

## **Division of Child Care & Early Childhood Education**

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## **Notice of Incident**

**Date of Incident**: 11/28/2021

Date Reported to DCCECE: 12/13/2021

**Agency Name:** Youth Home

Agency Number: 128

Type of Facility: Residential Facility License Type: Regular

Type of Incident: Suicidal

**Incident Description:** Client speer was having a crisis and client became anxious while inside

her

room. Client escalated and attempted suicide by hanging. Client attempted to wrap her bed sheet around her neck and on her closet rod. Staff intervened at

this time.

Agency's Interim Corrective Action:

Licensing Specialist Assigned: C. DeBoer Licensing Supervisor Assigned: A. Clowers

<u>Child Abuse Hotline</u> (Only applies to maltreatment incidents)

Was the Hotline Called: No. Was it accepted? N/A Outcome: Restraint hold. Client seen

by nurse. No injuries were reported at this time. Client transported to Acute at Pinnacle.

Assigned Investigator: N/A

Date of DCCECE's Follow-up: Type of Follow-up:

Details from Follow-up: