



Placement and Residential Licensing Unit

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

Case Number: 020496

Date of Incident: 4/10/2024

Date Received: 4/11/2024

Facility Name: Youth Home, Inc.

Facility Number: 128

Incident Type: Licensing

Report Description: Client: [REDACTED] PRTF client Chestnut house Incident Start: 4/10/24 @ 3:15 PM Intervention Type: Personal Restraints, Locked Seclusion, Acute Placement Incident Description: Aggressive to adults, threat to safety Staff Involve: Shelia Glass (Personal Restraint, Reporting Staff, Seclusion), Darryel Sanders (Initiating Staff, Personal Restraint, Seclusion), Jon Pulliam (Personal Restraint, Seclusion), Joseph Davis (Nurse, Personal Restraint, Seclusion) De-escalation Techniques prior to intervention: Staff Support and Voluntary Timeout/Comfort Room Events Leading: Once the rest of the patients came from school and went to their rooms, patient remained in the milieu. Staff asked patient if he wanted to talk with staff and he stated he did not. Patient went to the rec room and sat in a chair. While the unit manager was talking with another patient, patient turned the radio up and was asked to turn it off if he wanted to remain in the rec room. Patient then attempted to push the radio. Staff stepped in front of the radio. Patient then began rolling the chair out into the milieu and to the back dorm area. Patient was asked to return to his room in which patient ignored staff's request. Patient then took his chair and rammed it into the staff's desk causing it to shift. Patient then rolled his chair and took the back of his chair to try to open a patient's door that was shut. Staff pulled the chair back from the patient's door. Staff had talked to patient for over twenty minutes with patient offering alternatives such as processing, going to his room or the comfort room but patient refused and also did not want to follow directions. Patient was informed that due to his unsafe behavior that he would be asked to go to unlocked seclusion if he could not go to his room. Patient continued to sit in the chair. 3:15 PM Personal Restraint: Staff placed patient in personal restraints. Patient then stated that he wanted to return to his room. 3:15 PM Personal Restraint End: Staff informed patient that he would be released in order for him to walk to his room. Patient snatched his arm away from staff. Patient was released from personal restraints. Patient then went behind the door and in his room and started beating on the door. Staff informed patient that he was released so that he could calm down

in his room. Patient did not respond to staff. After five minutes, patient walked out of his room and into the milieu to sit in a chair. Staff asked patient to return to his room in which patient refused. Staff offered the patient time in the comfort room but informed him that he could not remain in the milieu. Due to patient's unsafe behavior, patient was placed in personal restraints. 3:24 PM Personal Restraint: Patient began struggling and became aggressive with staff by kicking staff in the leg. He then began using profanity and asked staff to get off of him. Staff began removing patient's shoes as he continued to struggle. 3:26 PM Personal Restraint End: Patient continued to aggressively struggle while in personal restraint. Staff was talking to patient and asking him to calm down but patient continued to demand that staff get off of him and continued to escalate. Patient was released from personal restraints. 3:27 PM Locked Seclusion: Due to patient's volatile, aggressive and unsafe behavior, patient was placed in locked seclusion. Patient began screaming and stated that staff scratched him. Staff informed patient that staff's hand was on the sleeve of his shirt as he was being held underneath his shoulder. Patient then began banging on the window. Patient began demanding to come out of the seclusion room. Patient stated that if staff would allow him to come out, he would stop banging on the window and screaming. Staff informed patient that he had to show safe behavior in order for him to be released. Patient stated that if staff wanted him to do something that staff had to do what he wanted. Staff informed patient that he had to make the choice to calm down in order to work his way out of locked seclusion. Staff then observed patient with his bracelet as he stated that he was going to put it around his neck. Staff asked patient if he would give the staff his bracelet in which he responded that he would not. 3:32 PM Locked Seclusion End: Due to patient having the bracelet and attempting to put it around his neck, the door to locked seclusion was opened in order to retrieve the bracelet. 3:33 PM Personal Restraint: Patient was placed in personal restraint in order to retrieve the bracelet. Staff was able to retrieve the bracelet. 3:35 PM Personal Restraint End: Patient was released from being personally restrained. Patient began crying and screaming at staff. 3:36 PM Locked Seclusion: Once staff released patient and locked the seclusion door, patient began screaming that no one was trying to help him. Staff encouraged patient to work on calming down and making right choices. Staff informed patient that staff was there to assist him but patient stated that staff was not there to help him. Patient again began to demand to be released from locked seclusion. Staff informed patient that he had to work on showing safe behavior and that he can be calm as well as compliant. After ten minutes of trying to de-escalate patient, patient then took a water bottle out of his pocket. Patient began banging on the door with the water bottle as well as throwing it up to the ceiling. Patient then began hitting himself on the head with the water bottle. Staff asked patient to allow staff to retrieve the water bottle. Patient then placed the water bottle inside of his gym shorts. 3:47 PM Locked Seclusion End: Due to patient having a water bottle which was a safety concern and continued unsafe behavior, staff ended locked seclusion in order to retrieve the water bottle. Patient continued to ignore staff's directions to give staff the water bottle. 3:48 PM Personal Restraint: Patient was asked numerous times to give staff the water bottle to no avail. Patient aggressively struggled with staff. Patient was placed in personal restraint in order to retrieve the water bottle. Patient was using profanity and was not being cooperative. As staff exited the area, patient grabbed staff's shirt. Another staff assisted in helping staff to be released from patient's grip of his

shirt. 3:49 PM Personal Restraint End: Staff released patient from personal restraints. 3:50 PM Locked Seclusion: Patient began screaming at staff and then asked if he could have his anxiety medication to help him calm down. The nurse informed patient that he had medication at noon but that he would contact the doctor to see how soon he could administer it to him. The nurse encouraged him to work on calming down so that he can work out of locked seclusion. Patient then sat on the floor. 4:05 PM Locked Seclusion: Patient was observed sitting on the floor. Staff informed patient that he was doing a good job of calming down. Staff asked patient if he was ok but patient did not respond. Staff continued to monitor patient. 4:20 PM Locked Seclusion: Patient continues to sit on the floor. Staff informed patient that if he is able to remain calm and show himself safe, staff would begin the procedure of processing him out of locked seclusion. Patient did not respond. 4:35 PM Locked Seclusion End: Patient was calm and was sitting on the floor. Staff released patient from locked seclusion. Nursing Face-to-Face Assessment 4/10/24 3:40 PM Client required personal restraint after multiple attempts of de-escalation. Client also has refused to follow staff direction. Began to roll around in a chair, banging into furniture/staff. Personal restraint was initiated to transfer client to his room, then he would not stay in his room. Peers were moved to a different area. Client was assisted to seclusion, he continued to struggle with staff until seclusion was locked. Attempts at processing failed as client was agitated, screaming and banging on the seclusion window. When I asked him the next right thing to do, he replied "your mom!". Client also stated that he has too many people to restore with now. Client sat on the seclusion room floor. 4/10/24 4:40 PM Client calmed down in seclusion and was released. He went to his room. Client denies pain/injury from this incident and has no new obvious injury noted. Alert and oriented, PERRLA, gait steady, full/active ROM all extremities. Client then came out to eat dinner as his peers were in the cafe eating. He took his mealtime medication without incident. Respirations are even and unlabored and there are no s/s distress noted. Client then went to his room and was resting quietly. Around 7pm, client took PM meds without incident and was informed of acute placement. Calm and cooperative, client packed a bag and agency staff and van transported to Bridgeway acute around 7:45pm in stable condition. Patient Face-to-Face Debriefing 4/10/24 4:40 PM Staff began to process with patient about how he could have handled being upset differently. Patient stated that he did not want to talk. Staff informed patient that once he was released that he would be on freeze status. A nurse assessed patient and asked if he had any pain or if he was hurt. Patient stated that he was not in any pain or hurting but became irritated by the questions. Patient was informed that he could return to his room. Patient stated that he did not want to return. Staff asked him if he wanted to take some time to himself and stay in the area. Patient stated that he wanted to stay. Staff moved out of the area but monitored him. Patient later came out and returned to his room. Guardian Notification: 4/10/24 6:50 PM Legal Guardian: [REDACTED] 4/10/24 7:45 PM Legal Guardian: [REDACTED] Guardian notified on first attempt, reports assessment was done over the phone for acute placement. Guardian notified at 7:45pm that client had just left for transport to Bridgeway Staff Debriefing 4/10/24 5:00 PM - No injuries reported Additional Comments: Pt is increasingly unstable. Tries to show everyone that he is a tough kid. Tentative Safety Plan if/when client returns from acute: In the event that [REDACTED] is readmitted to Youth Home, he would be placed on Close Observation status (pending

doctor approval) until we can ensure that we can meet his safety needs. More finalized plans will be made closer to discharge from Bridgeway.

Interim Action Narrative:

Maltreatment Narrative:

Licensing Narrative: 4/11/24, Licensing Specialist reviewed Provider Reported Incident for licensing concerns. 4/16/24, per facility, Resident will not be returning upon his discharge from acute care. 4/25/24, Facility visited. Video reviewed of incident. No citations issued.



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: Youth Home, Inc.

Facility Number: 128

Licensee Address: 20400 COLONEL GLENN ROAD
LITTLE ROCK AR 72210

Licensing Specialist: Tara Norton

Person In Charge:

Record Visit Date: 4/25/2024

Home Visit Date: 4/25/2024

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

4/25/24 – Facility visited in response to an incident involving a resident. Camera footage was reviewed which showed personal restraints used and resident being placed in the seclusion room due to aggressive behavior toward staff. Eventually, the resident was admitted into acute care at The BridgeWay.

During the video, the resident is observed in the milieu of Chestnut House sitting in a staff chair, rolling around the room. Ratio 3:1. The resident is observed banging the chair into the staff's desk multiple times. Staff attempts to redirect the resident and is told that he cannot continue to bang the chair into the desk. Staff are observed giving the resident a choice to go to his bedroom. Resident refuses to do so and continues banging the chair into the desk. Staff attempts to redirect the resident and are heard giving resident the choice to go into the seclusion room to de-escalate, with negative results. A staff member is observed entering the seclusion room to check it before the resident is escorted there by staff. Ratio 4:1. Resident is observed kicking a female staff member while being escorted to the seclusion room. Before being placed into the seclusion room, the resident is observed to be wearing a bracelet and the female staff member is observed trying to retrieve the bracelet. However, the female staff member is unable to retrieve it due to resident's aggressive behavior. Once resident was placed into the seclusion room at 3:27 pm, resident is observed trying to place the bracelet over his head. Staff enter the seclusion room, initiate a restraint, and retrieve the bracelet from the resident. Ratio 3:1. The resident is observed looking at his arms and begins banging on the door of the seclusion room with his arms. Two staff members are outside the door at this time attempting to de-escalate the resident while resident demands to be let out of the seclusion room. Resident is observed pulling a water bottle out of the crotch area of his shorts and begins banging on the door with the bottle, and then begins banging the bottle on his head. Resident is also observed banging his head against the door. Resident is then observed placing the water bottle back in the front of his pants while staff is observed entering the seclusion room to retrieve the bottle. Ratio 3:1. Staff initiates a restraint, and a male staff member (nurse) is observed retrieving the water bottle from the resident. Resident is observed grabbing at a male staff member's beard multiple times before staff members can exit the seclusion room. After making multiple demands from staff while screaming and banging on the walls and door, resident eventually calms down and was able to leave the seclusion room at 4:35 pm. Resident was placed on "freeze status", returned to his bedroom, and was later transported by Youth Home staff to The BridgeWay for acute placement without further incident.

Provider Comments:

CCL Staff Signature : 

Date: 4/25/2024

Provider Signature : 

Date: 4/25/2024