

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

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## **Notice of Serious Incident**

Date of Incident:11/10/2022	
Date Received by DCCECE: 11/11/2022	
Facility Name: Elizabeth Mitchell Centers	
Facility Number: 157	
Facility Type: Residential	
Incident Type: Licensing	
Report Description: I wanted to inform you of an incident (Destiny House) on 11/10/2022. On 11/10/2022, at appropriate DOB:  Was in the classroom was in the classroom was lumped to the floor from his chair. Centers medical personal responded to the classroom to evaluate touch, and he would not respond to verbal commands. normal ranges and his pupils were sluggish but reactive. Arkansas Children?s Hospital (ACH) by ambulance for fi medical personnel there conducted several tests, including results were all normal. After his medical evaluation at Action and the back to Destiny House.  By Grand and State of the Centers of the Cente	s skin was warm to the s vitals were within was transported to further evaluation. Once at ACH, and EKG on an EKG on and the CH, Centers staff transported was notified about this incident.
Interim Action Narrative:	
Maltreatment Narrative:	Outcome:

Licensing Narrative: Client transported to ACH for appearing to lose consciousness. No abnormal results from ACH visit. Continue to monitor. Client remains at facility.