

**Arkansas Department of Human Services  
Division of Child Care & Early Childhood Education  
Placement & Residential Licensing Unit**

**Licensing Compliance Record**

Agency Name: Piney Ridge Treatment Center Person in Charge: Romosa Adams  
 Address: 2108 Rock Hill Hwy Heville AR Phone: \_\_\_\_\_  
 Licensing Specialist: Susan Sanchez  
 Date of Visit: 2-28-2019 Purpose of Visit: Monitoring Visit

STANDARD REVIEWED	DISCUSSION/OBSERVATION	COMPLIANCE DATE	DATE CORRECTED
	Reviewed ten personnel records: [REDACTED]		
105.15	Verification of qualifications needed for: [REDACTED]	3-28-19	4-17-19
	Verification of positive personal reference needed for [REDACTED]	3-28-19	4-17-19
105.4	Proof of the following pro-service training completed: Resident grievance process for [REDACTED]	3-28-19	4-17-19
	Building/Grounds: Census: 102 Completed partial walkthrough of building/grounds no deficiencies noted on areas viewed viewed fire drill logs observed non medications being to dispensed to residents	}	

COMMENTS of Person receiving form:

Romosa Adams 2-28-19 Susan Sanchez 2-28-19  
 PERSON SIGNING AS RECEIVING DATE LICENSING SPECIALIST DATE  
 DCCECE 521 PR