



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437
P: 501.682.8590 F: 501.683.6060 TDD: 501.682.1550

Notice of Serious Incident

Date of Incident: 11/15/2022

Date Received by DCCECE: 11/18/2022

Facility Name: Elizabeth Mitchell Centers

Facility Number: 157

Facility Type: Residential

Incident Type: Licensing

Report Description: I wanted to inform you of an incident that occurred at The Centers (EMCC) on 11/15/2022. On 11/15/2022, at approximately 1045 hours, client [REDACTED] ([REDACTED], [REDACTED]) was involved in a verbal argument with a peer when she pushed him to the ground. As a result of that altercation, [REDACTED] became dysregulated and began hitting the back of his head into the wall. Staff intervened and attempted to calm [REDACTED]. In an attempt to keep [REDACTED] safe, he was placed in an Emergency Safety Intervention (ESI). The ESI continued for approximately seventeen minutes and included an emergency injection of Benadryl. At the completion of the ESI, Centers medical personnel immediately assessed [REDACTED]. Centers medical personnel noted several bumps to the back of [REDACTED] head. The APRN was notified about this incident and made the decision to send [REDACTED] to Arkansas Children's Hospital (ACH) for further evaluation. Centers staff transported [REDACTED] to ACH where medical personnel there conducted a CT scan of his head. The CT scan returned normal and did not reveal any complications. [REDACTED] was diagnosed with a [REDACTED] [REDACTED] every six hours as needed for a headache. After [REDACTED] medical evaluation at ACH, he was returned to EMCC at approximately 1800 hours by his guardian. The Centers medical staff has assessed [REDACTED] several times since his injury. [REDACTED] is not currently exhibiting any adverse effects from this incident. He has resumed all his normal activities. [REDACTED]'s guardian was notified about this incident. [REDACTED] is a private placement at The Centers. As always, please do not hesitate to contact me if you need any additional information.

Interim Action Narrative:

Maltreatment Narrative:

Outcome:

Licensing Narrative: On 11/15/22 client [REDACTED] became dysregulated and potentially injured his head by banging his head against the wall. [REDACTED] was taken to ACH and a CT scan did not reveal any complications. [REDACTED] was diagnosed with a [REDACTED] [REDACTED] every six hours as needed for headache. This incident was reported to licensing 11/18/22. Facility cited 110.17.



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521 Visit Compliance Report

Licensee: Elizabeth Mitchell Centers

Facility Number: 157

Licensee Address: 6501 WEST 12TH STREET
LITTLE ROCK AR 72204

Licensing Specialist: Clayton DeBoer

Person In Charge: Eric Knowles

Record Visit Date: 11/21/2022

Home Visit Date: 11/21/2022

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulation Description: The agency shall notify the Licensing Unit by the next business day of serious injuries requiring emergency medical treatment, agency vehicle accidents, arrests, elopements, suicide attempts, or deaths, and maintain documentation of the incident and notification.

Sub Regulation Description:

Regulation Number: 1.110.17

Regulations Needing Technical Assistance:

Regulations Not Correctable:

Narrative:

No site visit conducted today. This is to document citation 110.17. On 11/15/22 client [REDACTED] became dysregulated and potentially injured his head by banging his head against the wall. [REDACTED] was taken to ACH and a CT scan did not reveal any complications. [REDACTED] was diagnosed with a [REDACTED] and ordered to take Tylenol or Ibuprofen every six hours as needed for headache. This incident was reported to licensing 11/18/22.