

## **Division of Child Care & Early Childhood Education**

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## **Notice of Serious Incident**

Date of Incident:9/9/2022	
Date Received by DCCECE: 9/9/2022	
Facility Name: Elizabeth Mitchell Centers	
Facility Number: 157	
Facility Type: Residential	
Incident Type: Licensing	
and no swelling or discoloration was noted. having pain in her right foot. Centers medic swelling and some discoloration in the third	bed frame in her room. did not oximately 2200 hours. Centers medical staff oot and reported she had full range of motion On 9/09/2022, told staff she was
evaluation. Once at Ortho Arkansas, determined she had a closed fracture in the advised to take Tylenol\Ibuprofen as neede	right foot was x-rayed, and it was third toe of her right foot. was ad for pain. After her medical treatment,
continue to monitor	s Centers staff. Centers medical staff will s guardian was notified about this nt at Centers. As always, please do not hesitate formation.
Interim Action Narrative:	
Maltreatment Narrative:	Outcome:

Licensing Narrative:	s right foot was x-rayed	, and it was determined she had	
a closed fracture in the third t	toe of her right foot.	was advised to take	
Tylenol\Ibuprofen as needed for pain. After her medical treatment, was			
transported back to EMAC by Centers staff. Centers medical staff will continue to monitor			
	guardian was notified about	this incident.	