

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

Notice of Serious Incident

Case Number: 024382

Date of Incident: 9/29/2024

Date Received: 9/30/2024

Facility Name: Elizabeth Mitchell Centers

Facility Number: 157

Incident Type: Licensing

Report Description: On 9/29/2024, client PRTF) was transported to Arkansas Children's Hospital for further evaluation of her blood sugar level/diabetes. Centers? staff transported the client to ACH. Client was diagnosed with and recommendations were made for changing her After her evaluation, the client was transported back to EMCC. Centers? medical personnel will continue to monitor the client. The client is a transmet at The Centers and the guardian was notified. As always, please do not hesitate to contact me if you need any additional information.

Interim Action Narrative: Resident was evaluated at ACH.

Maltreatment Narrative:

Licensing Narrative: Licensing reviewed provider reported incident for licensing concerns. Facility provided documentation for this incident.