

ARKANSAS CLAIMS COMMISSION

(501)682-1619  
(501)682-2823 FAX



Questions? Send an email to  
ascc.new.claims@arkansas.go

101 EAST CAPITOL AVENUE, SUITE 410  
LITTLE ROCK, ARKANSAS 72201-3823

CLAIM FORM

1. **Claimant.** If a claim involves more than one claimant, additional pages may be attached with the other claimant name(s) and contact information.

Angela Stephens, as special administrator of Estate of Zach

(title last name/compan first name (email)

[Redacted]

(address)

[Redacted]

(city) (state) (zip) (primary phone)

2. **Claimant's Legal Counsel.** An individual claimant may act as his or her own attorney (which is known as proceeding pro se). Please review Ark. Code Ann. § 19-10-222 for information about when a business entity may file a pro se claim. If a claimant is proceeding pro se, this section may be left blank.

Gillispie Josh josh@gillispielawfirm.com

(title) (last name) (first name) (email)

1 Riverfront Place, Suite 605

(address) AR bar number

North Little Rock AR 72114 (501) 244-0700

(city) (state) (zip) (primary phone)

3. **State Agency Involved.** The Commission can only receive claims against agencies of the State of Arkansas. Please review the Commission’s jurisdictional statutes, including Ark. Code Ann. § 19-10-204 and Ark. Code Ann. § 21-5-701, for more information. This information is required for any claim filed at the Commission.

Arkansas Department of Human Services

4. **Incident Date** 9/7/2025

5. **Location of Incident**

6. **CHECK HERE if this claim involves damage to a motor vehicle.**

7. **CHECK HERE if this claim involves damage to property other than a motor vehicle.**

**8. Explanation of Incident** Please provide an explanation of your claim, including why you believe the above-listed state agency is liable for your damages under Arkansas law. You may attach additional pages to this form.

This claim concerns the 9/7/25 death of Zachary Moore, a 21-year-old intellectually disabled resident of the SE Arkansas Human Development Center in Warren. Zachary died while being held in a prolonged ground restraint by multiple staff members of the HDC. The claimant is Zachary's mother, Angela Stephens, who seeks wrongful death damages.

**9. Insurance Coverage.** For a claim involving damage to a vehicle or other property, you must submit a copy of your insurance declarations in effect at the time of the incident. This is not the same as an insurance card. You can obtain a copy of your insurance declarations from your insurer or insurance agent. Please review Ark. Code Ann. § 19-10-302 for more information.

**\*\*If you did NOT have insurance covering the damaged property or motor vehicle at the time of incident, CHECK HERE**

**10. Additional Required Documents for Property Damage Claim**

You must submit (1) invoice(s) documenting the repair costs, (2) three estimates for repair, OR (3) an explanation why this documentation cannot be provided.

**11. If a state vehicle was involved, please provide the following information**

\_\_\_\_\_

(type of state vehicle involved)                      (license number)                      (driver)

**12. If your claim involves personal injuries, please CHECK HERE**

**13. Health insurance coverage.** All personal injury claims require a copy of your health insurance information in place at the time of the incident. Please review Ark. Code Ann. § 19-10-302 for more information.

**\*\*If you did NOT have health insurance on the date of the incident, CLICK HERE**

**14. Amount of Damages, if known:** \$0.00 \_\_\_\_\_

**IMPORTANT!**

A claim filed at the Commission is a lawsuit against a state agency. The Commission is the courthouse for these lawsuits. Please note that Commission staff can answer general questions about the claim process but cannot give legal advice. The Commission rules and a non-exhaustive list of statutes that relate to the Commission can be found on the Commission website ([arclaimscommission.arkansas.gov](http://arclaimscommission.arkansas.gov)). The Arkansas Rules of Civil Procedure can be found online ([arcourts.gov](http://arcourts.gov)) under "Info Resources."

**STOP!**

This signature page must be completed in the presence of a Notary Public. Do not sign until you are directed to do so by the Notary Public. If there is more than one claimant involved in this claim, each claimant must complete a separate signature page.

If you are an ARKANSAS-LICENSED ATTORNEY submitting a claim on behalf of your client, there is a different signature page that must be used. Please call (501)682-1619 and ask for an attorney signature page.

If a BUSINESS OR CORPORATE ENTITY is filing a claim without an attorney (and meets the requirements of Ark. Code Ann. § 19-10-222 for doing so), there is a different signature page that must be used. Please call (501)682-1619 and ask for a corporate signature page.

The undersigned certifies that to the best of my knowledge, information, and belief, this claim is not being presented for any improper purpose; this claim is warranted by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law or for establishing new law; and the factual contentions have evidentiary support of, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery.

\_\_\_\_\_  
Claimant Signature

**ACKNOWLEDGEMENT**

State of \_\_\_\_\_

County of \_\_\_\_\_

On this the \_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned notary, personally appeared \_\_\_\_\_ known to me (or satisfactorily proven) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

\_\_\_\_\_  
Signature of Notary Public

[seal of office]

My Commission Expires: \_\_\_\_\_

ARKANSAS CLAIMS COMMISSION

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Angela Stephens, as special administrator of Estate of Zach

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(address)

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Gillispie Josh josh@gillispielawfirm.com

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North Little Rock AR 72114 (501) 244-0700

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Arkansas Department of Human Services

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**11. If a state vehicle was involved, please provide the following information**

\_\_\_\_\_   
 (type of state vehicle involved) (license number) (driver)

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**\*\*If you did NOT have health insurance on the date of the incident, CLICK HERE**

**14. Amount of Damages, if known:** \$0.00 \_\_\_\_\_

**IMPORTANT!**

A claim filed at the Commission is a lawsuit against a state agency. The Commission is the courthouse for these lawsuits. Please note that Commission staff can answer general questions about the claim process but cannot give legal advice. The Commission rules and a non-exhaustive list of statutes that relate to the Commission can be found on the Commission website (arclaimscommission.arkansas.gov). The Arkansas Rules of Civil Procedure can be found online (arcourts.gov) under "Info Resources."

**STOP!**

This signature page must be completed in the presence of a Notary Public. Do not sign until you are directed to do so by the Notary Public. If there is more than one claimant involved in this claim, each claimant must complete a separate signature page.

If you are an ARKANSAS-LICENSED ATTORNEY submitting a claim on behalf of your client, there is a different signature page that must be used. Please call (501)682-1619 and ask for an attorney signature page.

If a BUSINESS OR CORPORATE ENTITY is filing a claim without an attorney (and meets the requirements of Ark. Code Ann. § 19-10-222 for doing so), there is a different signature page that must be used. Please call (501)682-1619 and ask for a corporate signature page.

The undersigned certifies that to the best of my knowledge, information, and belief, this claim is not being presented for any improper purpose; this claim is warranted by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law or for establishing new law; and the factual contentions have evidentiary support of, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery.

\_\_\_\_\_  
Claimant Signature

**ACKNOWLEDGEMENT**

State of \_\_\_\_\_

County of \_\_\_\_\_

On this the \_\_\_ day of \_\_\_\_\_, 20\_\_\_, before me, the undersigned notary, personally appeared \_\_\_\_\_ known to me (or satisfactorily proven) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

\_\_\_\_\_  
Signature of Notary Public

[seal of office]

My Commission Expires: \_\_\_\_\_

ARKANSAS STATE CLAIMS COMMISSION

(501) 682-1619  
FAX (501) 682-2823



KATHRYN IRBY  
DIRECTOR

101 EAST CAPITOL AVENUE  
SUITE 410  
LITTLE ROCK, ARKANSAS  
72201-3823

CLAIM SUBMISSION SIGNATURE PAGE

The undersigned attorney certifies that to the best of my knowledge, information, and belief, this claim is not being presented for any improper purpose; this claim is warranted by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law or for establishing new law; and the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery.

Josha Gillispie

Claimant Name (must be printed legibly)

[Handwritten Signature]

Claimant Signature

Acknowledgement

State of Arkansas

County of Pulaski

On this the 20th day of February, 2020, before me, the undersigned notary, personally appeared Josha Gillispie known to me (or satisfactorily proven) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

[Handwritten Signature]  
Signature of Notary Public

My Commission expires: 7-00-20



BEFORE THE ARKANSAS CLAIMS COMMISSION

Angela Stephens,  
as Special Administrator of the Estate  
of Zachary Moore

CLAIMANT

V.

Claim No.

THE ARKANSAS DEPARTMENT OF  
HUMAN SERVICES

RESPONDENT

**COMPLAINT**

COMES NOW the Claimant, Angela Stephens, as Special Administrator of the Estate of Zachary Moore, by and through her attorney, Joshua D. Gillispie, and for her causes of action against the above-named Respondent, states the following:

**JURISDICTION AND VENUE**

1. This claim is brought pursuant to the Arkansas Claims Commission's jurisdiction over claims for monetary damages brought against an agency of the State of Arkansas, pursuant to A.C.A. § 19-10-204.
2. Venue is proper pursuant to A.C.A. § 19-10-201, et seq.

**PARTIES AND SERVICE**

3. Claimant hereby incorporates by reference all previous paragraphs as if fully set forth herein.
4. Claimant, as special administrator, brings this cause of action on behalf of the Estate of Zachary Moore; and for the wrongful death of Zachary Moore, on behalf of the following statutory beneficiaries: Angela Stephens, mother of the deceased; [REDACTED], as sister of the deceased; and [REDACTED], as half-sibling of the deceased.

5. At all times relevant to this cause of action, and at the time of the incident described further herein, Respondent, the Department of Human Services (hereafter “DHS”), was at all relevant times an Arkansas state agency. DHS, through its Division of Developmental Disability Services (hereafter “DDS”), operated the SE Arkansas Human Development Center (SEAHDC), where the acts complained of herein occurred. Zachary Moore’s Death Certificate, as well as his health insurance identification cards, are attached hereto, respectively, as *Exhibit 1* and *Exhibit 2*.

**FACTUAL BACKGROUND**

6. Claimant hereby incorporates by reference all previous paragraphs as if fully set forth herein.

7. Zachary Moore, born December 31, 2003, was admitted as a fulltime resident to SEAHDC in or around February of 2025.

8. Zachary suffered from, among other things, [REDACTED].

9. On September 7, 2025, Zachary died after being restrained in a prone position on the ground by multiple SEAHDC staff members for an extended period of time, approximately 13 minutes. During this restraint staff members were observed putting pressure on Zachary’s back with elbows and forearms, while other staff members held his head against the ground and still others held his legs.

10. Zachary was unresponsive when they ended the restraint at 6:52pm, and it is doubtful he was breathing. Despite this, an SEAHDC nurse administered a chemical injection to Zachary some 12 minutes later, at 7:04pm. It is not until after this chemical injection that staff attempt to perform CPR or any other lifesaving procedures.

11. Staff called for an ambulance at approximately 7:07pm. Zachary was dead when paramedics arrived at 7:14pm.

12. In a report released October 17, 2025, Respondent candidly acknowledged failures that led to Zachary's death, including the following:

- Staff escalated to a personal restraint without attempting required de-escalation alternatives and replacement behaviors outlined in the BSP.
- Staff applied an improper prone physical restraint for approximately 15 minutes, with arms, elbows, and body weight on his back, contrary to CPI training.
- Supervisory response and monitoring were deficient; a supervisor left during the event, and required nursing monitoring of position, respirations, and distress did not occur.
- Nursing sought and administered a chemical restraint, [REDACTED] at 7:04 p.m., without medical justification once he was no longer a danger, after reporting inaccurate information that he was in a mechanical "burrito" wrap.
- Delay and errors in emergency response occurred, including delayed recognition of apnea, delayed CPR initiation until after the injection, and AED pads initially placed over the abdomen.
- Facility governance and training systems failed to ensure policy implementation, staff competency in restraints, and timely dissemination and in-servicing of BSP and IPP changes to direct care staff.
- Staff used an unsafe prone physical restraint for about 15–16 minutes total, contrary to CPI training and standards warning of positional asphyxia risk.
- Staff applied pressure to the back during the prone restraint, which the investigator and QA identified as improper and potentially impairing breathing.
- Supervisory oversight failed because supervisors were present at times but did not correct the dangerous prone positioning or ensure proper monitoring during the restraint.
- Nursing assessment and monitoring were deficient because nurses left the unit before giving the injection, and the investigator reported nurses did not check Moore until the chemical restraint was administered.
- A chemical restraint was administered despite Moore not being a danger to self or others and appearing unconscious or non-combative at that time.

- Required de-escalation and least-restrictive measures were not used after freeing staff hair because staff moved immediately to restraint without allowing space or verbal de-escalation.
- The helmet requirement under the BSP was not implemented or communicated to direct staff, removing a primary preventive measure against biting and escalation.
- The QIDP or designee did not effectively supervise and continuously monitor the restraint as required, which contributed to unsafe implementation.
- Policy and practice gaps allowed administration of chemical restraint without current danger and lacked clear guidance on withholding when no longer indicated.
- CPR competency and emergency response were compromised because the primary RN's CPR certification was expired and delays occurred before recognizing absent breathing and pulse.
- Time of death was pronounced by EMS at 7:04 PM per one account and by MD at 7:30 PM per another, reflecting response inconsistencies.

13. DHS Director Janet Mann also issued a media statement acknowledging that deficiencies at the SEAHDC led to Zachary's death and pledging reforms. That statement, contained within a KATV article dated October 17, 2025, is attached as *Exhibit 3*.

**COUNT ONE: NEGLIGENCE**

14. Claimant hereby incorporates by reference all previous paragraphs as if fully set forth herein.

15. The Respondent Arkansas state agency, DHS, at all times relevant to this action controlled and operated SEAHDC. Respondent, at all times relevant to this action, owed Zachary Moore a duty of ordinary care. In agreeing to accept the custody, care, and control of Zachary, Respondent expressly assumed a duty of care.

16. Respondent breached its duty and proximately caused Claimant's damages as described herein.

17. All of the foregoing acts and omissions on the part of DHS, taken separately and/or collectively, constitute a direct and proximate cause of the injuries and damages suffered by Claimant, as set forth herein.

**DAMAGES**

18. Claimant hereby incorporates by reference all previous paragraphs as if fully set forth herein.

19. As a direct and proximate result of the occurrence made the basis of this lawsuit, Claimant claims the following damages:

- a. Loss of life of Zachary Moore, commencing at death and ending at life expectancy;
- b. Conscious pain and suffering of Zachary Moore prior to death;
- c. Mental anguish and emotional distress, including grief and despair, suffered up to the present time; and
- d. Mental anguish and emotional distress, including grief and despair, that will continue well into the future.

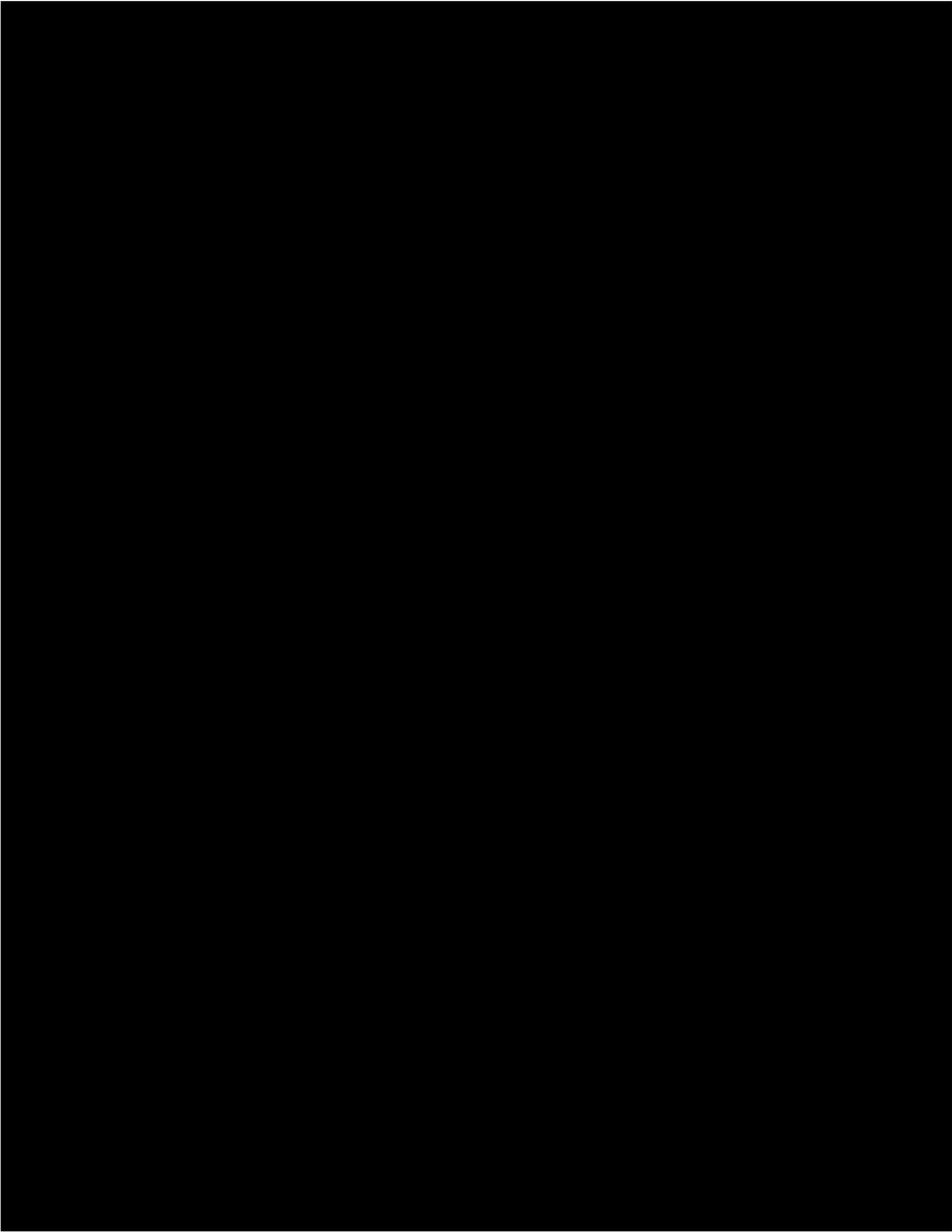
**PRAYER FOR RELIEF**

WHEREFORE, Plaintiff, by and through her attorney, Joshua D. Gillispie, respectfully requests recovery for all damages previously pled herein, and for compensatory damages for the reasons previously pled and in an amount previously prayed for and/or allowed by common law or by statute, and for all other relief to which Claimant is justifiably entitled.

Respectfully submitted by:

/s/ Joshua D. Gillispie  
ABA # 2010131

Gillispie Law Firm  
1 Riverfront Pl., Ste. 605  
Little Rock, AR 72201  
(501) 244-0700  
(501) 244-2020, fax  
[josh@gillispielawfirm.com](mailto:josh@gillispielawfirm.com)





76°

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LIVE

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## 11 employees placed on leave, 1 fired after resident dies at DHS Human Development Center

by Thomas Farrar

Fri, October 17, 2025 at 12:46 PM

Updated Fri, October 17, 2025 at 1:54 PM





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**TOPICS:** [DHS](#) [HUMAN DEVELOPMENT CENTER](#) [RESIDENT DEATH](#) [ADMINISTRATIVE LEAVE](#) [RESTRAINTS](#) [GEOI](#) [>](#)

WARREN, Ark. (KATV) — 11 DHS employees have been placed on administrative leave and another has been terminated after a resident died when improper care was provided at a disability services center in Warren.

An adult resident of the Southeast Arkansas Human Development Center died after a "behavior incident" led staff to use physical and chemical restraints, the Department of Human Services (DHS) said in a release.

The death occurred on Sep. 7. According to an official report, a resident at the facility with intellectual disabilities and a history of aggression had an outburst.

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The report says that the staff restrained the resident, but this restraint was prolonged and performed incorrectly. A nurse then administered 20 mg of Geodon, an "atypical antipsychotic



A formal review concluded that the staff did not follow protocol, leading the department to take disciplinary action. An interim superintendent at the Center has also been named.

As the investigation continues, DHS says they will take additional steps to hold staff who did not follow protocol accountable and implement changes at the facility.

Any changes at the facility will also be applied to the other four Human Development Centers in the state.

DHS Secretary Janet Mann released the statement below:

***“The loss of one of the residents entrusted to our care at the Southeast Arkansas Human Development Center was wholly unacceptable and is not reflective of the level of care we work to provide Arkansans every day. We offer our deepest sympathies to the individual’s family and are working to both hold accountable those responsible for this incident and make changes throughout our system to prevent future tragedies.*”**

***“While we are limited in the specific information we can provide because of ongoing investigations and to respect the privacy of the resident who died, the information we have shows that there were significant issues throughout the handling of this case. As a result, we have placed multiple employees on administrative leave, already fired one employee involved, named an interim superintendent, and are working to implement reforms so our residents receive the proper and safe care they deserve.*”**

The full 148-page report can be found below:



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>04G007</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	
NAME OF PROVIDER OR SUPPLIER  <b>SOUTHEAST ARKANSAS HUMAN DEVELOPMENT CENTER</b>			STREET ADDRESS, CITY, STATE <b>1 CENTER CIRCLE WARREN, AR 71671</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PL/ (EACH CORRECTIV CROSS-REFERENCE DEFI	
W 104	<p>GOVERNING BODY CFR(s): 483.410(a)(1)</p> <p>The governing body must exercise general policy, budget, and operating direction over the facility. This STANDARD is not met as evidenced by: Based on interviews, record review, facility document review, and facility policy review, it was</p>	W 104		

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## MORE TO EXPLORE

### 8th South Drug Task Force and Arkansas State Police seize meth at weigh station stop

ARKANSAS STATE CLAIMS COMMISSION

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KATHRYN IRBY  
DIRECTOR

101 EAST CAPITOL AVENUE  
SUITE 410  
LITTLE ROCK, AR 72201-3823

February 26, 2026

Mr. Jim Brader  
Arkansas Department of Human Services  
700 Main Street, Slot S260  
Little Rock, Arkansas 72203

(via email)

RE: ***Angela Stephens, as Special Administrator of the Estate of Zachary Moore v. Arkansas Department of Human Services***  
**Claim No. 261265**

---

Dear Mr. Brader,

Enclosed please find a copy of the above-styled claim filed against the Arkansas Department of Human Services. Pursuant to the Arkansas Rules of Civil Procedure, as well as Claims Commission Rule 2.2, you have **thirty days from the date of service** in which to file a responsive pleading.

Your responsive pleading should include your agency number, fund code, appropriation code, cost center, and activity/section/unit/element that this claim should be charged against, if liability is admitted, or if the Claims Commission approves this claim for payment. This information is necessary even if your agency denies liability.

Sincerely,

Kathryn Irby

ES: kmirby

cc: Joshua D. Gillispie, *counsel for Claimant* (w/ encl.) (via email)

**Note to Claimant or Claimant's counsel:** The Claims Commission copied you on this correspondence to provide you with confirmation that your claim has been processed and served upon the respondent agency.

**From:** [Kathryn Irby](#)  
**To:** [Joshua Gillispie](#); [Vincent France](#)  
**Cc:** [OCC Claims Commission Cases](#); [Jim Brader](#)  
**Subject:** NEW CLAIM: Stephens v. DHS, Claim No. 261265  
**Date:** Thursday, February 26, 2026 4:00:00 PM  
**Attachments:** [Stephens v. DHS, 261265 -- ltr to agency.pdf](#)  
[Claim No. 261265.pdf](#)

---

**Vincent**, per the earlier telephone conversation with Josh, attached please find the above-referenced new claim against DHS.

**Josh**, I confirm receipt of your claim file. Please see attached correspondence sent with the claim file to Vincent along with the entire claim file put into one pdf.

If there are any questions, please give me a call.

Kathryn

**Kathryn Irby**  
**Arkansas State Claims Commission**  
101 East Capitol Avenue, Suite 410  
Little Rock, Arkansas 72201  
(501) 682-2822

---

**From:** Joshua Gillispie <josh@gillispielawfirm.com>  
**Sent:** Thursday, February 26, 2026 3:46 PM  
**To:** Kathryn Irby <Kathryn.Irby@arkansas.gov>  
**Cc:** Vincent France <Vincent.P.France@dhs.arkansas.gov>  
**Subject:** Angela Stephens v. DHS Claim

Kathryn,

I have filed the claim online. Attached is my notarized claim signature, a very short complaint, the death certificate, and the press release (contained with a KATV article) Vincent referenced in our call.

Please let me know what else you might need.

Joshua D. Gillispie



1 Riverfront Place, Suite 605

North Little Rock, AR 72114

(501) 244-0700

(501) 244-2020 fax

<https://gillispielawfirm.com/>

**From:** [Vincent France](#)  
**To:** [ASCC Pleadings](#); [Joshua Gillispie](#)  
**Cc:** [Daiquiri Carter](#); [Kathryn Irby](#)  
**Subject:** Stephens v. DHS, Claim No. 261265  
**Date:** Friday, February 27, 2026 8:44:00 AM  
**Attachments:** [Answer to Complaint.pdf](#)  
[image001.png](#)  
[image002.png](#)  
[Signed Settlement Agreement.pdf](#)

---

To all,

Please find attached DHS's Answer to the Complaint and the signed Settlement Agreement by both parties.

Sincerely,

**Vincent P. France**  
Deputy Chief Counsel for Litigation  
Office of Chief Counsel  
PO Box 1437, Slot S260  
Little Rock, AR 72203-1437  
Office Phone: 501-534-4127  
[Vincent.P.France@dhs.arkansas.gov](mailto:Vincent.P.France@dhs.arkansas.gov)



□ □ □

**NOTE - This email may contain sensitive or confidential information.**

**CONFIDENTIALITY NOTICE:** The information contained in this email message and any attachment(s) is the property of the State of Arkansas and may be protected by state and federal laws governing disclosure of private information. It is intended solely for the use of the entity to which this email is addressed. If you are not the intended recipient, you are hereby notified that reading, copying or distribution this transmission is **STRICTLY PROHIBITED**. The sender has not waived any applicable privilege by sending the accompanying transmission. If you have received this transmission in error, please notify the sender by return and delete the message and attachment(s) from your system.

IN THE ARKANSAS STATE CLAIMS COMMISSION

ANGELA STEPHENS, SPECIAL ADMINISTRATRIX OF  
THE ESTATE OF ZACHARY MOORE

CLAIMANT

vs.

CC No. 261265

ARKANSAS DEPARTMENT OF  
HUMAN SERVICES

RESPONDENT

**RESPONDENT'S ANSWER TO THE COMPLAINT**

COMES NOW, Respondent, Arkansas Department of Human Services, by and through its attorney, Vincent P. France, Deputy Chief Counsel for the Arkansas Department of Human Services, and for its Answer to Complaint, states the following:

The Claimant has properly submitted this claim electronically using the submission form provided by the Arkansas State Claims Commission, and has provided a Complaint that contains the facts and allegations. In order to properly address the facts and allegations, DHS's Answer will refer to the paragraphs listed in Complaint and not the electronic forms.

1. DHS admits Paragraph 1 of the Complaint only to the extent that the jurisdiction of the Arkansas State Claims Commission was previously governed by Ark. Code Ann. §19-10-204, as alleged in Paragraph 1; however, the jurisdiction is now governed by Ark. Code Ann. §25-44-204.

2. DHS admits Paragraph 2 of the Complaint.

3. Paragraph 3 of the Complaint does not require any admission or denial by DHS.

4. DHS admits Paragraph 4 of the Complaint.

5. DHS admits Paragraph 5 of the Complaint. However, DHS lacks sufficient information and knowledge regarding the veracity of the information contained in the attached

exhibits to admit or deny the information contained therein; therefore, DHS must deny the information contained therein, although the documents speak for themselves.

6. Paragraph 6 of the Complaint does not require any admission or denial by DHS.

7. DHS admits Paragraph 7 of the Complaint.

8. DHS admits Paragraph 8 of the Complaint.

9. DHS admits Paragraph 9 of the Complaint only to the extent that Zachary died on September 7, 2025. DHS lacks sufficient information to admit or deny the remaining facts and allegations contained in Paragraph 9 of the Complaint. Moreover, DHS recognizes that a video of the incident exists, which speaks for itself.

10. DHS lacks sufficient information to admit or deny the allegations in Paragraph 10 of the Complaint; therefore, the allegations in Paragraph 10 are denied. DHS recognizes that a video of the incident exists, which speaks for itself.

11. DHS lacks sufficient information to admit or deny the allegations in Paragraph 11 of the Complaint; therefore, the allegations in Paragraph 11 are denied. DHS recognizes that a video of the incident exists, which speaks for itself.

12. DHS lacks sufficient information to admit or deny the allegations in Paragraph 12 of the Complaint and all sub-bullet points contained therein; therefore, the allegations in Paragraph 12 and all sub-bullet points are denied. As to the document referenced in Paragraph 12 and in its sub-bullet points, the document speaks for itself.

13. DHS lacks sufficient information to admit or deny the allegations in Paragraph 13 of the Complaint; therefore, the allegations in Paragraph 13 are denied. However, DHS admits that it issued a Press Release regarding the incident in question, which speaks for itself.

14. Paragraph 14 of the Complaint does not require any admission or denial by DHS.

15. DHS admits Paragraph 15 of the Complaint.

16. DHS denies the allegations contained in Paragraph 16 of the Complaint.

17. DHS denies the allegations contained in Paragraph 17 of the Complaint.

18. Paragraph 18 of the Complaint does not require any admission or denial by DHS.

19. DHS denies the allegations contained in Paragraph 19 of the Complaint including those contained in subparagraphs (a) through (d) of Paragraph 19.

20. DHS denies any statement and allegations in the “Wherefore” clause of the Complaint.

21. DHS denies all other statements and allegations contained in any other section of the electronic claim submission form.

**AFFIRMATIVE DEFENSES**

22. DHS affirmatively pleads that Claimants have failed to state a claim for relief pursuant to Ark. R. Civ. P. 12(b)(6).

23. Respondent affirmatively pleads the defense of unforeseeability of the causes and consequences of the actions taken in this matter.

24. Respondent affirmatively pleads the defense of assumption of risk.

25. DHS affirmatively pleads the defense of intervening causation, as well as the affirmative defense of comparative fault.

26. Respondent affirmatively pleads the defense of informed consent.

27. DHS affirmatively pleads that it has the right to amend and add any additional affirmative defenses that may arise throughout the pendency of this matter.

WHEREFORE, Respondent DHS moves that this claim be denied, and for all other just and proper relief to which it may be entitled.

Respectfully submitted,  
Arkansas Department of Human Services

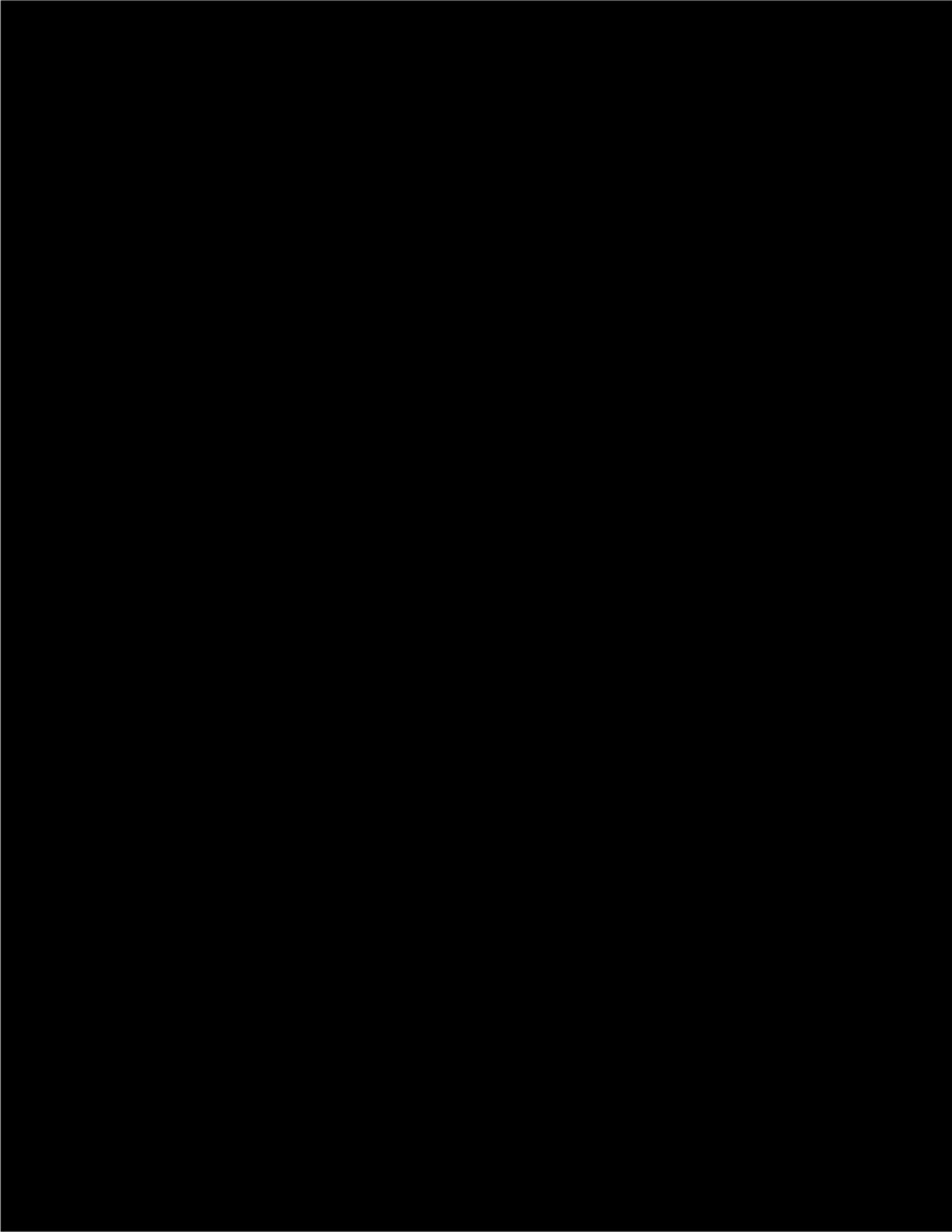
By: /s/ Vincent P. France  
Vincent P. France, Ark. Bar No. 2010063  
Deputy Chief Counsel  
Arkansas DHS  
P.O. Box 1437, Slot S260  
Little Rock, AR 72203  
Phone: (501) 534-4127  
Email: [Vincent.P.France@DHS.Arkansas.gov](mailto:Vincent.P.France@DHS.Arkansas.gov)  
*Attorney for Respondent*

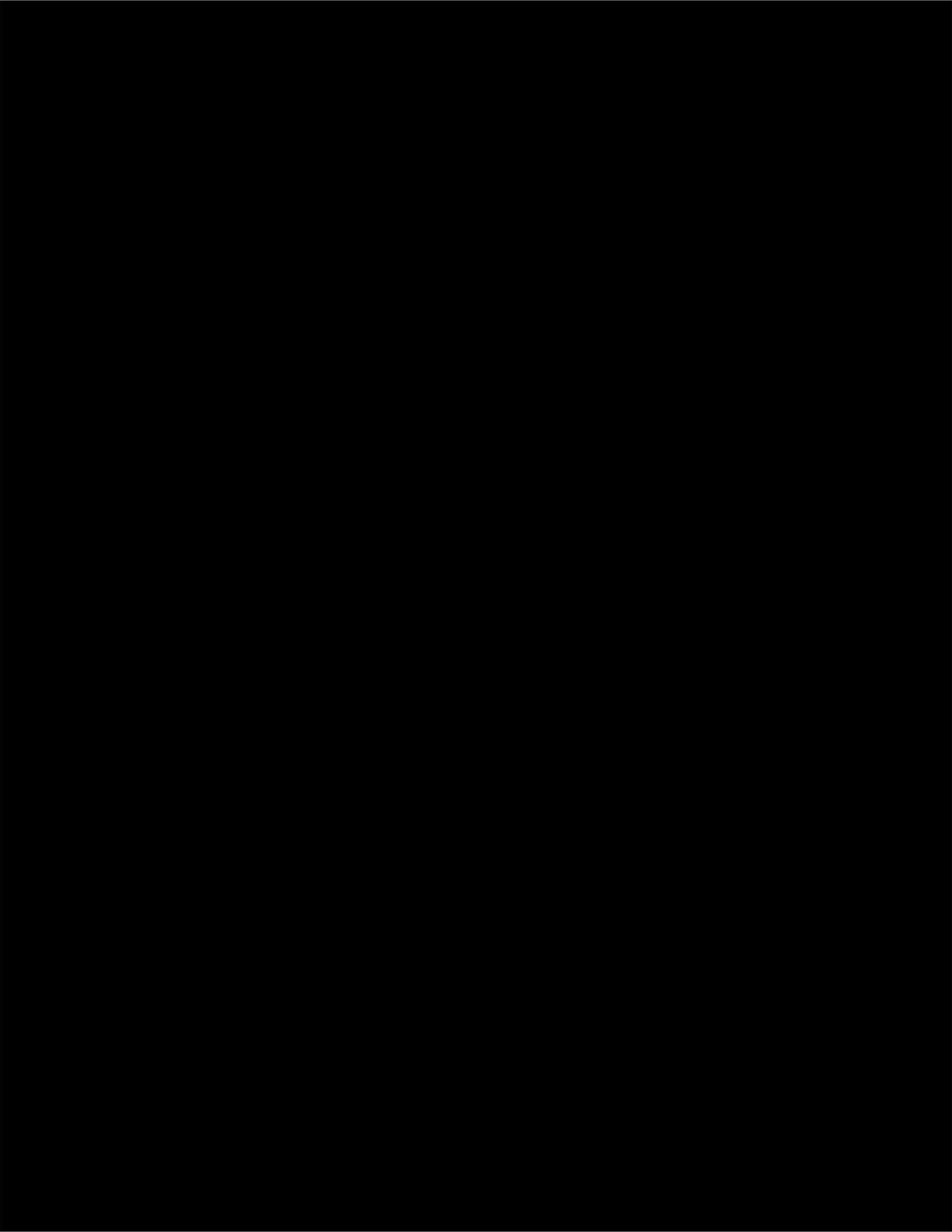
**CERTIFICATE OF SERVICE**

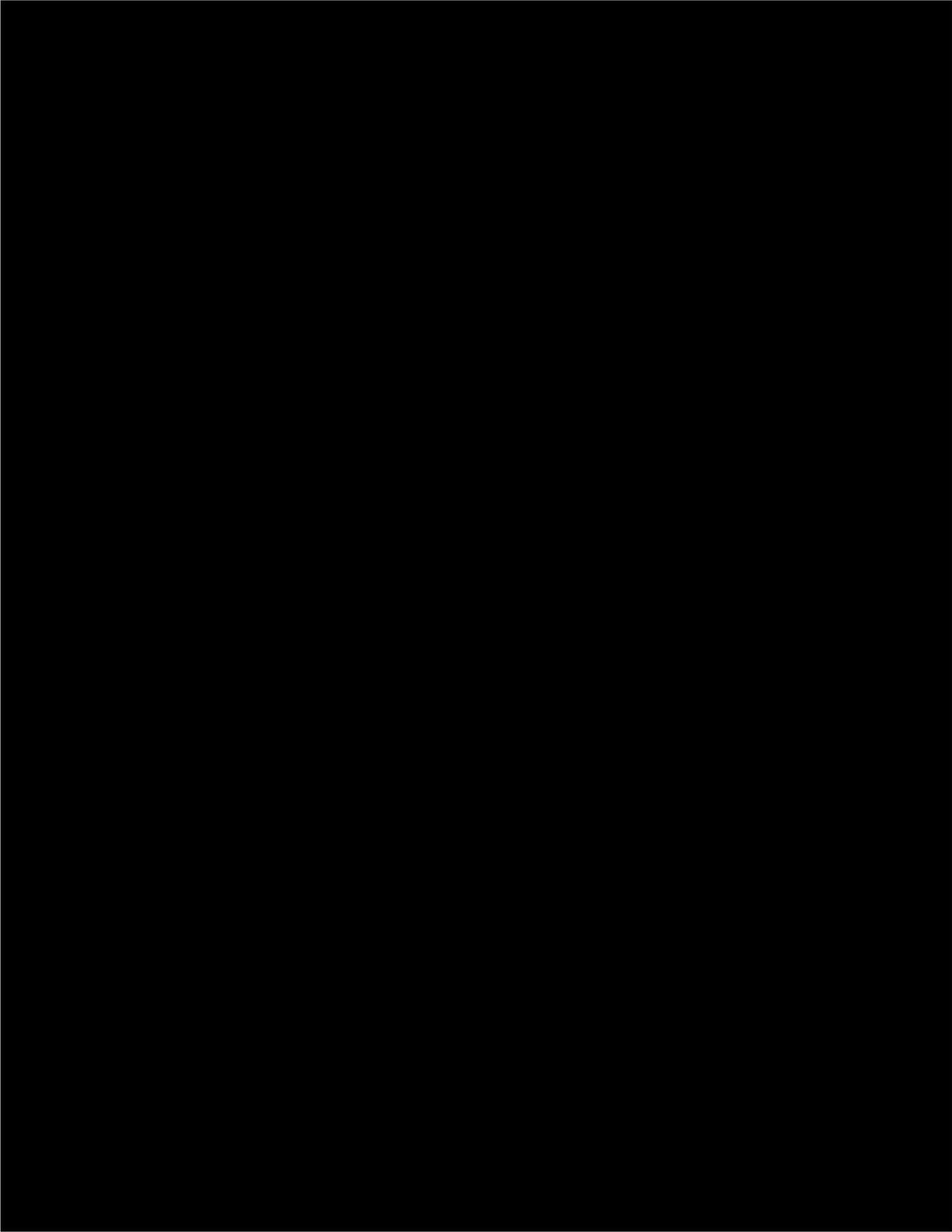
I, Vincent P. France, hereby certify that on February 27, 2026, I electronically filed the foregoing with the Arkansas State Claims Commission by emailing it to [ascpleadings@arkansas.gov](mailto:ascpleadings@arkansas.gov) and by sending a copy to Claimant's attorney Joshua Gillespie via the email indicated below.

Josh Gillespie  
[josh@gillispielawfirm.com](mailto:josh@gillispielawfirm.com)

/s/ Vincent P. France  
Vincent P. France







**BEFORE THE ARKANSAS STATE CLAIMS COMMISSION**

**ANGELA STEPHENS, SPECIAL  
ADMINISTRATOR OF THE  
ESTATE OF ZACHARY MOORE**

**CLAIMANT**

**V.**

**CLAIM NO. 261265**

**ARKANSAS DEPARTMENT OF  
HUMAN SERVICES**

**RESPONDENT**

**ORDER**

Now before the Arkansas State Claims Commission (the "Commission") is the Settlement Agreement (referred herein as the "Agreement") signed by Angela Stephens, Special Administrator of the Estate of Zachary Moore (the "Claimant") and the secretary for the Arkansas Department of Human Services. Based upon a review of the claim file and the Agreement, the Commission hereby APPROVES the Agreement and REFERS the award of \$725,000.00 to the General Assembly for review and placement on an appropriations bill pursuant to Ark. Code Ann. § 25-44-215(b).

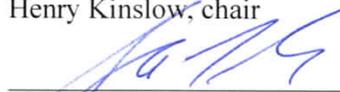
IT IS SO ORDERED.



ARKANSAS STATE CLAIMS COMMISSION  
Dee Holcomb



ARKANSAS STATE CLAIMS COMMISSION  
Henry Kinslow, chair



ARKANSAS STATE CLAIMS COMMISSION  
Sylvester Smith

DATE: February 27, 2026

**Notices which may apply to this claim**

- (1) A party has forty (40) days from transmission of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1). If a Motion for Reconsideration is denied, that party then has twenty (20) days from the transmission of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1)(B)(ii). A decision of the Commission may only be appealed to the General Assembly. Ark. Code Ann. § 25-44-211(a)(3).
- (2) If a Claimant is awarded \$15,000.00 or less by the Commission at hearing, that award is held forty (40) days from the date of disposition before payment will be processed to allow either party to utilize its remedies under Ark. Code Ann. § 25-44-211(a). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.
- (3) Awards or negotiated settlement agreements of more than \$15,000.00 are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 25-44-215(b).