014, the district court entered an order granting Defendants Spring Mountain Treatment Center's (hereinafter "Spring Mountain") and Darryl Dubroca's (hereinafter "Mr. Dubroca") (collectively hereinafter "Defendants") motion to dismiss Plaintiff's Complaint. (R. at 88-89). Notice of written entry of that order was served on July 30, 2014. (R. at 91-94). On August 7, 2014, Plaintiff-Appellant Lee Szymborski ("Lee" or "Plaintiff") timely filed a "Motion for Reconsideration, or In the Alternative, Motion to Set Aside" (hereinafter "Motion for Reconsideration"). (R. at 95-130). On August 25, 2014, while his motion was pending, Plaintiff filed a notice of appeal from the "Notice of Entry of Order On Defendant Spring Mountain Treatment Center and Darryl Dubroca's Motion to Dismiss Entered on The 23rd Day of July, 2014." (R. at 131). On September 23, 2014, the district court entered an order denying Plaintiff's Motion for Reconsideration. (R. 224-31). Pursuant to NRAP 4(a)(6), Plaintiff's premature notice of appeal "shall be considered filed on the date of and after entry of the order. . .of the last-remaining timely motion." NRAP 4(a)(6). Accordingly, Plaintiff's Notice of Appeal was timely because it is considered filed on September

1 23, 2014, the same day the district court entered final judgment on plaintiff's last-
2 remaining post-judgment motion.

3
4 **STATEMENT OF ISSUES PRESENTED FOR REVIEW**

- 5 1. Whether a complaint alleging the failure of a physician, hospital or
6 hospital employee to use "reasonable care, skill or knowledge" "in
7 rendering services" to a hospital patient sounds in medical malpractice
8 under NRS 41A.009 and thus requires compliance with NRS
9 41A.071's affidavit requirement?
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12 2. Notwithstanding Plaintiff's failure to comply with NRS 41A.071,
13 whether the district court's judgment can also be affirmed on the
14 alternative ground that defendants did not owe Plaintiff – a non-
15 patient third-party – a duty to protect him against the unforeseeable
16 destruction of his property by Sean Szymborski?
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19 **STATEMENT OF THE CASE**

20 This appeal arises from an action filed by Lee E. Szymborski, father of Sean
21 Szymborski, an adult, ("Sean") against Spring Mountain Treatment Center, a
22 mental health treatment hospital, and Darryl Dubroca, its CEO/Managing Director,
23 for damages caused to Lee's residence by Sean following Sean's discharge from
24 Spring Mountain. (R. at 1-21). On May 2, 2014, Plaintiff filed a complaint
25 asserting four causes of action against the defendants, including
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- 1 • “NEGLIGENCE” (Count I) in allegedly failing to comply with their
2 own internal policies and the Nevada Administrative Code section
3 449.332 governing medical and other related facilities in their
4 discharge of Sean from the hospital and with NRS 449.765-449.786
5 governing the “Use of Aversive Intervention or Forms of Restraints
6 On Patients with Disabilities”;
- 7 • “Professional Negligence” (Count II) pursuant to NRS 41A.015 “in
8 their capacity as a for profit hospital providing medical care” by
9 “failing to function as a patient advocate by providing proper care to
10 the patients at the time of discharge”;
- 11 • “Malpractice, Gross negligence, Negligence Per Se” (Count III) by a
12 hospital-employed licensed social worker who owed a duty “to
13 patients and a duty to provide adequate medical treatment, to protect
14 the patient and the public at large” but who’s “conduct [fell] [] below
15 the standard of care”; and
- 16 • “Negligent Hiring, Supervision, and Training” (Count IV) for failing
17 to properly “hire, train, and/or supervise competent medical and staff
18 personnel, including supervisors, and LSW, to provide care and
19 treatment to its patients.” (R. at 1-21).

20 Attached to plaintiff’s complaint was a letter from the State of Nevada, Department
21 of Health and Human Services, Health Division, signed by Johna Thacker as an
22 “AAII/Complaint Intake Coordinator”. (R. at 12). A “Division of Public and
23 Behavioral Health Survey” was also attached to Plaintiff’s Complaint. (R. at 13-
24 21). Plaintiff’s Complaint did not attach an affidavit of merit signed by a medical
25 expert pursuant to NRS 41A.071.

26 On May 22, 2014, Defendant Spring Mountain filed a motion to dismiss
27 Plaintiff’s Complaint, arguing that the complaint was void *ab initio* because each
28 of the claims asserted sound in medical malpractice and Plaintiff failed to file an

1 NRS 41A.071 expert affidavit in support of his claims. (R. at 31-62). Defendant
2 Dubroca subsequently joined Spring Mountain's motion. (R. at 65-67). On June
3 24, 2014, after hearing extensive argument, the district court granted Defendants'
4 motion to dismiss pursuant to NRS 41A.071. The district court found that "Mr.
5 Szymborski's claims are based upon allegations of medical malpractice" and thus,
6 his failure to provide the requisite affidavit pursuant to NRS 41A.071 rendered his
7 complaint void *ab initio* and must be dismissed. (R. at 88-89). Notice of entry of
8 the July 23, 2014 Order was served on July 30, 2014. (R. at 91-94).
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12 On August 7, 2014, Plaintiff filed a "Motion for Reconsideration, or in the
13 alternative, Motion to Set Aside". (R. at 95-130). During the pendency of
14 Plaintiff's Motion, he filed a Notice of Appeal from the July 23, 2014 Order
15 granting Defendants' motion to dismiss. (R. at 131). On September 23, 2014, the
16 district court denied plaintiff's motion for reconsideration, finding as a matter of
17 law that "Mr. Szymborski's claims are based upon allegations of medical
18 malpractice" and having offered no new law or facts, its initial ruling dismissing
19 Plaintiff's Complaint as void *ab initio* was "legally sound and in accordance with
20 applicable statutes and caselaw." (R. at 229-30). This appeal followed.
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25 **STATEMENT OF FACTS**

26 The following "facts" are taken from plaintiff's complaint and other
27 documents submitted by the parties in support of their motion to dismiss, plaintiff's
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1 opposition to same, plaintiff's motion to reconsider and defendants opposition to
2 same, including various medical records.

3 **Sean Is Admitted To Spring Mountain Treatment Center**

4
5 On May 3, 2013, Sean Szymborski was admitted to Spring Mountain
6 Treatment Center for care and treatment. (R. at 14). At approximately 12:00 p.m.
7 that afternoon, the Comprehensive Assessment Tool documented that Sean had
8 multiple scab areas on his legs and that his father had reported that the wounds
9 were self-inflicted with a sharp object. (R. at 19). A few days later, a hospital
10 employee licensed social worker ("LSW") documented that there were weapons at
11 Sean's mother's home but not at his father's home. (R. at 20). The LSW did not
12 identify or confirm what weapons were located at his mother's home. According
13 to the May 14, 2013 Patient Continuing Care Plan, safety concerns were identified,
14 including that "weapons in the patient's home were non-applicable and verified by
15 the patient's father". (R. at 20).

16 **Sean's Father (Plaintiff) Contacts Sean's Case Manager And Ultimately** 17 **Advises That He Wanted Sean To Return To His Home.**

18
19 On May 10, 2013 at 9:00 a.m., a hospital LSW documented that a case
20 manager had received a voice mail message from Sean's father Lee saying that the
21 patient was not to return to his home. (R. at 17). The LSW documented that the
22 case manager would assist the patient with alternative placement. Later that day at
23 approximately 11:15a.m., it was documented that Lee wanted the patient to return

1 to his home, but not to be discharged "today". (R. at 17). On May 13, 2013, Sean's
2 nurse(s) noted that he "had much trepidation about going back to the father's
3 home. The patient was restless when talking about the father." (R. at 14).

4
5 **Sean Meets With Hospital Employees To Discuss His Discharge And Advises**
6 **That He Needed To Stop By His Father's Home To Retrieve His Debit Card.**

7 The Patient Continuing Care Plan, dated May 14, 2013, noted that the
8 patient was to go to his father's house first, then to an address in North Las Vegas.
9 (R. at 55). At 8:50 a.m. that morning, an acute physician progress note indicated
10 that Sean did not want to return to his father's home due to "on-going conflict." (R.
11 at 55). The progress note further indicated that Sean participated in treatment
12 planning to find housing. (R. at 55-56). Sean subsequently met with hospital
13 personnel to discuss his discharge and confirm the address of the apartment where
14 he would be transported at the time of his discharge. (R. at 55). Sean was vague
15 about the apartment's address but advised the hospital personnel that he needed to
16 first stop at his father's home to retrieve his debit card prior to going to the new
17 apartment. (R. at 55). According to the hospital social services discharge note,
18 Sean would live at the apartment upon discharge. At approximately 2:30 p.m.,
19 Sean requested his father's telephone number and advised him that he was being
20 discharged and that a taxi would transport him to his father's home. (R. at 58). At
21 or about that same time, Sean asked the hospital personnel if the taxi would be able
22 to take him to his mother's house after retrieving his debit card from his father's
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1 house. (R. at 61). Sean was advised that he would have to pay for any taxi after
2 being dropped off at his father's house. (R. at 61).

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4 **Sean Is Discharged And Transported By Taxi To His Father's Home To
Retrieve His Debit Card.**

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6 On May 14, 2013, at approximately 3:30 p.m., Sean was discharged from
7 Spring Mountain Treatment Center with diagnoses including psychosis not
8 otherwise specified and spice abuse. (R. at 2, 58). Sean was subsequently
9 transported by taxi to his father's home. (R. at 2). Upon arriving and entering
10 Plaintiff's home, Sean proceeded to cause approximately \$20,000 in damage to the
11 interior of the home. (R. at 7). Sean thereafter went missing for three weeks. (R. at
12 7). He was later located, charged, and convicted of criminal charges relating to the
13 damage caused to Plaintiff's home. (R. at 5).

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17 **Plaintiff Files Complaint With The Department Of Health
And Human Services – Health Division.**

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19 On May 22, 2013, Plaintiff filed a complaint with the State of Nevada
20 Department of Health and Human Services – Health Division (hereinafter
21 “Department”) concerning Sean's admission, transfer, discharge and quality of
22 care he received at Spring Mountain Treatment Center. (R. at 53). Plaintiff further
23 alleged that he was not notified of Sean's “change in condition, patient not
24 assessed after change in condition, [and] patient's medications improperly
25 administered.” (R. at 53). Thereafter, the Department initiated an investigation
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1 into Plaintiff's complaints and on July 9, 2013, completed its investigation and
2 reported its findings that Plaintiff's complaints were "substantiated with
3 deficiencies cited." (R. at 54). Those findings included:
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- 5 • Spring Mountain Treatment Center "failed to assure the patient was
6 discharged to a safe environment" (R. at 54);
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- 8 • Spring Mountain Treatment Center "failed to notify [the patient's] famil[y]
9 prior to discharge" (R. at 57); and
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- 11 • Spring Mountain Treatment Center "failed to identify what weapons were at
12 [Sean's] mother's home and if [he] would have access to the weapons." (R.
13 at 60).
14

15 **Plaintiff Files Complaint In The District Court**

16 On May 2, 2014, Plaintiff filed a complaint asserting four causes of action
17 against the defendants, as follows:
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- 19 • "NEGLIGENCE" (Count I) in allegedly failing to comply with their
20 own internal policies and the Nevada Administrative Code section
21 449.332 governing medical and other related facilities in their
22 discharge of Sean from the hospital and with NRS 449.765-449.786
23 governing the "Use of Aversive Intervention or Forms of Restraints
24 On Patients with Disabilities";
- 25 • "Professional Negligence" (Count II) pursuant to NRS 41A.015 "in
26 their capacity as a for profit hospital providing medical care" by
27 "failing to function as a patient advocate by providing proper care to
28 the patients at the time of discharge";

- 1 • “Malpractice, Gross negligence, Negligence per se” (Count III) by a
2 hospital-employed licensed social worker who owed a duty “to
3 patients and a duty to provide adequate medical treatment, to protect
4 the patient and the public at large” but who’s “conduct [fell] [] below
5 the standard of care”; and
- 6 • “Negligent Hiring, Supervision, and Training” (Count IV) for failing
7 to properly “hire, train, and/or supervise competent medical and staff
8 personnel, including supervisors, and LSW, to provide care and
9 treatment to its patients.” (R. at 1-21).

10 In addition to seeking compensatory damages, Plaintiff’s Complaint also sought a
11 temporary restraining order and/or preliminary injunction and permanent
12 injunction enjoining Defendants from “continuing or repeating the unlawful
13 policies, procedures and conduct complained of herein;” declaratory judgment that
14 Defendants’ “policies, practices and conduct as alleged herein [are] in violation of
15 patient rights, and the safety of the public at large”; and punitive damages. (R. at
16 51). Attached to plaintiff’s complaint was a letter from the State of Nevada,
17 Department of Health and Human Services, Health Division, signed by Johna
18 Thacker as an “AAII/Complaint Intake Coordinator”. (R. at 12). A “Division of
19 Public and Behavioral Health Survey” was also attached to Plaintiff’s Complaint.
20 (R. at 13-21). Plaintiff’s Complaint did not attach an affidavit of merit signed by a
21 medical expert pursuant to NRS 41A.071.
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1 **Spring Mountain Treatment Center Moves To Dismiss**
2 **Plaintiff's Complaint Pursuant To NRS 41A.071**

3 On May 22, 2014, Defendant Spring Mountain filed a motion to dismiss
4 Plaintiff's Complaint pursuant to NRCP 15(b) and NRS 41A.071, arguing that the
5 complaint was void ab initio because each of the claims asserted sound in medical
6 malpractice and Plaintiff failed to file an NRS 41A.071 expert affidavit in support
7 of his claims. (R. at 31-62). Defendant Dubroca subsequently joined Spring
8 Mountain's motion. (R. at 65-67).
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11 On June 13, 2014, Plaintiff filed an opposition to Defendants' Motion to
12 Dismiss but no NRS 41A.071 affidavit was attached. (R. at 68-77). In his
13 opposition, Plaintiff argued that his action is for "negligence" and for the violation
14 of "codes and statutes pertaining to the safe release of patients, and NOT medical
15 issues relation [sic] to its former patients." (R. at 69) (emphasis in original).
16
17 Plaintiff further argued that the allegations in the complaint are for "Malpractice,
18 Gross Negligence, Negligence Per Se" "but it is NOT medical malpractice; not in
19 the process of a surgery or operation, but in the context of the mandatory social
20 work that is required – and EXPECTED of a 'for profit' psychological facility that
21 earns in excess of TWO BILLION DOLLARS ANNUALLY." (R. at 69) (all
22 emphasis in original).
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1 **District Court Grants Defendants' Motion To Dismiss**

2 On June 24, 2014, after hearing extensive argument, the district court
3
4 granted Defendants' motion to dismiss pursuant to NRS 41A.071. The district
5 court found that "Mr. Szymborski's claims are based upon allegations of medical
6 malpractice" and thus, his failure to provide the requisite affidavit pursuant to NRS
7
8 41A.071 rendered his complaint void ab initio and must be dismissed. (R. at 88-
9 89). Notice of entry of the July 23, 2014 Order was served on July 30, 2014. (R. at
10 91-94).
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12 **Plaintiff Files Motion For Reconsideration And Notice Of Appeal.**

13 On August 7, 2014, Plaintiff filed a "Motion for Reconsideration, or in the
14
15 alternative, Motion to Set Aside". (R. at 95-130). Plaintiff Motion asserted that
16 reconsideration was necessary because his complaint did not assert claims for
17
18 medical malpractice and therefore, no NRS 41A.071 expert affidavit was required.
19 To the extent that his complaint did assert a cause of action for medical
20
21 malpractice, Plaintiff argued that the court overlooked the report of the Department
22 of Health and Human Services attached to his complaint in ruling that he failed to
23
24 comply with NRS 41A.071. (R. at 95-96). Specifically, Plaintiff argued that
25
26 "[t]here is no better expert and that the results of 'The Bureau Of Health Care
27
28 Quality Control And Compliance['] investigation is the best certification you can
get in determining a safe or an unsafe discharge." (R. at 96).

1 On August 25, 2014, during the pendency of his Motion for
2 Reconsideration, Plaintiff filed a Notice of Appeal from the July 23, 2014 Order
3 granting Defendants' motion to dismiss. (R. at 131). That same day, Defendants
4 filed their Opposition to Plaintiff's Motion, arguing that Plaintiff failed to set forth
5 a proper basis for seeking reconsideration under EDCR 2.24 and NRCP 60(b). (R.
6 at 135, 137). To the extent reconsideration was justified, Defendants further
7 argued that the district court's order should still not be disturbed because Plaintiff's
8 Complaint was properly dismissed for failing to comply with NRS 41A.071's
9 affidavit requirement and the Department's report was insufficient to meet this
10 threshold requirement. (R. at 139-44).

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15 **District Court Denies Plaintiff's Motion for Reconsideration.**

16 On September 23, 2014, the district court entered an order denying
17 plaintiff's motion for reconsideration. (R. at 223-31). In reaching this conclusion,
18 the district court held that Plaintiff had failed to provide any new facts or evidence
19 and that its prior decision was clearly erroneous or that there was any mistake,
20 inadvertence, surprise, or excusable neglect. (R. at 227). The district court further
21 explained that
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25 10. It is clear that the allegations in the Complaint all fall under the
26 definition of medical malpractice as defined by statute. The Complaint
27 alleges failures on the behalf of physicians, a hospital and employees
28 of a hospital in treating a patient which resulted in harm to Plaintiff.
Nowhere in the statute is medical malpractice defined in such a way
that the harms resulting must be felt only by the patient in order to be

1 considered malpractice. As such, although Plaintiff was not a patient,
2 the damages sought still fall under the definition of medical
3 malpractice.

4 11. There is also nothing in the record to suggest even minimal
5 compliance with Nev. Rev. Stat. § 41A.071. The only document
6 attached to the Complaint was a letter from a Complaint Intake
7 Coordinator for the Department of Health. The letter does not claim to
8 support any of the allegations in the Complaint nor does its author
9 claim to be a medical expert of any kind. In opposition to the Motion
10 to Dismiss, Plaintiff argued only that the claims were ordinary
11 negligence, and did not claim that a conforming affidavit was ever
12 attached to the Complaint. (R. at 229).

13 Accordingly, because “its previous Order was legally sound and in accordance
14 with applicable statutes and case law,” the district court denied Plaintiff’s Motion
15 for Reconsideration. In addition, the district court held that “although leave to
16 amend the Complaint was not requested, it would not be appropriate as
17 noncompliance with Nev. Rev. Stat. §41A.071 renders a complaint *void ab initio*,
18 and no subsequent amendments can cure the defect.” (R. at 229-30). This appeal
19 followed.

20 **ARGUMENT**

21 **I. STANDARD OF REVIEW.**

22 The district court’s order granting Defendants’ NRCP 12(b)(5) motion to
23 dismiss on the ground that the complaint failed to comply with NRS 41A.071 is
24 reviewed *de novo*. *Washoe Med. Ctr. v. Second Jud. Dist. Ct.*, 122 Nev. 1298,
25 1302, 148 P.3d 790, 792-93 (2006), holding that a complaint filed without the
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1 requisite medical expert affidavit is void ab initio and therefore the defect cannot
2 be cured by amendment after the statute of limitations has expired.

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4 **II. THE DISTRICT COURT PROPERLY DISMISSED PLAINTIFF'S**
5 **COMPLAINT AGAINST SPRING MOUNTAIN AND MR.**
6 **DUBROVCA BECAUSE PLAINTIFF'S CLAIMS FELL WITHIN**
7 **THE DEFINITION OF MEDICAL MALPRACTICE UNDER NRS**
8 **41A.009 AND THUS REQUIRED COMPLIANCE WITH NRS**
9 **41A.071.**

10 The district court properly dismissed Plaintiff's Complaint against Spring
11 Mountain and Mr. Dubrovca because his complaint stated causes of action for
12 medical malpractice as defined by NRS 41A.009¹, and thus he was required to
13 comply with NRS 41A.071² and attach an affidavit of a qualified medical expert
14 supporting those allegations.

15 NRS 41A.009 defines "medical malpractice" as

16
17 the failure of a physician, *hospital or employee of a hospital, in*
18 *rendering services*, to use the reasonable care, skill or knowledge
19 ordinarily used under similar circumstances. NRS 41A.009 (emphasis
20 added).

21 Under NRS 41A.071,

22 ¹ After the filing of Plaintiff's notice of appeal, the Legislature amended Nevada's
23 statutory scheme governing actions for medical malpractice, dental malpractice
24 and professional negligence (Chapter 41A of NRS). Specifically, it repealed
25 various provisions, including NRS 41A.009 defining medical malpractice, and
26 provided a new definition for "professional negligence" under NRS 41A.015
27 which incorporated the provisions of the previously used definition of medical
28 malpractice. *See* 2015 Nev. Stat. ch. 439, §§ 1.5, 2, 6, 12, at 2526-29. In addition,
the Legislature broadened the definition of "provider of healthcare" to include
additional professionals not previously identified. *See Id* at § 2.

² *See* fn.1.

1 [i]f an action for *medical malpractice* or dental malpractice is filed in
2 the district court, the district court *shall dismiss the action*, without
3 prejudice, if the action is filed without an affidavit, supporting the
4 allegations contained in the action, submitted by a medical expert who
5 practices or has practiced in an area that is substantially similar to the
6 type of practice engaged in at the time of the alleged malpractice.
7 NRS 41A.071 (emphasis added).³

8 Thus, contrary to Plaintiff's arguments, NRS 41A.071 is not limited to
9 actions against physicians, but also includes actions against "a hospital or
10 employee of a hospital" for failing to use reasonable care, skill, or knowledge "in
11 rendering services." NRS 41A.009. *Accord Egan v. Chambers*, 299 P.3d 364, 367,
12 129 Nev. Adv. Op. 25 (2013) *citing* NRS 41A.009; *Fierle v. Perez*, 125 Nev. 728,
13 740, 219 P.3d 906, 913 (2009) *overruled in part on other grounds*, *see Egan*, 299
14 P.3d at 367. Ultimately, when determining the nature of a complaint for purposes
15 of evaluating whether the claims asserted therein are governed by a specific
16 statutory provision, this Court has held that "it is the nature of the grievance rather
17 than the form of the pleadings that determines the character of the action." *State*
18 *Farm Mut. Auto. Ins. Co. v. Wharton*, 88 Nev. 183, 186, 495 P.2d 359, 361 (1972).

19 Here, the district court properly dismissed Plaintiff's Complaint pursuant to
20 NRS 41A.071 because the "nature" of the allegations of his complaint plainly
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25 ³ *See Washoe Med. Ctr. v. Second Jud. Dist. Ct.*, 122 Nev. 1298, 1304, 148 P.3d
26 790, 794 (2006), finding that a timely filed complaint alleging medical malpractice
27 that fails to attach an affidavit of a medical expert in compliance with NRS
28 41A.071 cannot be amended after the statute of limitations to cure the affidavit
defect because the original complaint was void ab initio, "does not legally exist
and thus [] cannot be amended."

1 asserted claims alleging “medical malpractice” as defined in NRS 41A.009.

2 Indeed, in Count I (“Negligence”) Plaintiff alleged that the Defendant hospital and
3 its employee(s) were negligent in failing to comply with Nevada Administrative
4 Code section 449.332⁴ (“Discharge Planning”) and the hospital’s own internal
5 “discharge policies” in discharging Sean on May 14, 2013. (R. at 6-7). In
6 addition, Count I further alleged that the Defendant hospital and its employee(s)
7 failed to comply with NRS 449.765-449.786 governing the “Use of Aversive
8 Intervention or Forms of Restraints On Patients with Disabilities”. By its own
9 terms, the “nature of the grievance” described in these allegations is that the
10 Defendant hospital and its employee(s) failed to exercise reasonable care in
11 “rendering services” to a hospital patient, *e.g.*, identifying Sean as a patient “who is
12 likely to suffer adverse health consequences upon discharge” and deciding against
13 the use of “aversive intervention or forms of restraint” as an alternative to
14 discharging him. Thus, by its own language, Count I asserted a claim for medical
15 malpractice and required compliance with NRS 41A.071.

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17 The “gravamen” or “nature” of the allegations in Count II of Plaintiff’s
18 Complaint are no different. Specifically, Plaintiff alleged that “Defendants in the
19 capacity of a for profit hospital providing medical care to the public”, including its
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27 ⁴ NAC 449.332 requires hospitals to “identify each patient who is likely to suffer
28 adverse health consequences upon discharge if the patient does not receive
adequate discharge planning.” NAC 449.332(3).

1 “registered nurses, psychiatrists, and the hospital administrator,” “owed Plaintiff a
2 duty to employ medical staff adequately trained in the care and treatment of
3 patients consistent with the degree of skill and learning possessed by competent
4 medical personnel” and to comply with NRS 41A.015. (R. at 7). Indeed, Count II
5 specifically alleges in pertinent part that “Defendants breached its duty of care by
6 failing to function as a patient advocate by providing *proper care to the patients at*
7 *the time of discharge. . . .*” (R. at 7) (emphasis added). Count II specifically
8 alleged negligence by Spring Mountain’s “providers of healthcare” including its
9 “licensed nurse” and “licensed psychologist” and other employees of a hospital.
10 Thus, by its own terms Count II asserts a claim for medical malpractice requiring
11 compliance with NRS 41A.071.
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16 Count III of Plaintiff’s Complaint, asserting claims for “malpractice, gross
17 negligence, negligence per se”, similarly alleges a failure by a “hospital or
18 employee of a hospital” to “use [] reasonable care, skill or knowledge” used “in
19 rendering services” and thus required compliance with NRS 41A.071.
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22 Specifically, Count III alleges that Defendants by and through a hospital-employed
23 licensed social worker, had a duty “to patients and *a duty to provide adequate*
24 *medical treatment*, to protect the patient and the public at large” but who’s
25 “conduct [fell] [] below the standard of care”. (R. at 8) (emphasis added).
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28 Moreover, similar to the allegations of Count I, Count III also alleges violations of

1 NAC 449.332 and hospital internal policies concerning the discharge of patients.
2 (R. at 8). For the same reasons discussed *supra* concerning the allegations
3 contained in Count I, Plaintiff's allegations in Count III similarly, by their plain
4 language, allege medical malpractice as defined by NRS 41A.009 requiring
5 compliance with NRS 41A.071.
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8 Lastly, Count IV of Plaintiff's Complaint asserting a claim for failing to
9 properly "hire, train, and/or supervise competent medical and staff personnel,
10 including supervisors, and LSW, to provide care and treatment to its patients"
11 likewise falls under NRS 41A.071's affidavit requirement for two reasons. First, it
12 still alleges a failure by "a hospital or employee of a hospital" to "use [] reasonable
13 care, skill or knowledge" "in rendering services" at the hospital to a hospital
14 patient. Second, any claim of negligent hiring, training and supervision still
15 requires Plaintiff to prove that the hospital employees in question were negligent
16 "in rendering services" to his son, again falling squarely within the requirements of
17 NRS 41A.009 and NRS 41A.071. Absent proof of any underlying negligence by
18 the employee of the hospital, Plaintiff's negligent hiring/supervision/retention
19 claim fails. *See e.g., Frigo v. Silver Cross Hosp. and Med. Ctr.*, 377 Ill. App. 3d
20 43, 72, 876 N.E.2d 697, 724 (1st Dist. 2007) (negligent hiring, training, and
21 supervision irrelevant unless plaintiff can establish negligently hired, trained, and
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1 supervised employee was negligent *and* that his negligence caused plaintiff's
2 injury).

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4 In sum, Plaintiff's argument that compliance with NRS 41A.071 was
5 excused or was not required for those portions of his complaint alleging negligence
6 by hospital-employed social workers or other non-physician hospital employees is
7 without merit. Each of Plaintiff's claims is an allegation that "a hospital or an
8 employee of a hospital" failed to "use reasonable care, skill and knowledge" "in
9 rendering services" to a hospital patient falling squarely within the definition of
10 medical malpractice set forth in NRS 41A.009, thereby requiring compliance with
11 the affidavit of merit provisions of NRS 41A.071.
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15 **III. THE ATTACHED LETTER FROM THE DEPARTMENT OF**
16 **HEALTH AND HUMAN SERVICES – HEALTH DIVISION IS**
17 **INSUFFICIENT TO SATISFY NRS 41A.071's AFFIDAVIT**
18 **REQUIREMENT.**

19 In the alternative and as the primary basis for his Motion to Reconsider,
20 Plaintiff argues that document attached to his complaint – a letter from a
21 Complaint Intake Coordinator at the Department of Health and Human Services –
22 was sufficient to satisfy NRS 41A.071's affidavit requirement. Plaintiff's assertion
23 is without merit.
24

25 Nevada law is clear in that even when a plaintiff attaches an "opinion letter"
26 or other document provided by a medical expert for purposes of complying with
27 NRS 41A.071's affidavit requirement, such documents will not comply with the
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1 statute unless they contain a jurat and a declaration by the medical expert that the
2 statements contained therein were made under penalty of jury. In *Mountainview*
3 *Hospital, Inc. v. Eighth Jud. Dist. Ct.*, 273 P.3d 861, 128 Nev. Adv. Op. 17 (2012)
4 (the plaintiff filed a complaint alleging medical malpractice after she contracted
5 Methicillin-resistant *Staphylococcus aureus* (MRSA) and went into septic shock
6 following an elective back surgery. *Id.* at 863. In an effort to comply with NRS
7 41A.071's affidavit requirement, the plaintiff attached an "opinion letter" from Dr.
8 Bernard T. McNamara supporting her claims with a "California All-Purpose
9 Acknowledgment" form attached to the letter. *Id.*

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13 The *Mountainview* Court ultimately concluded that Dr. McNamara's
14 "opinion letter" and attached acknowledgment failed to satisfy NRS 41A.071's
15 affidavit requirement. While the Court remanded for an evidentiary hearing in
16 which the plaintiff would be required to prove that Dr. McNamara appeared before
17 the notary public and swore under oath that the statements contained in his opinion
18 letter were true and correct, it found that absent such proof, neither the "opinion
19 letter" nor the acknowledgement on their face would satisfy NRS 41A.071 because
20 neither contained a jurat or declaration by Dr. McNamara that he swore an oath
21 that the statements were true and correct and that his statements were made under
22 penalty of perjury. *Id.*

1 Here, there is no claim that the author of the Department letter appeared
2 before a notary public and swore under oath that the statements contained in the
3 letter were true and correct under penalty of perjury or that it contains the required
4 jurat. Moreover, as the district court correctly noted, the author of the letter does
5 not "claim to be a medical expert of any kind" nor does the letter even remotely
6 support the allegations of the complaint. (R. at 228-229). Accordingly, , the letter
7 on its face fails to satisfy NRS 41A.071, and the district court did not err in
8 reaching the same conclusion.
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12 **IV. THE DISTRICT COURT'S DECISION CAN ALSO BE AFFIRMED**
13 **ON THE ALTERNATIVE GROUND THAT DEFENDANTS DID NOT**
14 **OWE PLAINTIFF ANY DUTY.**

15 While the district court did not err in dismissing Plaintiff's Complaint,
16 dismissal was proper for another separate reason: Defendants did not owe the non-
17 patient plaintiff a duty of care to protect him against the destruction of the interior
18 of his home by his son Sean⁵.
19

20 It is well-established that to prevail on a negligence claim, a plaintiff must
21 establish four elements: (1) the existence of a duty of care, (2) breach of that duty,
22 (3) legal causation, and (4) damages. *Turner v. Mandalay Sports Entm't, LLC*, 124
23 Nev. 213, 217, 180 P.3d 1172, 1175 (2008). With respect to the duty element,
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27 ⁵ This Court will affirm the order of the district court so long as it reached the
28 correct result, albeit for different reasons. *Rosentein v. Steele*, 103 Nev. 571, 575,
747 P.2d 230, 233 (1987).

1 under common law principles, no duty is owed to control the dangerous conduct of
2 another or to warn others of the dangerous conduct, except when (1) there is a
3 special relationship between the parties or between the defendant and the
4 identifiable victim, *and* (2) the harm created by the defendant's conduct is
5 reasonably foreseeable. *Lee v. GNLV Corp.*, 117 Nev. 291, 295, 22 P.3d 209, 212
6 (2001); *Mangeris v. Gordon*, 94 Nev. 400, 402-03, 580 P.2d 481, 483 (1978).
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9 In *Mangeris v. Gordon*, 94 Nev. 400 (1978), the widow of a murder victim,
10 a taxicab driver, brought a wrongful death action against various defendants,
11 including operators of a massage parlor, alleging that they had negligently failed to
12 report to her husband or the local police department that certain known individuals
13 who frequented their establishment had committed violent criminal acts, and as a
14 result of their negligence, her husband was murdered. *Id.* at 400. The district court
15 dismissed plaintiff's complaint on the ground that it did not allege facts sufficient
16 to establish a duty to warn. *Id.* at 400-01. On appeal, this Court affirmed finding
17 that defendants did not owe the decedent any duty because even assuming a special
18 relationship existed between the defendants and the decedent "a reasonable person
19 would not, from the facts alleged, foresee a risk that [the assailant] would murder
20 [the decedent] at a remote time and distant location. Absent foreseeability of such
21 a risk, respondents had no duty to warn [decedent] of [the assailant's] criminal
22 conduct." *Id.* at 403 (citations omitted).
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1 Likewise here, even assuming *arguendo* that non-patient Plaintiff was an
2 identifiable third party, Defendants had no duty to warn Plaintiff of potential harm
3 or otherwise prevent Sean from causing damage to Plaintiff's home. Neither
4 Plaintiff's Complaint nor the attached letter detailing the Department's
5 investigation contain any allegations or information that Sean had a history of
6 violent conduct, that he had made threats directed to anyone, much less Plaintiff, or
7 that he had intentions of causing any damage to Plaintiff's home, or any other
8 information to make it reasonably foreseeable to Spring Mountain or Mr. Dubroca
9 that Sean would enter Plaintiff's home and cause \$20,000 in damages.
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12 Respondents were unable to locate any Nevada case involving this
13 reasonable foreseeability – duty concept in a medical malpractice case. However,
14 several other states' courts analyzing whether a defendant healthcare provider
15 owed a duty to an identifiable third party non-patient damaged or injured by a
16 patient have declined to impose such a duty, particularly where, as here, the harm
17 or damage to the non-patient was not reasonably foreseeable. *See e.g., Abraham v.*
18 *Wayside Cross Rescue Mission*, 289 Ill. App. 3d 1048, 1055, 682 N.E.2d 1240,
19 1244-45 (2d Dist. 1997) (defendant in-patient rehabilitation treatment center owed
20 no duty to identifiable victim (wife of patient) because it was not reasonably
21 foreseeable that patient (husband) would leave the facility and attack plaintiff,
22 despite evidence that patient had violent propensities); *Leonard v. Latrobe Area*
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1 *Hospital*, 425 Pa.Super. 540, 547-48, 625 A.2d 1228, 1232 (Pa.Sup.Ct. 1993) (no
2 duty to warn or otherwise protect nonpatient, even when nonpatient is known to
3 come into contact with patient, absent direct threat of harm to specific person);
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5 *Sherer v. Sarma*, 2014 IL App (5th) 130207, ¶35, 18 N.E.3d 181, 192-93
6 (psychiatrist who treated husband and wife did not have duty to protect or warn
7 wife of husband who had history of violence, despite wife's physician-patient
8 relationship with psychiatrist, where husband did not make any specific threats of
9 violence towards wife prior to killing her).
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12 These cases reflect the same duty – reasonable foreseeability analysis set
13 forth by this Court in *Mangeris*. Accordingly, Spring Mountain and Mr. Dubroca
14 owed no duty to the non-patient Plaintiff in this case, and the dismissal order may
15 and should be affirmed on this additional ground.
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Dated this 5th day of November, 2015.

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CERTIFICATE OF COMPLIANCE

I hereby certify that this brief complies with the typeface and style requirements of NRAP 32(a)(4)-(6). This brief has been prepared in a proportionately spaced typeface using Microsoft Office Word 2010 with 14-point, double-spaced Times New Roman font. I further certify that this brief complies with the page limitations of NRAP 32(a)(7) because, excluding the parts of the brief exempted by NRAP 32(a)(7)(C), it does not exceed 30 pages. I hereby certify that I have read this Answering Brief, and to the best of my knowledge, information and belief, it is not frivolous or interposed for any improper purpose. I further certify that this brief complies with all applicable rules, in particular NRAP 28(e), which requires every assertion in the brief regarding matters in the record to be support by reference to the page of the transcript of appendix where the matter relied on is to be found.

DATED this 5th day of November, 2015.

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CERTIFICATE OF SERVICE

The undersigned, an employee of Hall Prangle & Schoonveld, LLC hereby certifies that on the 5th day of November, 2015, she served a copy of **Respondents' Spring Mountain Treatment Center and Darryl Dubroca's Answering Brief** through the Nevada Supreme Court electronic filing system to:

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