

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: 5/22/2023

Date Received by DCCECE: 5/23/2023

Facility Name: Elizabeth Mitchell Centers

Facility Number: 157

Facility Type:

Incident Type: Licensing

Report Description: I wanted to	o inform you of an i	ncident that occurred	l at The Centers
(EMAC). On 5/22/2023, client			became
dysregulated, which resulted in	staff having to place	ce her in several Eme	rgency Safety
Interventions (ESI) to keep her	and others safe.	is appro	ximately ten weeks
pregnant. Due to	high risk behav	iors, the medical tean	n made the decision
to send her to Arkansas Childre	en?s Hospital (ACH	() for further evaluation	on. MEMS was
called to transport	to ACH. When M	MEMS contacted ACI	H to give them a
radio report of	transport, ACH de	nied	transport to their
ER. MEMS then transported	to the	UAMS Medical Cent	ter. Once at UAMS,
was observed ar	d evaluated for sev	eral hours by medical	personnel.
was determined to b	e stable by UAMS r	nedical personnel and	d was transported
back to EMAC.	guardian was not	ified about this incid	ent. is
a DCFS placement at The Cent	ers.	did not sustain any in	njuries because of
this incident. Centers? medical	personnel will cont	inue to monitor	. As
always, please do not hesitate t	o contact me if you	need any additional i	nformation.

Interim Action Narrative: Resident was placed in several safety interventions. She was transported to UAMS by MEMS to be evaluated due to her high risk behaviors and returned to the facility.

M	[a]	ltreatment	Narrative:
---	-----	------------	------------

Licensing Narrative: Licensing Specialist reviewed provider reported incident. No licensing concerns noted.