



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437
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Notice of Incident

Date of Incident: 9/13/2021

Date Reported to DCCECE: 9/14/2021

Agency Name: Piney Ridge Treatment Center

Agency Number: 203

Type of Facility: SRU

Facility License Type: Regular

Type of Incident: Injury

Incident Description: Resident [REDACTED] attempted to do a back flip during recreation and landed on his hand. Nurse noted that the resident's pinky finger was swollen and bruised.

Agency's Interim Corrective Action: Resident was taken for further evaluation at the emergency room.

Licensing Specialist Assigned: C. Vardell

Licensing Supervisor Assigned: S. Singleton-Litzsey

Child Abuse Hotline (Only applies to maltreatment incidents)

Was the Hotline Called:No **Was it accepted?**N/A **Outcome:** N/A

Assigned Investigator: N/A

Date of DCCECE's Follow-up: 9.15.21 **Type of Follow-up:** Email

Details from Follow-up: