



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

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### Notice of Serious Incident

Date of Incident: 5/20/2023

Date Received by DCCECE: 5/22/2023

Facility Name: Elizabeth Mitchell Centers

Facility Number: 157

Incident Type: Dual

Report Description: I wanted to inform you of an incident that occurred at The Centers (EMAC) on 5/20/2023. On 5/20/2023, client [REDACTED] told a Centers? nurse that one of her peers grabbed her ([REDACTED]) hand and placed it on the peer?s ?private part.? [REDACTED] said she was in the classroom earlier in the day doing activities when client [REDACTED] grabbed her ([REDACTED]) hand and placed it on [REDACTED]s ?private part.? [REDACTED] said there was no conversation between the two prior to [REDACTED]s actions. Both [REDACTED] and [REDACTED] were fully clothed when the alleged incident occurred. [REDACTED] reported that staff was present but did not see the alleged incident take place. This incident was reported to the [REDACTED], and the reported allegation was accepted (Referral [REDACTED]). The guardians for [REDACTED] and [REDACTED] were notified about this incident. [REDACTED] is a private placement at The Centers. [REDACTED] is a DCFS placement at The Centers. [REDACTED] was placed on sexual precautions due to this incident. [REDACTED] and [REDACTED] will not be allowed in the same dorm or classroom for the foreseeable future. As always, please do not hesitate to contact me if you need any additional information.

Interim Action Narrative: [REDACTED] was called and call accepted. The alleged AV was placed on sexual precautions. Residents will not be allowed in the same dorm or classroom.

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Maltreatment Narrative: Client ██████████ told a Centers? nurse that one of her peers grabbed her (██████) hand and placed it on the peer's ?private part.? ██████████ said she was in the classroom earlier in the day doing activities when client ██████████ grabbed her (██████) hand and placed it on ██████████'s ?private part.? ██████████ said there was no conversation between the two prior to ██████████'s actions. Both ██████████ and ██████████ were fully clothed when the alleged incident occurred. ██████████ reported that staff was present but did not see the alleged incident take place.

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Licensing Narrative: 5/26/2023, Licensing provided with documentation for sexual acting out precautions and line of sight protocol. 5/31/2023, Licensing Specialist followed-up with facility. 6/1/2023, Licensing Specialist informed no witness statements were taken and nurse's note would be provided. Nursing notes received. 6/9/2023, Licensing Specialist informed by Program Coordinator case is still pending. 6/23/2023, Licensing Specialist emailed Investigator Johnson for an update. Licensing Specialist informed referral/case is still pending. 7/3/2023, Licensing Specialist emailed Program Coordinator for an update. 7/5/2023, Licensing Specialist informed case found unsubstantiated.



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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:** 7/6/2023

**Home Visit Date:** 7/6/2023

**Purpose of Visit:** Complaint Visit

**Regulations Out of Compliance:**

**Regulations Needing Technical Assistance:**

**Regulation Not Applicable:**

**Regulations Not Correctable:**

**Narrative:**

No in-person licensing visit completed on 7/6/2023.

Licensing received a complaint on 5/20/2023.

Licensing complaint regarding ELS Case #014543 has been closed as UNFOUNDED.

**Provider Comments:**

CCL Staff Signature :

Date: 7/31/2023



Provider Signature :

Date: 7/31/2023