

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: 5/24/2022

Date Reported to DCCECE: 5/25/2022

Agency Name: Youth Home Agency Number: 128

Type of Facility: PRTF Facility License Type: Regular

Type of Incident: Emergency Room Visit

Incident Description: Client presented to the nurses station around 1:00 pm and c/o facial pain. Pt reported intermittent pain that began this morning. Upon assessment, moderate left sided facial swelling noted. APRN notified, and an Urgent Care visit was ordered for further evaluation. Client returned from Baptist Health Urgent Care in stable condition. Pt was diagnosed with left sided facial cellulitis. Clindamycin 300 mg PO three times a day for 10 days prescribed. Positive consent from MD and guardian to start medication once received. Warm compress can also be used as needed for pain

and swelling. If problem does not resolve after antibiotic, another visit will need to be scheduled. Will continue to monitor and follow treatment plan.

Agency's Interim Corrective Action: Client sent to Urgent Care.

Licensing Specialist Assigned: C.DeBoer Licensing Supervisor Assigned: 5/24/2022

<u>Child Abuse Hotline</u> (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: 5/27/2022 Type of Follow-up: Email

Details from Follow-up: Patient returned from Baptist Health Urgent Care in stable condition. Pt was diagnosed with left sided facial cellulitis. Clindamycin 300 mg PO three times a

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