

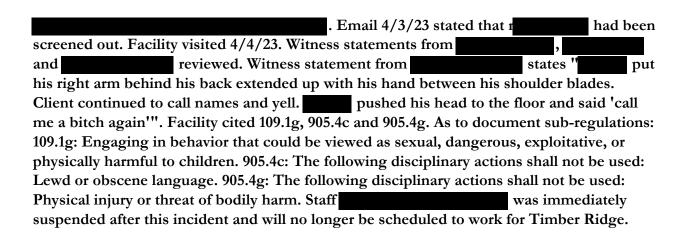
## **Division of Child Care & Early Childhood Education**

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: 3/31/2023
Date Received by DCCECE: 3/31/2023
Facility Name: Neurorestorative Timber Ridge
Facility Number: 102
Facility Type: Residential
Incident Type: Licensing
Report Description: Client , DOB , Foster Care, was not following instructions and became physically aggressive towards self and staff. Staff used non-approved hold method. Staff ) was suspended from shift. Her agency manager was notified. Guardian-DHS Case Worker notified. Child Licensing Agent (Clayton DeBoer) notified. notified . Disability Rights Center attempted notification but voicemail would not pick up.
Interim Action Narrative: Staff was suspended pending investigation.
Maltreatment Narrative:
Licensing Narrative: Client , DOB , Foster Care, was not following instructions and became physically aggressive towards self and staff. used non-approved hold method. Staff ( ) was suspended from shift. Her agency manager was notified. Guardian-DHS Case Worker notified. Child Licensing Agent (Clayton DeBoer) notified via phone call 3/31/23.





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

P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437

P: 501.508.8910 F: 501.683.6060 TDD: 501.682.1550

# **521 Visit Compliance Report**

Licensee: Neurorestorative Timber Ridge

Facility Number: 102

Licensee Address: 15000 TIMBERRIDGE LANE

BENTON AR 72019

Licensing Specialist: Clayton DeBoer

Person In Charge: Robert McDaniel

Record Visit Date: 4/4/2023

Home Visit Date: 4/4/2023

Purpose of Visit: Self Report Visit

### Regulations Out of Compliance:

Regulation Number: 1, 109, 1, g

Regulation Description: Unprofessional conduct in the practice of child welfare activities shall include, but not

limited to the following:

Findings Description: Staff was physically harmful during this incident.

**Action Due Date:** 

**Action Due Description:** 

Comply Date:

Sub Regulation Description: Regulation Number: 9. 905. 4.c

Regulation Description: The following actions shall not be used, including as discipline:

Findings Description: Staff used lewd and obscene language during this incident.

**Action Due Date:** 

**Action Due Description:** 

Comply Date:

**Provider Comments:** 

CCL Staff Signature :	Date: 4/4/2023
CCL Stall Signature .	L

Provider Signature : Date: 4/4/2023