

Division of Child Care & Early Childhood Education P.O. Box 1437, Slot 5150, Little Rock, AR 72203-1437

P: 501.320.3971

Notice of Incident

Date of Incident: 2/19/2021

Date Reported to DCCECE: 2/25/2021

Agency Name: Little Creek Behavioral Health

Agency Number: 255 Type of Facility: PRTF

Facility License Type: Regular

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Type of Incident: Other			
Incident Description: 1C was discovered with a cellu	lar device on 02.19.21,	during the investigation administration	n
were made aware of IS() buying and boxer set.	g the resident under gar	rments. (a) bought the resident a sport	t br
Agency's Interim Corrective Act			
IS(has been terminated from called into the Ark. Child abuse ho		Health as of 02.25.21. The incident worted 2073385.	ra\$
Licensing Specialist Assigned: I Licensing Supervisor Assigned:			
Child Abuse Hotline (Only appli	es to maltreatment inci-	dents)	
Was the Hotline Called: Yes	Was it accepted? No	Outcome: N/A	
Assigned Investigator: N/A			
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Date of DCCECE's Follow-up: 2/26/2021 Type of Follow-up: Email

Details from Follow-up:

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