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Notice of Serious Incident

Date of Incident: 4/6/2023

Date Received by DCCECE: 4/7/2023

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 4/06/2023. On 4/06/2023, client	DOB: 1 bec	ame
dysregulated when another peer was using the ?N? word.	attacked the peer an	ıd
staff immediately separated the two. While staff was separating	and his peer, t	he
peer bit on the left forearm. The Centers? medical team	assessed and	d
noted the skin was broken due to the bite. Out of an abundance o	of caution, wa	as
transported to Arkansas Children?s Hospital (ACH) by Centers? staff for further evaluation.		
Once at ACH, medical personnel there examined the bite and prescribed Augmentin as a		
preventative measure against infection. After his evaluation at AC	CH, was	
transported back to EMCC. suggestion was notified about the second secon	out this incident.	
is a private placement at The Centers. As always, please do not he	esitate to contact me if	you
need any additional information.		

Interim Action Narrative: Residents were separated by staff. Resident was assessed by Center's medical team and transported to ACH for further evaluation. He was prescribed Augmentin and transported back to the facility.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident. 4/10/2023, Licensing Specialist will inquire if a safety plan will be implemented for the residents involved. 4/13/2023, Licensing Specialist followed-up with facility. Residents were placed in separate dorms and there is only one dorm at a time on the playground.