



**Placement and Residential Licensing Unit**

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

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**Notice of Serious Incident**

**Case Number: 027558**

**Date of Incident: 2/12/2025**

**Date Received: 2/13/2025**

**Facility Name: Youth Home, Inc.**

**Facility Number: 128**

**Incident Type: Licensing**

**Report Description: Incident Report for [REDACTED] Private placement client in our PRTF program and resides in [REDACTED] House Incident Report**

**date/time: 02/12/25 7:53pm Location of Incident: [REDACTED] House Incident Description:**

**[REDACTED] Staff Involved: Mya Medley, Micah Craig, Ebony Galmore, Joseph Davis Events Leading: The client was upset about a conversation with her therapist regarding being placed on TRS. The client processed with staff and seemed receptive to the information. As the client began walking to her room, she fainted in the hallway and exhibited seizure-like behavior. [REDACTED] paperwork was emailed to Kendra Slade on 02/13/25.**

**Interim Action Narrative: Resident was assessed by the nurse and evaluated at the [REDACTED].**

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**[REDACTED] Narrative:**

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**Licensing Narrative: Licensing reviewed provider reported incident for licensing concerns. Facility provided documentation for this provider reported incident. Documentation reviewed and uploaded.**