

State of Minnesota County **Freeborn** District Court

CCT	List Charge Statute Only	M.O.C.	G.O.C.
1	609.224, Subd. 2(c)	AD30F	N
2	609.224, Subd. 2(c)	AD30F	N
3	609.224, Subd. 2(c)	AD30F	N
4	609.2325, Subd. 1(a); Subd. 3(a)(4)	I2140	N
5	609.2325, Subd. 1(a); Subd. 3(a)(4)	I2140	N
6	609.2325, Subd. 1(a); Subd. 3(a)(4)	I2140	N

CTY ATTY. FILE NO.	CONTROLLING AGENCY MN0240100	CONTROL NO. 08010714
COURT CASE NO. 24-CR-08-3057		DATE FILED

if more than 6 counts (see attached) if domestic assault

- Amended Tab Charge Previously Filed
 SERIOUS FELONY SUMMONS
 FELONY WARRANT
 GROSS MISDEMEANOR DWI ORDER OF DETENTION
 GROSS MISDEMEANOR

State of Minnesota
PLAINTIFF,

NAME: first, middle, last
Brianna Marie Broitzman
 1205 Kent Avenue
 Albert Lea, MN 56007

Date of Birth
06/28/89

SJIS COMPLAINT NUMBER

Defendant Fingerprinted

COMPLAINT

The Complainant, being duly sworn, makes Complaint to the above-named Court and states that there is probable cause to believe that the defendant committed the following offense(s). The Complainant states that the following facts establish PROBABLE CAUSE:

After receiving an initial notice of suspected abuse of elderly resident vulnerable adults suffering from Alzheimer's disease and/or dementia at the Good Samaritan Society nursing home located in Freeborn County Minnesota, on May 1, 2008, and as part of the investigation involving those allegations, Detective Debra Flatness of the Albert Lea Police Department with assistance from Deputy Robert Kindler of the Freeborn County Sheriff's Department conducted an investigation. Present during some the investigation interviews conducted by Detective Flatness were employees of Good Samaritan Society and Jolene Bertelsen, RN, Special Investigator for the Minnesota Department of Health who conducted a separate civil investigation for the Office of Health Facility Complaints.

Based upon the initial information received, the investigation focused on a group of young part-time nursing assistants some of who were directly involved in the abuse and some who knew or observed the abuse, but had failed to report the abuse. The group included: Brianna M. Broitzman, dob: 06/2/1989; Ashton M Larson, dob: 01/14/1990; AMH, dob: 08/01/1990; KNN, dob: 05/18/1990; SLS, dob: 05/05/1991; RMM, dob: 08/31/1990; JMS, dob: 05/18/1990; and MRW, dob: 08/17/1990.

On May 6, 2008, Brianna Broitzman, was invited to come the the Law Enforcement Center in the City Albert Lea, Freeborn County, Minnesota, to be interviewed by Detective Flatness of the Albert Lea Police Department and Deputy Robert Kindler of the Freeborn County Sheriff's Office about suspected abuse of vulnerable adults occurring at the Good Samaritan nursing home. Brianna Broitzman was advised that her coming to the Law Enforcement Center was voluntary and that she was free to leave at any time.

In May 2008, Brianna Broitzman stated that she was told by Ashton Larson that she had spit water on resident GR at the Good Samaritan Center, Albert Lea, Freeborn County, Minnesota.

Brianna Broitzman admitted that she and Ashton Larson poked SW in breasts.

Brianna Broitzman stated that numerous videos and pictures were taken of residents

COMPLAINT / INDICTMENT SUPPLEMENT

CCT	List Charge Statute Only	M.O.C.	G.O.C.
7	609.2325, Subd. 1(a); Subd. 3(b)	I2148	N
8	609.2325, Subd. 1(a); Subd. 3(b)	I2148	N
9	609.2325, Subd. 1(a); Subd. 3(b)	I2148	N
10	609.72, Subd. 3	N2030	N
11	609.234, Subd. 1(1)	I3160	N

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SJIS COMPLAINT NUMBERS

between the dates of January and April 2008. Brianna Broitzman stated there was a picture of a large bowel movement in a commode on AMH's phone. Brianna Broitzman stated that she saw a video of M.K. singing a song in March 2008 and stated she was with AMH and KNN.

During the ongoing investigation and based upon interviews with other Nursing assistants Detective Flatness obtained additional information and personal observations of Brianna Broitzman's activities and behavior with residents at Good Samaritan Nursing home between January 1, 2008 and May 1, 2008. The persons interviewed stated that "they" began talking among themselves about what they were doing in the nursing home after January 1, 2008. The statements included the following:

RMM stated she was friends with Ashton Larson, Brianna Broitzman, KNN, AMH, and JMS. RMM stated they would get together on breaks and at school and talk about their experiences while working at Good Samaritan nursing home. RMM stated the girls would talk and laugh about incidents with the residents. RMM stated that the girls who would tell stories were Ashton Larson, Brianna Broitzman and AMH.

RMM advised that one night between the date January 1, 2008, and May 1, 2008, while she and Brianna Broitzman were putting E.F. to bed Brianna Broitzman stated, "Watch this". She then spit into the resident's mouth. RMM stated that Brianna Broitzman had a cavalier attitude about the residents.

RMM stated that Brianna Broitzman said that she would poke residents in the breasts. RMM stated that this was done for fun and not to cause pain.

JMS stated that Brianna Broitzman and Ashton Larson told her about spanking resident C.K. JMS was told that he would laugh and the girls would keep doing it. They would play with his cane, ride it like a horse, and spank C.K. on the buttocks with it and Ashton Larson admitted that she patted C.K.'s buttocks.

JMS stated that the girls would say stuff behind the residents' back and put their glasses on and dance around. She stated girls were just having fun because they were frustrated.

AMH stated that "the girls" started talking about the incidents she realized was abuse around February 2008. AMH advised that Ashton Larson and Brianna Broitzman told her about things they did to residents and that she recalled that KNN was present during the conversations.

AMH stated the "girls" were pretty comfortable talking among themselves, but did not talk with others. AMH stated that the abusive activity was confined to certain residents.

This COMPLAINT was subscribed and sworn to before the undersigned this day of

NAME:	SIGNATURE:
TITLE:	

FINDING OF PROBABLE CAUSE

From the above sworn facts, and any supporting affidavits or supplemental sworn testimony, I, the Issuing Officer, have determined that probable cause exists to support, subject to bail or conditions of release where applicable, Defendant(s) arrest or other lawful steps be taken to obtain Defendant(s) appearance in Court, or Defendant(s) detention, if already in custody, pending further proceedings. The Defendant(s) is/are thereof charged with the above stated offense(s)

SUMMONS

THEREFORE, You, THE ABOVE-NAMED DEFENDANT(S), ARE HEREBY SUMMONED to appear on the day of , at AM/PM before the above-named court at to answer this complaint.

IF YOU FAIL TO APPEAR in response to this **SUMMONS**, a **WARRANT FOR YOUR ARREST** shall be issued.

WARRANT

EXECUTE IN MINNESOTA ONLY

To the sheriff of the above-named county; or other person authorized to execute this WARRANT; I hereby order, in the name of the State of Minnesota, that the above-named Defendant(s) be apprehended and arrested without delay and brought promptly before the above-named Court (if in session, and if not, before a Judge or Judicial Officer of such Court without unnecessary delay, and in any event, not later than 36 hours after the arrest or as soon thereafter as such Judge or Judicial Officer is available) to be dealt with according to law.

ORDER OF DETENTION

Since the above-named Defendant(s) is/are already in custody; I hereby order; subject to bail or conditions of release, that the above-named Defendant(s) continue to be detained pending further proceedings.

Bail:
Conditions of Release:

This Complaint - **Summons** duly subscribed and sworn to, is issued by the undersigned Judicial Officer this day of

NAME:	SIGNATURE:
TITLE: Judge of District Court	

Sworn testimony has been given before the Judicial Officer by the following witnesses:

STATE OF MINNESOTA	COUNTY OF
	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Freeborn</div>
State of Minnesota	
	<i>Plaintiff</i>
vs.	
Brianna Marie Broitzman	
	<i>Defendant(s)</i>

Clerk's Signature or File Stamp:

RETURN OF SERVICE
I hereby Certify and Return that I have served a copy of this COMPLAINT upon then Defendant(s) herein-named.

Signature of Authorized Agent: