



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

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### Notice of Serious Incident

Date of Incident: 10/25/2023

Date Received by DCCECE: 10/27/2023

Facility Name: Youth Home, Inc.

Facility Number: 128

Incident Type: Dual

Report Description: Incident Report for [REDACTED] DOB: [REDACTED] Private placement client in our PRTF program and resides in Mabee House. Incident Report date/time: 10/25/23 8:04pm Location of Incident: Mabee House Incident Description: Aggressive to Adults, Threat to Safety, Property Destruction, Injury to Staff/Authorized Visitor Staff Involved: [REDACTED]

[REDACTED] Events Leading: Client was upset after receiving a pause for being rude to staff. Client went into her room closet after med monitoring. Client refused to take meds. Client then came out of her room and started flipping over furniture. Client was then in PR 8:04pm Personal Restraint: Client is in PR and being taken to seclusion. Client is upset and and still yelling at staff. Staff is trying to clear out seclusion so she could go in. 8:05pm Personal Restraint End: Client was placed in seclusion and let out of restraint. 8:06pm Locked Seclusion: Client is in seclusion and is very upset. Client is still refusing to calm. Staff is observing client and trying to get her to calm. 8:08pm Locked Seclusion End: Client has broken a peers cup and has exposed sharp plastic edges around the cup that could be used to self harm with. Staff opens seclusion door to remove the item from [REDACTED] 8:09pm Personal Restraint: Client threw bottle at staff when staff came in to get item from her. Client was then placed in another PR. Client was upset and kicking and scratching staff. Client was trying to bang her head on the floor and spit on staff as well. Staff is trying to calm client down and get her out of the personal restraint. 8:24pm Personal Restraint End: Client has calmed and has agreed to talk with nurse once staff let's her out of restraint. Patient Debriefing date/time: 10/25/23 9:00pm: Client has calmed down significantly and is processing with the nurse. Client has agreed to restore with staff about her freeze. Nursing Assessment date/time: 10/25/23 8:28pm: When the nurse got back to Mabee, she heard furniture shifting before she ever went inside. After entering at Mabee House, staff members locked the patient in seclusion. The patient was shouting at staff

members and pounding the window with another patient's water bottle while in lock seclusion. While in lock seclusion, the patient began hitting the camera with a water bottle until it broke. Because the patient had broken a water bottle and there were shards of plastic all around the seclusion room, staff had to go inside because that area was now unsafe for patient. The patient was physically restrained because she was too unstable for the staff to release her from seclusion. It was observed that the patient was trying to spit on the staff members and was scratching and kicking while under physical restraint. The patient was repeatedly instructed to cease kicking and scratching, but she refused to comply. After being warned multiple times not to do so, the patient was seen digging her nails into the staff member's hand. The left hand of the staff had blood on it. The patient was hitting her head on the ground as well. The nurse put a pillow under the patient's head and tried again to calm her down so she could be let go. Finally, the patient was able to relax and was released from personal restraint. Patient vitals were T-99.2, HR 122, R 23 and BP 114/67 at the time of nurse examination. The patient was able to respond appropriately and spoke in a clear and understandable manner. PERRLA equal and reactive to light. No vomiting or nausea were mentioned. No reports of visual impairment or dizziness. There are no symptoms of sore throat, hoarseness, coughing, drooling, respiratory distress, or difficulty swallowing. There are no visible markings on the neck. Petechia noted around the cheeks, nose, and eyeballs. According to the patient the petechia was caused by her using face wash last week. No sensitivity to noise or light reported by patient. The patient reported that her head was pulsating. The patient stated that the pulsating was merely on the right side, toward the end of her right eyebrow, and not a headache. Two scratches are visible on the patient's right thumb towards the bottom. That happened while the personal restraint. The patient refused the medication that the nurse offered. Patient said she could clean scratches on her own, even though the nurse offered to help. In front of the nurse, she was handed alcohol wipes to clean off her scratches. The nurse advised the patient to notify staff if her condition worsens so that she can be examined. The patient was tearful and apologetic during assessment. The patient was able to recall events leading to incident. Patient injuries and incident were reported to the on-call MD. MD ordered freeze, lock isolation, unlock seclusion, and personal restraint. Both the patient's mother and the on-call UM were informed of the occurrence. The nurse gave the patient her nightly medications and escorted her back to her room. Steady gait now with no issues with balance or coordination. The patient did not note or report any other symptoms or concerns. In addition, the patient complained of knee pain while in physical restraint. She stated that she hurt her knee earlier today while outside. Upon evaluation following the patient's release from restraint, a tiny red mark on the right knee was observed; edema was absent. Patient's gait was steady and range of motion was good. When the nurse asked if the patient needed anything to help with her pain, the patient said no. Guardian was notified on 10/25/23 at 8:45pm, 8:47pm, 8:53pm Incident Report on 10/26/23 at 8:48am Location of Incident: Siebert School Incident Description: [REDACTED] Staff Involved: Elizabeth Larson, Richelle Kumiyama, Cody Horn Events Leading: Today while in med checks being seen by the provider for weekly evaluation. [REDACTED] stated that she was placed in a restraint last night and was placed in seclusion. Pt states that she was restrained improperly and that they were not holding her properly and she knew this by the way she was able to still pinch [REDACTED] and

he was digging his nails into her hand(stating that a small abrasion on palm side next to thumb was from this.) She also reported that she was grabbed by the collar of her shirt and that it was tight on her neck and it was "choking her." Pt states that she tried to tell them that she was being choked but they wouldn't listen. Pt had no marks on her neck/throat but is noted to have some petechiae around her eyes and cheeks that wasn't there yesterday. A hotline report was made due to the statements and findings on patient Incident Report on 10/26/23 at 3:30pm: Location of Incident: Siebert School Incident Description: Medical Emergency (Trip to ER/Urgent Care) Staff Involved: Valerie Alvarez, Elizabeth Larson Events Leading: EL, RN reported the following and inquired what to do: "While doing med checks today and seeing [REDACTED] she stated that she was placed in a restraint last night and was placed in seclusion. Pt states that she was restrained improperly and that they were not holding her properly and she knew this by the way she was able to still pinch [REDACTED] and he was digging his nails into her hand(stating that a small abrasion on palm side next to thumb was from this.) She also reported that she was grabbed by the collar of her shirt and that it was tight on her neck and it was "choking her." Pt states that she tried to tell them that she was being choked but they wouldn't listen. Pt had no marks on her neck/throat but is noted to have some petechiae around her eyes and cheeks that wasn't there yesterday. This could be from numerous things and I don't want to assume its from the collar of her clothing since no marks were present on her throat/neck." She was instructed to pass this on to the UMs for further instructions. Attending APRN/DON/MD notified with order to send [REDACTED] out to ACH ER for further evaluation of petechiae rash on face and headache that has not responded to PRN treatment. [REDACTED] was transported to ACH ER in Youth Home Van with a team member and left campus around 1730. Nursing Assessment date/time: 10/26/23 9:40pm: MR, RN notified the treatment team via email the following: "[REDACTED]. returned from ACH at about 7:45pm tonight. She was diagnosed with [REDACTED]. Medications ordered are as follows: [REDACTED] mg tablet Directions Take 3 (three) tablet by mouth three times a day as needed for headache for 7 days. She has also been placed on activity limit x 3 days then reevaluate d/t potential for post-concussion syndrome. Please watch for irretractable vomiting. She may have sensitivity to light and screens. Straining while reading or focusing may lead to a headache." Guardian was notified on 10/26/23 at 5:40pm: A. Mother was called and notified of attending APRN sending [REDACTED] out to ACH ER for further evaluation of petechiae rash on face and headache that has not responded to PRN treatment. This nurse inquired if CT has been in contact with her today. She reported if CT attempted to reach out to her, she missed it. Discussed with [REDACTED] CT will be in contact with her regarding incident that happened the evening prior and notification of child abuse hotline call. [REDACTED] inquired if another hotline call was made against them again. Instructed guardian the allegations reported were regarding the incident the evening prior and CT will be contact with her. Guardian reported she would attempt to get into contact with CT.

Interim Action Narrative: Resident was assessed by the nurse and sent to ACH for further evaluation. Resident placed on activity restrictions. AR Hotline was called.

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**Maltreatment Narrative:** Resident reported she was placed in a restraint improperly hold and staff member dug his fingernails in her hand. Resident also reported that she was grabbed by her collar of her shirt and it was choking her.

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**Licensing Narrative:** Licensing Specialist was informed of this complaint and provided documentation. Licensing Specialist reviewed complaint for licensing concerns. Licensing Specialist inquired about camera footage and requested for footage to be saved. 10/30/2023, Licensing Specialist will inquire to see if complaint was accepted. Facility informed Licensing Specialist that referral was accepted. Licensing Specialist requested the referral number. Licensing Specialist inquired about the assigned investigator. 10/31/2023, Licensing Specialist requested permission to contact the facility. Licensing Specialist received permission to contact the facility. Licensing Specialist observed camera footage. Licensing Specialist received the corrective action for staff member. 11/27/2023, Licensing Specialist contacted investigator for an update. Licensing Specialist informed that case was found unsubstantiated.



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## 521 Visit Compliance Report

**Licensee:** Youth Home, Inc.

**Facility Number:** 128

**Licensee Address:** 20400 COLONEL GLENN ROAD  
LITTLE ROCK AR 72210

**Licensing Specialist:** Kendra Rice

**Person In Charge:** Robbie Lagrone

**Record Visit Date:** 10/31/2023

**Home Visit Date:** 10/31/2023

**Purpose of Visit:** Complaint Visit

### Regulations Out of Compliance:

**Regulation Number:** 100.109.1.g

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

**Finding Description:** Staff member was observed grabbing the resident's arm and it appeared that he pushed the resident.

**Action Due Date:**

**Action Due Description:**

**Comply Date:**

**Sub-Regulation Level 1 Description:** Engaging in behavior that could be viewed as sexual, dangerous, exploitative, or physically harmful to children.

**Action Due Description:**

**Regulation Number:** 900.905.15

**Regulation Description:** Staff shall search each child before placement in seclusion, and all potentially hazardous items shall be removed.

**Finding Description:** A water bottle was left in the seclusion room that resident destroyed into pieces.

**Action Due Date:**

**Action Due Description:**

**Comply Date:**

**Action Due Description:**

**Regulations Needing Technical Assistance:**

**Regulation Not Applicable:**

**Regulations Not Correctable:**

**Narrative:**

Time of visit: 9:45 am to 10:45 am

Census: 41

Licensing received a complaint on 10/25/2023 for ELS Case #017101. Licensing Specialist reviewed camera footage for this complaint on 10/31/2023 with staff member Mr. White.

Mr. White informed Licensing Specialist that staff member named in this complaint was terminated on 10/26/2023. Mr. White also informed Licensing Specialist that the investigator came out to the facility on 10/30/2023.

This complaint happened at Mabee House in the milieu and seclusion room around 8:05 pm. Licensing Specialist observed the resident turning over furniture in the milieu and a male staff member grabbing the resident by her arm. It appeared that the male staff member pushed the resident toward the seclusion room. Licensing Specialist could hear the resident screaming.

There was another resident laying on the floor in the seclusion room with the door open. It appeared that the resident was resting. Licensing Specialist observed other staff members (2) awake the resident and remove her from the seclusion room. It appeared that the male staff member (named in this complaint) had his fist at the base of the resident's neckline.

Once placed inside the seclusion room, Licensing Specialist observed the resident take a water bottle and bang it against the seclusion door and wall. The water bottle was from the resident that appeared to be resting in the seclusion room before her peer was placed in the seclusion room. Resident was also observed banging her head against the wall, kicking the wall, and hitting the wall with her hands (palms and fists). Staff were

observed going into the seclusion room, resident was placed in a physical restraint; ratio 2:1, and staff removed the water bottle along with pieces of it.

8:12 pm, Licensing Specialist observed the ratio 5:1. Three staff members had the resident in a physical restraint and there were two nurses in and by the seclusion room. While in the physical restraint, Licensing Specialist heard resident yelling and trying to get out of the physical restraint. Staff were heard trying to get the resident to calm down. 8:13 pm, Licensing Specialist observed a nurse bring a pillow but was unable to place the pillow under the resident's head.

8:17 pm, the male staff member named in this complaint requested for another male staff member to take over his position in the physical restraint. Per male staff member named in this complaint, he had been spat on. Resident continued yelling and refused to comply with directives from staff including the nurse to calm down. 8:24 pm, Licensing Specialist observed resident being released from the physical restraint.

8:25 pm, Licensing Specialist observed the resident and staff members in the milieu. No other residents were present. Licensing Specialist heard resident inform the nurse that she tried to tell staff that she was hurt. Licensing Specialist heard the nurse inform the resident that she needed to assess her for the reported injuries.

Facility will be cited for: R109.1.g, staff was observed being physical with resident (grabbing and pushing). R905.15, a water bottle was left in the seclusion room and resident was able to break into pieces.

**Provider Comments:**

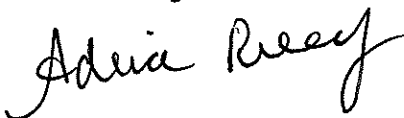
CCL Staff Signature :

Date: 10/31/2023



Provider Signature :

Date: 10/31/2023





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## **521 Visit Compliance Report**

**Licensee:** Youth Home, Inc.

**Facility Number:** 128

**Licensee Address:** 20400 COLONEL GLENN ROAD  
LITTLE ROCK AR 72210

**Licensing Specialist:** Kendra Rice

**Person In Charge:** Adria Riley

**Record Visit Date:** 11/28/2023

**Home Visit Date:** 11/28/2023

**Purpose of Visit:** Revisit Complaint

**Regulations Out of Compliance:**

**Regulations Needing Technical Assistance:**

**Regulation Not Applicable:**

**Regulations Not Correctable:**

**Narrative:**

No in-person licensing visit was completed on 11/28/2023.



Licensing received a complaint on 10/27/2023 for ELS Case #017101.

This complaint has been **FOUNDED** by licensing.

The facility was cited for regulations 109.1.g and 905.15 on 10/31/2023.

**Provider Comments:**

CCL Staff Signature :

Date: 11/28/2023



Provider Signature :

Date: 11/28/2023

*Beverly M. Fote*