



Division of Child Care & Early Childhood Education

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

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Dacus RTC
211 CHURCH STREET
BONO AR 72146

Kendra Rice
Donaghey Plaza
P.O. Box 1437
Little Rock, AR. 72203

Facility Visit Compliance Notice

Facility#: 108

Date of Visit: 10/23/2023

Visit Type(s): Subsequent Building and Grounds

Time: 12:30 AM - 2:03 PM

Visit Comment :

Time of visit: 12:30 pm to 1:45 pm

Census: 14

Licensing Specialist completed buildings and grounds. The following areas were observed: grounds, dining room area, activity room, bathrooms, bedrooms, seclusion room, gym, administration hall, nurse's station, and courtyard.

Licensing Specialist was escorted by Ms. [REDACTED] [REDACTED] Program Director.

Walking to the building, Licensing Specialist observed parked vehicles in the front and rear of the building. There were also two parked vans on the side of the building. The grounds were well maintained. The administration hall was organized and free of debris.

The activity room was clean and organized. The older residents were finishing up lunch and getting ready to head back to their classroom, ratio 2:8. Licensing Specialist reviewed the MAR's while in the nurse's station. Nurse [REDACTED] unlocked the medicine cart and showed Licensing Specialist where medications and controlled substances are kept. There are not any residents taking controlled substances at this time.

On the halls where the residents sleep, Licensing Specialist observed the bedrooms, bathrooms, and the seclusion room. There were no more than three (3) residents to a bedroom. Bedroom furnishings and bedrooms were safe, clean and in good repair. The bathrooms and seclusion rooms were clean.

Licensing Specialist requested a copy of the facility's liability insurance. Ms. [REDACTED] informed Licensing Specialist that she would email a copy once received.

Licensing Specialist reviewed the MAR's on the residents listed below:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

All initialed and up to date.

CCL Staff Signature :

Date: 10/23/2023



Provider Signature :

Date: 10/23/2023



Your Signature indicates that this form has been reviewed with you; it does not imply your agreement with it.

Right to Appeal: For more information on how to appeal these findings, refer to the minimum Licensing Requirements or contact your Licensing Specialist.