



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437
P: 501.682.8590 F: 501.683.6060 TDD: 501.682.1550

Notice of Serious Incident

Date of Incident: 3/27/2023

Date Received by DCCECE: 3/28/2023

Facility Name: Piney Ridge Treatment Center

Facility Number: 203

Facility Type: Residential

Incident Type: Licensing

Report Description: On 3/27/2023 at approximately 1005, the North unit was lining up after community group to go to class. [REDACTED] (DOB [REDACTED]) pushed and then quickly hit [REDACTED] (DOB [REDACTED]). Staff intervened on the situation. [REDACTED] was assessed by nursing; order was received to take him to Arkansas Children's hospital due to possible fractured nose. He was having trouble breathing out his nose and reported numbness. [REDACTED] reported pain to his right hand. He was assessed and order received for x-ray to be completed in house. Resident [REDACTED] was taken to Children's hospital where he had a CT scan that confirmed a [REDACTED]. He returned to facility with ibuprofen every 6 hours for pain, and a follow-up with ENT on 04/03/2023. [REDACTED] had x-ray completed in house of his hand and shows no fracture or dislocation. He will be treated for pain as needed and also follow-up with APRN as needed. [REDACTED] was placed on precautions for the behavior and was on increased observation.

Interim Action Narrative: Residents were taken for medical care and the aggressor was placed on precautions and increased observations.

Maltreatment Narrative:

Licensing Narrative: 3/29/2023-Licensing Specialist emailed the facility to inquire if this was one or more punches, if there are peer restrictions in place, and if there is video footage available for review. The facility confirmed that the hit was a single punch to the face and the residents were placed on a six foot no interaction safety plan. The punch took place in line and can be viewed slightly on video at the far end of the room. The facility reports no clear footage available of the incident. 4/11/2023, Licensing Specialist reviewed camera footage and witness statements from the residents and a staff member.



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521 Visit Compliance Report

Licensee: Piney Ridge Treatment Center

Facility Number: 203

Licensee Address: 2805 E ZION RD
FAYETTEVILLE AR 72703

Licensing Specialist: Kendra Rice

Person In Charge: Ronissa Adams

Record Visit Date: 4/11/2023

Home Visit Date: 4/11/2023

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Time of Visit: 12:45 pm to 1:45 pm

Census: 91

Licensing Specialist reviewed camera footage for a provider reported incident on 3/27/2023.

Licensing Specialist observed a maintenance worker working on what appeared to be a repair on the carpet. Licensing Specialist observed the residents and staff enter the hallway. The residents were formed in a line with staff members at the beginning, in the middle, and at the back of the line. Both residents were in line standing by each other.

Licensing Specialist was unable to see the actual altercation due to residents standing around the two (2) residents involved. Licensing Specialist observed staff walking toward where the residents were and bringing resident [REDACTED] near the front of the line. Licensing Specialist also observed another staff member escorting resident [REDACTED] off the unit.

Licensing Specialist reviewed the witness statements from residents [REDACTED] and [REDACTED]. Licensing Specialist also reviewed a witness statement from a staff member.

Ms. Angie Smith (Director of Nursing) informed Licensing Specialist that the injured resident was doing and healing well with no complaints. Resident had a follow-up appointment on 4/3/2023 for his injuries. No concerns noted or follow-up appointment scheduled.

Provider Comments:

CCL Staff Signature :

Date: 4/11/2023



Provider Signature :

Date: 4/11/2023