



Division of Child Care & Early Childhood Education
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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks

Facility Number: 237

Licensee Address: 2466 SOUTH 48TH STREET
SPRINGDALE AR 72766

Licensing Specialist: Michele Sutton

Person In Charge:

Record Visit Date: 3/2/2023

Home Visit Date: 3/2/2023

Purpose of Visit: Monitor Visit;Self Report Visit

Regulations Out of Compliance:

Regulation Number: 9. 912. 4

Regulation Description: The bathroom shall be clean and sanitary.

Findings Description:

Action Due Date:

Action Due Description:

Comply Date:

Sub Regulation Description:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Unannounced licensing visit completed this date. Licensing specialist verified that current safety plan precautions are documented and being observed for residents [REDACTED] and [REDACTED]. Resident obtained staffing sheet documentation which showed 9 MHTs working today. One MHT was assigned to 1:1 with resident [REDACTED]. Licensing specialist observed staff member in the comfort room with this resident working on schoolwork. CEO reported that resident was in comfort room with staff due to disruptive behaviors on the unit and in the classroom. She is currently programming separately and is being taken outside separately for breaks and recreation. A referral to acute care for this resident was made on Monday but resident was not accepted into acute care setting. Licensing specialist looked at foam padding in the comfort room during visit. Foam padding is intact with no loose or broken pieces. The padding is too shallow to represent a trip hazard. Licensing specialist believes that the foam padding falls within acceptable standards under regulation 911.6 at this time. Licensing specialist viewed bathroom near comfort room. The bathroom was reasonably clean, supplied with soap and toilet paper, and did not have foul odors at time of visit.

Licensing specialist viewed toilet in bathroom 301 and observed that the box that the toilet is in has trash, debris, and space for contraband on either side of the toilet. The facility stated that they plan to place foam in the area, let it protrude, and then cut and seal it. **Facility will be cited for standard 912.4 for this issue: please ensure that this maintenance is completed by 3/15/2023.**

Licensing specialist viewed camera footage for self-reported incident involving [REDACTED] taking an outlet off of the wall. The incident happened mostly in a camera blind spot. However, specialist could observe that staff was aware that [REDACTED] was in the corner out of camera view. For most of the hour that was viewed, one staff member was in the corner with her. When staff would occasionally leave her to complete other tasks on the unit, they circled back around to check on her within 5 minutes each time. There are no identified licensing issues regarding supervision related to this incident. Licensing specialist checked corner of the unit during walk through today to ensure that there were no loose or poorly fitted outlets on the wall.

Licensing specialist viewed camera footage for self-reported incident involving a suicide attempt for resident [REDACTED]. Camera footage showed a staff member processing with resident 1:1 from 11:31 to 11:39 until other residents arrived on the unit for quiet/reflection time. Resident enters room around 11:40 A.M. and camera footage shows that staff members respond to her attempt (tying a sweatshirt around her neck) at approx. 11:41.5. There are no identified licensing issues regarding supervision related to this incident.

Licensing specialist viewed environment of care maintenance logs for facility per CAA agreement. Log showed documentation of daily walk throughs and lists of facility maintenance items that are being completed every day.

Per facility, there were no new hires in the month of February. **Please ensure that new H.R. director attends the regulatory unit regulatory check training on 04/26/2023 per CCA requirements.**

Licensing specialist followed up on a report from DSPQA IOC team that mail that shows resident names had been left outside unsecured at the time of their visit. CEO Cassie stated that she is in contact with the USPS to explore options for securing mail. **Please ensure that there is a corrective action in place for this issue by 03/31/2023.** This licensing specialist has never observed unsecure mail outside of facility.

Ratio:

Cafeteria 2:11 and 1:1

Isolation Room: 1:1

Orange unit: 2:11

Milieu: 1:3

Provider Comments:

CCL Staff Signature :

Date: 3/2/2023

Provider Signature :

Date: 3/2/2023