



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: 12/18/2022

Date Received by DCCECE: 12/19/2022

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 (Destiny House) on 12/18/2022. On 12/18/2022, client [REDACTED] ([REDACTED], DOB: [REDACTED]) became dysregulated and began hitting a metal fire extinguisher cabinet with his fists. [REDACTED] was verbally redirected by staff, and he stopped hitting the metal cabinet. Centers medical staff assessed [REDACTED] and noted he had some slight bruising over the base of his knuckles to his right hand. [REDACTED] complained of pain to his ring and pinky fingers on his right hand. An ice pack was applied to [REDACTED]'s right hand and Ibuprofen was administered. The APRN was contacted and out of an abundance of caution gave an order for [REDACTED] to be transported to Arkansas Children's Hospital (ACH) for further evaluation. Centers staff transported [REDACTED] to ACH. Once at ACH, [REDACTED]'s right hand was x-rayed, and it was determined there were NO fractures present. After [REDACTED]'s medical evaluation at ACH, he was transported back to Destiny House. Centers medical staff will continue to monitor [REDACTED]. [REDACTED]'s guardian was notified about this incident. [REDACTED] is a private placement client at The Centers. As always, please do not hesitate to contact me if you need any additional information.

Interim Action Narrative: Resident was assessed by medical staff. An ice pack was applied to resident's right hand and Ibuprofen was administered. APRN was contacted and ordered for resident to be transported to AR Children's Hospital for further evaluation. An x-ray was completed

Maltreatment Narrative:

Outcome:

Licensing Narrative: Licensing Specialist will follow-up on resident's injury and verify guardianship. 12/21/2022, Licensing Specialist informed that resident is private placement. Resident still has slight bruising noted to the right hand. Licensing Specialist informed resident denies pain and discomfort to his right hand is conducting all normal activities. No licensing concerns noted.



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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: Kendra Rice

Person In Charge: Eric Knowles

Record Visit Date: 12/27/2022

Home Visit Date: 12/27/2022

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulations Not Correctable:

Narrative:

Time of Visit: 2:30 pm to 3:15 pm

Census: 47

Licensing Specialist followed-up with resident regarding his incident on 12/18/2022. It was reported that he became dysregulated and began hitting a metal fire extinguisher cabinet with his fists. Resident sustained some bruising over the base of his knuckles to his right hand.

Resident informed Licensing Specialist that he was “mad.” Resident reported that he did not remember why he was mad. He informed Licensing Specialist that he hit the fire extinguisher cabinet out of anger. Resident showed Licensing Specialist his hand that appeared to be healing well.

Resident informed Licensing Specialist that he could have hit something softer when he was mad so that he would not have hurt his hand.