



**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:** 028120

**Date of Incident:** 3/7/2025

**Date Received:** 3/10/2025

**Facility Name:** Millcreek of Arkansas PRTF

**Facility Number:** 233

**Incident Type:** Licensing

**Report Description:** [REDACTED] ) was sent to [REDACTED] for assessment following an injury sustained when another patient threw a dustpan. The nursing department assessed him and referred him out for further treatment. The patient was [REDACTED] [REDACTED] He was released to return to the facility without restrictions.

**Interim Action Narrative:** Client treated at hospital.

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[REDACTED] **Narrative:**

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**Licensing Narrative:** 3/10/25-Reviewed for licensing concerns.