

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: 022472

Date of Incident: 7/8/2024

Date Received: 7/8/2024

Facility Name: Perimeter of the Ozarks

Facility Number: 237

Incident Type: Licensing

Report Description: Resident arrived to the facility on 4/24/2024 and currently receiving services. expressed concern regarding the resident's master treatment plan. Per email, there have been multiple 'unit against unit' brawls that was notified or learned from .

Interim Action Narrative:

Maltreatment Narrative:

Licensing Narrative: Licensing received an email regarding complaint. The email has been attached to this case. 7/9/2024, Licensing Specialist and Program Coordinator discussed the case and Licensing Specialist will follow up with to find out who has custody of the child and a timeframe of the reported unit against unit brawls. 7/10/2024- The complaint was reviewed by the Licensing Specialist. 8/7/2024-Program manager and licensing specialist visited the facility to review children's records to include the resident named on this complaint.



Division of Child Care & Early Childhood Education

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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks
Facility Number: 237
Licensee Address: 2466 SOUTH 48TH STREET SPRINGDALE AR 72766
Licensing Specialist: Jarred Parnell
Person In Charge: Sarah Whorton
Record Visit Date: 7/10/2024
Home Visit Date: 7/10/2024
Purpose of Visit: Complaint Visit
Regulations Out of Compliance:
Regulations Needing Technical Assistance:
Regulation Not Applicable:
Regulations Not Correctable:
Narrative:
7/10/2024 - A visit was conducted at the facility to review resident file for updated treatment plan. The

treatment plan was up to date upon review.

Incident report logs were reviewed for the month of April and May to ensure required reporting to Licensing was completed.

Provider Comments:

CCL Staff Signature: Date: 7/10/2024

Provider Signature:

Date: 7/10/2024



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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks

Facility Number: 237

Licensee Address: 2466 SOUTH 48TH STREET

SPRINGDALE AR 72766

Licensing Specialist: Chelsea Vardell

Person In Charge: Charriot Sales

Record Visit Date: 8/7/2024

Home Visit Date: 8/7/2024

Purpose of Visit: Children's Records; Complaint Visit

Regulations Out of Compliance:

Regulation Number: 900.903.4

Regulation Description: The treatment plan shall be developed within thirty days after placement.

Finding Description: Treatment plans were found not to have been developed within 30 days of admission for

residents AW and AR.

Action Due Date:

Action Due Description:

Comply Date:

Action Due Description:

Regulation Number: 900.903.8

Regulation Description: The agency therapist shall visit the child monthly to monitor the progress of the plan.

Finding Description: Treatment plan reviews were not present in the files for the following children and months

listed above.

Action Due Date:

Action Due Description:

Comply Date: Action Due Description: Regulation Number: 900.905.11 Regulation Description: Chemical restraints shall be used only if ordered by a physician. A chemical restraint is an emergency behavioral intervention that uses pharmaceuticals by topical application, oral administration, injection, or other means to modify a child's behavior. Prescribed treatment medications that have a secondary effect on the child's behavior are not considered chemical restraint. Finding Description: Physician orders were not found regarding chemical restraints given to residents both 3/7/2024 and 7/22/2024. Action Due Date: Action Due Description: **Comply Date: Action Due Description:** Regulation Number: 900.905.12 Regulation Description: Seclusion, mechanical, or physical restraints shall be used only if ordered by a physician. Finding Description: Physician orders were not found regarding physical restraints performed on resident both 5/21/2024 and 7/22/2024. Action Due Date: **Action Due Description: Comply Date: Action Due Description:** Regulation Number: 900.905.17 Regulation Description: Documentation of all restraints shall be maintained and include child's name, date, time, reason, staff involved, and measures taken prior to restraint. Finding Description: Documentation of restraints to include the child's name, date, time, reason, staff involved, and measures taken prior to restraints were not found in resident for restraints performed on 5/10/2024 and 5/21/2024. The documentation was also not produced by the staff during the course of today's visit. **Action Due Date: Action Due Description:** Comply Date: Action Due Description:

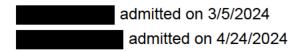
Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Licensing program manager and licensing specialist visited the facility to review children's records specifically related to treatment plans, therapy notes, physician notes, and restraint documentation for the following two residents.



<u>Resident</u> Contained a MTP (Master Treatment Plan) dated for 3/8/2024. The document was signed by only the clinical director and resident. The treatment plan was reviewed in April and May of 2024, but no review was present since that time.

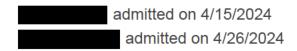
A restraint packet was found dated for 6/28/2024, but there was no corresponding physician's order for that restraint. Additionally, physician orders for the following restraints were documented in the file, but no corresponding restraint packet could be found.

3/7/2024-Chemical restraint ordered at 00:10 5/21/2024-Physical restraint ordered at 20:43 7/22/2024-Physical restraint ordered at 21:30 7/22/2024-Chemical restraint ordered at 21:30

Contained a MTP dated for 7/25/2024 although the resident was admitted on 4/24/2024. There were also treatment plan reviews for May and June 2024. The PRLU asked the facility how the MTP could be dated for 7/25/2024, but reviews for the treatment plan are in the file for May and June of 2024. The facility reported that the original MTP was likely never put in the chart, and they no longer have documentation of the original treatment plan. The facility explained that the therapist that created the MTP for 7/25/2024 likely did not agree with the original treatment plan and completed a new one at that time or the previous therapist did not leave a copy of the resident's treatment plan before they left employment. The facility could not produce the original treatment plan for this resident dated within 30 days of admission. Additionally, the treatment plan dated for 7/25/2024 was only signed by the clinical director of the facility.

A review of the physician's orders showed that the resident was placed in physical restraints on 5/10/2024 and 5/21/2024, but there was no restraint documentation accompanying those orders. The resident has been receiving individual therapy a minimum of two times per month but has had multiple therapists due to high turnover in that department. The resident has only received family therapy with her guardian one time (7/22/2024) since her admission in April although she is supposed to be receiving family therapy 2x per month.

A review was completed of the following two children's treatment plans:



- No treatment plan review for May 2024 was in the file.

Resident -A MTP was found dated for July 2024 although the child was admitted into the facility in April 2024.

The facility reported they have had four therapists terminated between March 2024-July 2024. The facility currently has one licensed therapist on staff who also services as the Clinical Director. A second therapist is employed but has not been officially licensed by the state of Arkansas and is under the direct supervision of the Clinical Director until she is licensed.

The facility stated the following in regard to corrective action the new Clinical Director has taken in response to these issues.

"In her short tenure, she has implemented several processes to improve our assessment and treatment planning and the fidelity of the medical records. Below are examples.

- 1. Standardized the MTP review process: all reviews are now done at the beginning of the month and therapist are responsible for ensuring completion.
- 2. Monthly record audits: expanded the audit criteria and put measures in place to track and address deficiencies.
- 3. Admission screening process: expanded the screening criteria to address Minimum Licensing Standards requirements."

The facility is receiving the following citations for failing to comply with the minimum licensing standards:

- **903.4** Treatment plans were found not to have been developed within 30 days of admission for residents
- **903.8-**Treatment plan reviews were not present in the files for the following children and months listed above.
- **905.11** Physician orders were not found regarding chemical restraints given to resident on both 3/7/2024 and 7/22/2024.
- **905.12-**Physician orders were not found regarding physical restraints performed on resident both 5/21/2024 and 7/22/2024.
- **905.17-**Documentation of restraints to include the child's name, date, time, reason, staff involved, and measures taken prior to restraints were not found in resident for restraints performed on 5/10/2024 and 5/21/2024. The documentation was also not produced by the staff during the course of today's visit.

Provider Comments:

CCL Staff Signature : Date: 8/13/2024

Provider Signature : Date: 8/13/2024