

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

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## **Notice of Serious Incident**

Date of Incident: 4/10/2023
Date Received by DCCECE: 4/11/2023
Facility Name: Elizabeth Mitchell Centers
Facility Number: 157
Facility Type:
Incident Type: Licensing
Report Description: I wanted to inform you of an incident that occurred at The Centers (EMCC) on 4/10/2023. On 4/10/2023, client (DOB: DOB: DOB: DOB: DOB: DOB: DOB: DOB:
Interim Action Narrative: Resident was assessed by Centers' medical personnel and transported to ACH for further evaluation where he was prescribed medication.
Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident. Licensing Specialist inquired about resident's diagnosis and follow-up appointment. 4/12/2023, Licensing Specialist informed resident was diagnosed with nausea and vomiting, unspecified vomiting type. Facility advised if symptoms get worse for resident to follow-up with his AR Children's Hospital PCP.