THIS REPORT MAY CONTAIN SENSITIVE INFORMATION

Incident Report

Date: <u>1/25/21</u>	Licensing Specialist: Ezell Breedlove		
CHRIS #:			
Facility Type:	⊠ Residential	Туре:	
	☐ Placement	☐ Private ☐ DCFS Foster Home Nar	me:
	Unlicensed Facility		
Facility Name: Agency Name:	Little Creek Behavioral Health		
Address: County: Phone: License #:	161 Skunk Hallow Rd., Conway, AR 72032 Faulkner (501)585-7698 255		
Owner Name: Address: Phone:	Habilitation Center Inc. 1828 Industrial Drive, Fordyce, AR 71742 (870)352-8203		
Date Licensed:	1/22/20		
Facility Status:	☐ Provisional ☑ Regular ☐ Probationary		
Allegation: Neglec	t 🗌 Abuse 🖂	Sexual Abuse []
Provider Reported	l Incident (PRI): ⊠	Complaint:]
PRI converted to C	complaint: 🗌 Dat	e: 🔲	
Date of Incident:			
nvolved Child/Chil	dren (IC):		DOB/Age: DOB/Age: DOB/Age:

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Involved Staff Member(s) (S-1, S-2):			
DCFS CACD Investigator:			
Brief summary of allegation: <u>LCBH received a verbal tip of a physical abuse on 01.19.21 fo</u> (IC). (S1) stated that she heard spanking noise coming from (IC) room while he and Nurse Anita were in his room. (S1) did not see this allegation just heard spanking noises. When asked for a date or time, (S1) could not give a time or date. When speaking to (IC) about the incident, he signed (S2), shower, and spanked. (IC) is deaf. The DON assessed him.			
The allegation of abuse was called into the child abuse hotline and will not be accepted. reference number: 2071722.			
List all reported injuries to the child: <u>No bruises or injuries reported.</u>			
If no interim corrective action, please explain: <u>S1 shall not be left alone with IC pending the outcome of the licensing investigation.</u>			
Date of most recent monitor visit and deficiencies cited during visit: 12/16/20, 908 ensure meds are logged at the time dispensed. 911.15f, draw strings shall be removed (corrected on site), 914.7 fire drills shall be completed monthly. TA provided for trash.			
Brief summary of monitor visit compliance history: Little Creek was Licensed on 1-22-20			
History of founded licensing and founded maltreatment complaints: <u>No founded licensing</u> complaints			
s there a current corrective action agreement? If yes, list the dates and reason? No			
Final Corrective Action:			
C – Involved Child/Children (include the age or date of birth) R – Reporter S – Involved Staff Member(s) (S-1, S-2, etc.)			