



ARKANSAS
DEPARTMENT OF
**HUMAN
SERVICES**

Division of Child Care & Early Childhood Education
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Corrective Action Agreement

To: Brad McDaris

Date: August 6th, 2020
Agency: Piney Ridge Treatment Center
License Number: 00203

This document constitutes a formal Corrective Action Agreement between Piney Ridge Treatment Center and the DHS Division of Child Care and Early Childhood Education, Placement and Residential Licensing Unit. This Corrective Action Agreement will be in effect for a period of six months from the date of signing by both parties. This agreement may be extended beyond the date if the agency experiences any serious non-compliance during the corrective action period.

The purpose of this agreement is to gain and maintain a high degree of compliance with licensing requirements. The following non-compliance areas have been cited during the past six months.

Minimum Licensing Standards (Residential): Section 905 – Behavior Management & Section: 912 Bathrooms

- 905.4d. – The following actions shall not be used, including as discipline:
 - Derogatory comments about the child, the child's family, race, or gender.
- 912.6 – There shall be an adequate supply of soap, towels, and tissue.

Piney Ridge Treatment Center has agreed to implement the following:

- Staff will not use racially/culturally inappropriate language with residents or other staff.
- Piney Ridge Treatment Center has provided staff with Cultural Competence training and will detail how the training received will be implemented.
- For the month of August, the offending staff will meet with the ADON or DON weekly and discuss how training is being implemented on the unit and what has been learned in training providing examples. For the month of September, the offending staff will meet

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with the ADON or DON twice that month and discuss how training is being implemented on the unit and what has been learned in training providing examples. For the month of October, offending staff will meet with the ADON or DON once that month to discuss how what has been learned in training is being implemented on the unit.

- The ADON and/or DON will have the responsibility of monitoring the offending staff during assigned shifts. The ADON and/or DON will intervene, correct and report any behavior that goes against the licensing standards identified in Section 905 – Behavior Management of the Minimum Licensing Standards.
- Although there was an adequate supply of soap, towels and tissue viewed in the supply area, the items were not readily accessible for some residents that did not have any in their rooms. The plan for providing soap, and paper towels for all residents includes installing smoked clear paper towel dispensers that will give a visible way to see if this is a contraband location as well as the fill level of the supply of tri-fold paper towels. The facility has requested approval to order 36 of these dispensers from Grainger. Once ordered, these have a lead time of approximately 3 weeks. The estimated completion date for this is 8-31-2020. There may be supply issues from the company. In the meantime, different paper towels will be used in the rooms with a completion date of 8-7-2020. In addition, in the bedrooms during am and pm hygiene, residents have towels available for use. Each resident's room will have a fire resistant lightweight flexible molded plastic waste basket with a brown breathable paper bag for disposing of the paper towels and the expected time frame to have all of these in bedrooms is 8-7-2020. Manual operation soap dispensers will be installed in all resident restrooms by 8-31-2020. This will prevent access to batteries or mechanical parts and provide a soap/body wash product within the shower and bathroom areas for all resident rooms. There may be supply issues from the company. The estimated completion date for this is 8-31-2020. Bathrooms currently have hand pump soaps on the counters. The facility is currently sourcing, and it is estimated that they will pilot 2 different steel covers for these dispensers to add another level of protection from tampering and provide for the safety of the residents by 8-31-2020 dependent on supply issues.
- The facility shall abide by all the Behavior Management requirements as listed in the Minimum Licensing Standards Section 900 Psychiatric Residential Treatment Facilities 905 - Behavior Management.
- The facility shall abide by all Bathroom requirements as listed in the Minimum Licensing Standards Section 900 Psychiatric Residential Treatment Facilities 912 - Bathrooms.

This document is intended to clarify any outstanding issues and to reduce the risk of misunderstanding or miscommunication. During the probationary provisional time frame, frequent unannounced monitoring visits will be made to assure compliance.

Please be advised that any serious non-compliance cited during this corrective action period may result in a recommendation for adverse action on the license. Any serious

violation of this corrective action plan will result in a recommendation for adverse action on the license.

Please do not hesitate to contact the Division of Child Care and Early Childhood Education, Placement and Residential Licensing Unit, if you have any questions or concerns regarding ongoing compliance with this agreement or any licensing requirement.

The signature of the licensee constitutes full acceptance of the provisions of this agreement.

Bradley McDermott, RCL, CEO 8/10/20
Owner/Director Date

Licensing Specialist Date
Alamy Puss 8/10/20
Licensing Supervisor Date



9/9/2020

Washington County DHS – Division of Child Care and Early Childhood Education – Placement and Residential Licensing Unit
Rachel Carlton – Licensing Specialist
4252 Frontage Road
Fayetteville, AR 72703

RE: Appeal of Corrective Action Agreement and citing of 911.6

Dear Ms. Carlton:

On 8/21/2020 CEO of Piney Ridge Treatment Center sent an email requesting an appeal of the Corrective Action Agreement between PRTC and DCCECE/PRLU and a request to attend the next board meeting in September. Earlier last week we received an email from Ebony Russ stating after receiving further consultation, the Corrective Action Plan cannot be appealed. But that there is the ability to request a reconsideration from the Licensing Specialist.

Therefore after receiving this information from DCCECE/PRLU, Piney Ridge Treatment Center is requesting a reconsideration from you, Rachel Carlton, the Licensing Specialist of PRTC. In addition we plan to have representatives at the next board meeting in September.

905.4d – The following actions shall not be used, including as discipline:

- Derogatory comments about the child, the child's family, race, or gender.

When the agency discovered that a staff member may have made a derogatory comment to a resident, the DON met with the staff member and immediate appropriate corrective action occurred. The staff member was given a written corrective action plan on 4/17/2020 and the DON spoke to the staff member about culturally appropriate speech. On 5/3/2020 the employee completed the online Health stream course that educates on appropriate and effective care to members of various cultural groups. It focuses on being able to identify the assumptions we make about patients from different culture groups and guidelines and best practices for improving the quality of interactions with cross-cultural patients. After explaining this to DCCECE/PRLU, it was requested that we state how we were going to monitor that the employee was implementing the training that they had received. Therefore Piney Ridge Treatment Center stated for the month of August, the employee would meet with their supervisor weekly and discuss how they are implementing the training by providing the supervisor

examples. For the month of September, this would occur twice that month and in October this would occur once that month. Because of privacy laws for employees, we will not be submitting proof of such with this letter. Piney Ridge Treatment Center as a facility takes derogatory comments about the child, the child's family, race or gender seriously and acted immediately and would act immediately in the future also. We respectfully ask, when other psychiatric residential treatment facilities receive complaints regarding one employee's performance, which the facility addressed immediately, are they placed on a 6 month Corrective Action Plan?

912.6 – There shall be an adequate supply of soap, towels and tissue.

Residents do have access to soap, towels and tissue by staff members, however because of the nature of the residents we serve, some residents will take soap, towels and tissues and throw all around the bathroom and/or patient room causing various safety hazards for themselves or other residents. Also in the past, residents have attempted to hide contraband in paper towel holders which could have caused safety hazards for themselves, other residents and/or staff. However because of the corrective action agreement, soap containers have been placed in the resident bathrooms and on at least one occasion a resident has inserted part of the container into an orifice of their body. Because of the 521, paper towel holders for resident bathrooms have been ordered and some installed into the bathroom wall. However while in the bathroom, some residents have already torn the paper towel holders down, causing an additional safety hazard for both residents and staff. The spirit of the standard is that there is adequate supply of soap, towels and tissue, it does not state that all resident bathrooms are required to have paper towel holders, soap dispensers and tissue in every bathroom. We respectfully ask, are all psychiatric residential treatment facilities required to have paper towel holders, soap dispensers and tissue in every resident bathroom as has occurred with PRTC?

911.6 - All buildings and furnishings shall be safe, clean, and in good repair.

On the monitor visit on 8/14/2020 we were cited on needing toilet lids with epoxy flaked on it replaced. The lids have been cleaned, however at times while in the bathroom, residents will pick epoxy on the wall and it falls on the toilet lid and is cleaned by EVS staff. The lids are safe, clean and in good repair and we respectfully ask that DCCECE/PRLU recognize and understand that because epoxy may flake off on occasion that not all toilet lids need replaced.

One may ask, why did Piney Ridge Treatment Center sign the Corrective Action Agreement dated 8/6/2020? To be completely honest, we as a facility did not know it was our option to not sign or agree to the Corrective Action Agreement. We believe that it is important to maintain a healthy and professional relationship with DCCECE/PRLU and believed at the time that if the Corrective Action Agreement was not signed that it would affect this working relationship. However after consideration, we have decided that it is important to request a Reconsideration of the above areas.

We as a facility have had a long standing (decades spanning) excellent relationship with DCCEC/PRLU and have worked dutifully with all Licensing Specialists to be open to feedback and receiving assistance from them. It is hoped that because of our request of a Reconsideration that this will not adversely affect our working relationship with DCCEC/PRLU. In addition, we as a facility have also consistently and transparently self-reported to DCCECE/PRLU and will continue in that endeavor.

As an advocate for our children, it is our mission to provide children with a safe environment. Many times this involves children needing to be placed away from the victims. The corrective action agreement for 6 months has hindered many families and children who are seeking placement within our facility. It is our belief that both our agency and DCCECE/PRLU has the same mission of ensuring that children and families have access to safe and effective treatment to prepare them for the future.

Ms. Carlton, please let me know how we can assist with this Reconsideration.

Sincerely,



Bradley McDaris
Chief Executive Officer