



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: 8/7/2023

Date Received by DCCECE: 8/9/2023

Facility Name: Delta Family Health and Fitness for Children

Facility Number: 172

Incident Type: Licensing

Report Description: August 9, 2023 On August 7, 2023 at approximately 19:25 [REDACTED] was upset with a peer's behavior; [REDACTED] went into his room and hit his wall numerous times. When Shift leader [REDACTED] attempted to redirect [REDACTED], he punched [REDACTED] in the face and he was placed in the physical restraint. At 19:52 [REDACTED] had just been released and evaluated after being released from a physical hold by the nurse on duty [REDACTED] LPN and the RN on call came out to evaluate the client. Once the restraint was over Behavior Coach [REDACTED] was doing visual checks she noticed client [REDACTED] sitting on the bed attempting to tie his sheet around his neck. Shift leader [REDACTED] came to assist and client [REDACTED] proceeded to go into his bathroom. Once Shift leader [REDACTED] opened the door [REDACTED] had his head in a sink of water and his sheet around his neck. [REDACTED] was able to remove the sheet and [REDACTED] was escorted to timeout where he began crying. The nurse on duty was notified and the RN on call came out to evaluate [REDACTED]. Psychiatrist Dr. Vora, was notified and placed [REDACTED] on 1:1 precautions. On August 8, 2023 [REDACTED] was sent to acute care at Pinnacle Pointe. Once [REDACTED] is released from acute care he will return to DFC. LaChandra Williams, LPC\CRC\Program Director

Interim Action Narrative:

Maltreatment Narrative:

Licensing Narrative: Licensing received facility report 8/9/23 of incident that client suicide attempt that occurred 8/7/23. Facility visited 8/9/23 in response to facility reported incident that on 8/7/23 client [REDACTED] made a suicide attempt. This incident occurred on 8/7/23 and was reported to Licensing 8/9/23. Facility cited 110.17: The agency shall notify the Licensing Unit by the next business day of serious injuries requiring emergency medical treatment, agency vehicle accidents, arrests, elopements, suicide attempts, or deaths and maintain documentation of the incident and notification. No video footage was available to review as incident occurred in client's bedroom. Staff most directly involved in this incident, [REDACTED] and [REDACTED], interviewed. [REDACTED] stated she was outside client's bedroom watching him, as he ([REDACTED]) was dysregulated. When [REDACTED] began to punch the walls and windows a "code yellow" was called. Staff [REDACTED] attempted to prevent client [REDACTED] from continuing to punch the windows and walls at which time staff [REDACTED] stated she was struck in the right jaw. Staff [REDACTED] relieved [REDACTED] and managed to deescalate the situation. Client [REDACTED] was evaluated by the nurse and allowed to return to his room. Later, while staff [REDACTED] was conducting visual checks, she ([REDACTED] noticed client [REDACTED] had a sheet and was making the motion as to tie it around his neck. Staff [REDACTED] then called for assistance and client [REDACTED] went in the bathroom, which is located inside of the bedroom. Staff [REDACTED] then assisted staff [REDACTED] to remove the sheet from client [REDACTED]. Client [REDACTED] was reevaluated by the nurse and after consultation with Unit Physician, placed on 1:1 Observation until acute placement was found on 8/8/23.



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P: 501.508.8910 F: 501.683.6060 TDD: 501.682.1550

521 Visit Compliance Report

Licensee: Delta Family Health and Fitness for Children

Facility Number: 172

Licensee Address: 815 EAST SAINT LOUIS STREET
HAMBURG AR 71646

Licensing Specialist: Clayton DeBoer

Person In Charge: Dean Hill II

Record Visit Date: 8/9/2023

Home Visit Date: 8/9/2023

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulation Number: 1. 110. 17

Regulation Description: The agency shall notify the Licensing Unit by the next business day of serious injuries requiring emergency medical treatment, agency vehicle accidents, arrests, elopements, suicide attempts, or deaths, and maintain documentation of the incident and notification.

Findings Description: Client suicide attempt 8/7/23 was reported to Licensing 8/9/23.

Action Due Date:

Action Due Description:

Comply Date:

Sub Regulation Description:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Facility visited 8/9/23 in response to facility reported incident that on 8/7/23 client [REDACTED] made a suicide attempt. This incident occurred on 8/7/23 and was reported to Licensing 8/9/23. Facility cited 110.17: The agency shall notify the Licensing Unit by the next business day of serious injuries requiring emergency medical treatment, agency vehicle accidents, arrests, elopements, suicide attempts, or deaths and maintain documentation of the incident and notification.

No video footage was available to review as incident occurred in client's bedroom. Staff most directly involved in this incident [REDACTED] and [REDACTED], interviewed. [REDACTED] stated she was outside client's bedroom watching him, as he ([REDACTED]) was dysregulated. When [REDACTED] began to punch the walls and windows a "code yellow" was called. Staff [REDACTED] attempted to prevent client [REDACTED] from continuing to punch the windows and walls at which time staff [REDACTED] stated she was struck in the right jaw. Staff [REDACTED] relieved [REDACTED] and managed to deescalate the situation. Client [REDACTED] was evaluated by the nurse and allowed to return to his room. Later, while staff [REDACTED] was conducting visual checks, she ([REDACTED]) noticed client [REDACTED] had a sheet and was making the motion as to tie it around his neck. Staff [REDACTED] then called for assistance and client [REDACTED] went in the bathroom, which is located inside of the bedroom. Staff [REDACTED] then assisted staff [REDACTED] to remove the sheet from client [REDACTED]. Client [REDACTED] was reevaluated by the nurse and after consultation with Unit Physician, placed on 1:1 Observation until acute placement was found on 8/8/23.

Provider Comments:

CCL Staff Signature :

Date: 8/22/2023



Provider Signature :

Date: 8/22/2023

