



Division of Child Care & Early Childhood Education  
P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437  
P: 501.320.3971

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## Notice of Incident

**Date of Incident:** 5/30/2022

**Date Reported to DCCECE:** 6/1/2022

**Agency Name:** Millcreek

**Agency Number:** 233

**Type of Facility:** PRTF

**Facility License Type:** Regular

**Type of Incident:** Maltreatment

**Incident Description:** Client [REDACTED] stated that staff [REDACTED] put [REDACTED] in a chokehold. Nursing Assessment: Petechia to front and back of both shoulders, red scratches to left side at rib area, redness to center of back on left side and lower left side of back, 2 small bruises to upper left chest, c/o wrist hurting. Tylenol 650 mg given. Staff placed on administrative leave.

**Agency's Interim Corrective Action:** Staff placed on administrative leave.

**Licensing Specialist Assigned:** C.DeBoer

**Licensing Supervisor Assigned:** 5/30/2022

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**Child Abuse Hotline** (Only applies to maltreatment incidents)

**Was the Hotline Called:** Yes **Was it accepted?** Yes **Outcome:** Unsubstantiated

**Assigned Investigator:** Yes

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**Date of DCCECE's Follow-up:** 6/8/2022 **Type of Follow-up:** Facility visit.

**Details from Follow-up:** [REDACTED] interviewed whom stated [REDACTED] had an altercation with a peer (outside). The other peer told staff. Staff attempted to get [REDACTED] to go inside which [REDACTED] did not want to do because it was "fun day". [REDACTED] stated [REDACTED] "cussed" and "pushed" staff. [REDACTED] at this point staff ([REDACTED]) pushed [REDACTED] to the ground. [REDACTED] was asked to demonstrate how staff pushed [REDACTED] to the ground. [REDACTED] demonstrated that staff had an arm behind [REDACTED] head and an arm around [REDACTED] waist. When asked, [REDACTED] stated that it did not seem that staff was doing this to hurt [REDACTED]. [REDACTED] stated that the hold staff was performing did not hurt [REDACTED]. [REDACTED] indicated that the staff was holding [REDACTED] so [REDACTED] ([REDACTED])

would not assault staff (snickering). [redacted] indicated that [redacted] does not feel that staff here are threatening nor have staff tried to hurt [redacted]. [redacted] reported that [redacted] would let staff know if [redacted] felt threatened or was hurt by other staff.

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


Licensing Compliance Record

PRTF Name: Millcreek Person in Charge: Chris Butler  
 Address: Phone:  
 Licensing Specialist: Clayton DeBoer  
 Date of Visit: 6/8/22 Purpose of Visit: Incident Response

STANDARD REVIEWED	DISCUSSION/OBSERVATION	COMPLIANCE DATE	DATE CORRECTED
	<p>Client [redacted] stated that staff [redacted] put him in a chokehold.            Nursing Assessment: Petechia to front and back of both shoulders, red scratches to left side at rib area, redness to center of back on left side and lower left side of back, 2 small bruises to upper left chest, c/o wrist hurting. Tylenol 650 mg given. Staff placed on administrative leave.</p> <p>Facility visited from 9:00AM-11:30AM. Census: 160</p> <p>[redacted] interviewed whom stated he had an altercation with a peer (outside). The other peer told staff. Staff attempted to get [redacted] to go inside which [redacted] did not want to do because it was "fun day". [redacted] stated he "cussed" and "pushed" staff. He stated at this point staff ([redacted]) pushed him to the ground. [redacted] was asked to demonstrate how staff pushed him to the ground. [redacted] demonstrated that staff had an arm behind his head and an arm around his waist. When asked, [redacted] stated that it did not seem that staff was doing this to hurt him. [redacted] stated that the hold staff was performing did not hurt him. [redacted] indicated that the staff was holding him so he ([redacted]) would not assault staff (snickering). [redacted] indicated that he does not feel that staff here are threatening nor have staff tried to hurt him. [redacted] reported that he would let staff know if he felt threatened or was hurt by other staff.</p> <p>No evidence to support that [redacted] put client in a chokehold.</p>		

COMMENTS of Person receiving form:

 6-8-22  
 PERSON SIGNING AS RECEIVING DATE  
 OCCECE 521 PR

 6-8-22  
 LICENSING SPECIALIST DATE