



Placement and Residential Licensing Unit  
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

Case Number: 023851

Date of Incident: 9/8/2024

Date Received: 9/9/2024

Facility Name: Millcreek of Arkansas PRTF

Facility Number: 233

Incident Type: Dual

Report Description: [REDACTED] stated that during the restraint he bit staff [REDACTED] and the staff hit him in the face. Staff placed on administrative leave pending investigation. Allegation reported to [REDACTED]  
[REDACTED]

Interim Action Narrative: A/O [REDACTED] placed on leave pending investigation.

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Maltreatment Narrative: [REDACTED]  
[REDACTED] was having behaviors and was placed into a restraint. During restraint [REDACTED] bit a staff member. During assessment after restraint [REDACTED] reported that staff member [REDACTED] hit him in the face after he bit him.

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Licensing Narrative: 9/9/24-Permission granted via phone call by [REDACTED] for licensing to contact facility and/or A/V. Per phone call with Emily Burris of Millcreek there is video of this incident. Visit scheduled for 9/9/24. 9/9/24-Facility visited and video reviewed of the incident. No citations. 11/21/24-Received notification that maltreatment investigation was unfounded. 521 issued including that staff [REDACTED] will be retrained on TCI. 11/25/2024, reviewed and approved by Program Coordinator, Case complete.



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

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## 521 Visit Compliance Report

**Licensee:** Millcreek of Arkansas PRTF

**Facility Number:** 233

**Licensee Address:** 1828 INDUSTRIAL DR  
FORDYCE AR 71742-7110

**Licensing Specialist:** Clayton DeBoer

**Person In Charge:** Emerald Burris

**Record Visit Date:** 9/9/2024

**Home Visit Date:** 9/9/2024

**Purpose of Visit:** Complaint Visit

**Regulations Out of Compliance:**

**Regulations Needing Technical Assistance:**

**Regulation Not Applicable:**

**Regulations Not Correctable:**

**Narrative:**

Facility visited in response to complaint that staff [REDACTED] hit client [REDACTED] during a restraint. Video reviewed of the incident. Initially staff/client ratio: 3:15. [REDACTED] is seen throwing a paper cup of water on the ground

toward a staff ( [REDACTED] [REDACTED] ) then initiates a restraint and is immediately assisted by two additional staff. A few minutes later a supervisor is seen entering and witnessing restraint in its entirety. A few minutes after supervisor entered a nurse is seen entering and witnessing restraint. The nurse is seen evaluating [REDACTED] after restraint. Nursing note reviewed which does indicate a red cheek and abrasion to bottom lip. At no time during video reviewed was any staff seen hitting [REDACTED]. Nothing can be definitively seen in restraint video that would result in [REDACTED] getting marks to his face. At no time did any staff participating in the restraint appear to react to [REDACTED] biting them. [REDACTED] had reportedly been in a fight prior to restraint. Video backed up and reviewed. 5 minutes prior to restraint 3 clients can be seen attacking [REDACTED]. Fight video showed possibility of actions that would result in [REDACTED] getting marks to his face. Staff immediately intervene and separate clients. Licensing is not prepared to make a finding at this time. Staff [REDACTED] has been placed on administrative leave pending investigation.

**Provider Comments:**

CCL Staff Signature :

Date: 9/9/2024



Provider Signature :

Date: 9/9/2024





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FORDYCE AR 71742-7110

**Licensing Specialist:** Clayton DeBoer

**Person In Charge:** Emerald Burris

**Record Visit Date:** 11/21/2024

**Home Visit Date:** 11/21/2024

**Purpose of Visit:** Revisit Complaint

**Regulations Out of Compliance:**

**Regulations Needing Technical Assistance:**

**Regulation Not Applicable:**

**Regulations Not Correctable:**

**Narrative:**

This is to document that case#023851 has been investigated and determined to be unfounded. As a precautionary measure, staff [REDACTED] will be retrained on TCI. Training completion will be provided to licensing.

**Provider Comments:**

CCL Staff Signature :

Date: 11/21/2024



Provider Signature :

Date: 11/21/2024

