



**Placement and Residential Licensing Unit**

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**Notice of Serious Incident**

**Case Number:** 029096

**Date of Incident:** 4/17/2025

**Date Received:** 4/18/2025

**Facility Name:** Elizabeth Mitchell Centers

**Facility Number:** 157

**Incident Type:** Licensing

**Report Description:** On 4/17/2025 Client [REDACTED] Dob: [REDACTED], PRTF) was in a physical altercation with another client. Staff separated clients and [REDACTED] was able to be verbally de-escalated. During initial nurse assessment, client had redness to her right knuckles, full range of motion and reported slight pain. At approximately 1443, client reported an increase in pain to the right wrist and knuckles with swelling. She also reported a previous break in this arm. A mobile X-ray was ordered, and X-ray findings show an [REDACTED] [REDACTED]. Client will follow up with [REDACTED] on 4/18/2025 for further evaluation. Client is a private placement and guardian has been notified.

**Interim Action Narrative:** Resident was assessed by the nurse and x-ray completed.

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[REDACTED] **Narrative:**

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**Licensing Narrative:** Licensing reviewed provider reported incident for licensing concerns. Facility provided documentation for this provider reported incident. Licensing inquired about injury and documentation from [REDACTED]. Facility reported the resident injured her and when she hit the peer. [REDACTED] documentation will be provided once received.