



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437
P: 501.320.3971

Notice of Incident

Date of Incident: 6/1/2022
Date Reported to DCCECE: 6/3/2022

Agency Name: Millcreek
Agency Number: 233
Type of Facility: PRTF **Facility License Type:** Regular

Type of Incident: Maltreatment

Incident Description: Av is [redacted] yo [redacted] ([redacted]) who resides at Millcreek. Ao is unknown. Av stated that "they slam me down really hard to the ground" during restraints." Av stated that [redacted] has threatened to "drop" him multiple times, but it is unknown if [redacted] has slammed av on the ground. Av stated he was last slammed down about 3 weeks ago. It is unknown if av has current injuries.

Agency's Interim Corrective Action: Staff unknown. No ICA.

Licensing Specialist Assigned: C. DeBoer
Licensing Supervisor Assigned: 6/1/2022

Child Abuse Hotline (Only applies to maltreatment incidents)

Was the Hotline Called: Yes **Was it accepted?** Yes **Outcome:** Pending

Assigned Investigator: Yes

Date of DCCECE's Follow-up: 6/8/2022 **Type of Follow-up:** Facility visit.

Details from Follow-up: Self-report from facility regarding this incident is as follows: Location: Magnolia Hall - Millcreek of Arkansas

Millcreek of Arkansas received a report from [redacted] stating that [redacted] was the subject of an investigation of physical abuse. The report indicated that he was thrown. The alleged offender was unknown. Upon interview, [redacted] stated that he was not thrown by any staff member and was unaware of any events that could have been related to this

claim.

Facility visited from 9:00AM-11:30AM. Census: 162

█ interviewed whom stated that he didn't know why this report was made. █ was asked if any staff ever hurt him or threatened to hurt him. █ replied no. When asked, █ reported he would tell staff if he felt threatened or was hurt by other staff.



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Agency Name: Millcreek

Agency Number: 233

Type of Facility: PRTF

Facility License Type: Regular

Type of Incident: Maltreatment

Incident Description: Av is [redacted] yo [redacted] (Texas [redacted]) who resides at Millcreek. Ao is unknown. Av stated that "they slam me down really hard to the ground" during restraints." Av stated that "[redacted]" has threatened to "drop" [redacted] multiple times, but it is unknown if [redacted] has slammed av on the ground. Av stated [redacted] was last slammed down about 3 weeks ago. It is unknown if av has current injuries.

Agency's Interim Corrective Action: Staff unknown. No ICA.

Licensing Specialist Assigned: C. DeBoer

Licensing Supervisor Assigned: 6/1/2022

Child Abuse Hotline (Only applies to maltreatment incidents)

Was the Hotline Called: Yes **Was it accepted?** Yes **Outcome:** Unsubstantiated

Assigned Investigator: Yes

Date of DCCECE's Follow-up: 6/8/2022 **Type of Follow-up:** Facility visit.

Details from Follow-up: Self-report from facility regarding this incident is as follows: Location: Magnolia Hall - Millcreek of Arkansas

Millcreek of Arkansas received a report from DHS Investigator Carolyn Gamble stating that [redacted] was the subject of an investigation of physical abuse. The report indicated that [redacted] was thrown. The alleged offender was unknown. Upon interview, [redacted] stated that [redacted] was not thrown by any staff member and was unaware of any events that could have been related to this

claim.

Facility visited from 9:00AM-11:30AM. Census: 162

█ interviewed whom stated that █ didn't know why this report was made. █ was asked if any staff ever hurt █ or threatened to hurt █ █ replied no. When asked, █ reported █ would tell staff if █ felt threatened or was hurt by other staff.