

## 521 Visit Compliance Report

**Licensee:** Perimeter Behavioral of Forrest City  
**Licensee Address:** 603 KITTLE ROAD FORREST CITY, AR 72335  
**Licensing Specialist:** Chelsea Vardell **Person In Charge:** Charlotte Lockhart  
**Monitor Visit Date:** 8/31/2021  
**Purpose of Visit:** Residential Non-Standard Review

**Regulations Out of Compliance:**

No regulations out of compliance.

**Regulations Needing Technical Assistance:**

Regulation	Discussion/Observation
R902.10	Resident [REDACTED] in the PRTF program did not have information documented as received upon admission including a description of why he was being admitted, known medical history/current health issues, a list of current medications, or the residents current behavioral/emotional condition. Documentation of all required information, per the Minimum Licensing Standards, needed at the time of admission was provided to Charlotte Lockhart.
R1002.13	Resident [REDACTED] in the SRU program did not have information documented as received upon admission including time of admission, description of why he was being admitted, and his current behavior/emotional condition. Documentation of all required information, per the Minimum Licensing Standards, needed at the time of admission was provided to Charlotte Lockhart.

**Regulations Not Correctable:**

Regulation	Discussion/Observation
R1003.11.d	Resident [REDACTED] currently in the SRU program was placed at the agency currently on medications. Resident continued on medications, but they were not listed on the treatment plan. Please ensure a plan is listed on the treatment plan showing how the resident will continue medication management.
R1008.4.d	MAR's reports viewed in the chart of [REDACTED] (SRU) showed days in which medications were not initialed as administered by the nurse. Additionally, no note was made on why the resident did not receive the medication during that time or if it was a failure to document the administration of the medication. After review of the MAR's at Station 1 at the facility it was noted that SRU patient [REDACTED] did not have his medication [REDACTED] documented as administered on 8/12/21 at 2000 or on 8/13/21 at 800 or 1400. Resident [REDACTED] of the SRU had no documentation that he received medication [REDACTED] on 8/9/21 at 7am.

**Arkansas Department of Human Services  
Division of Child Care and Early Childhood Education**

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R908.9.d	MARs reports in the chart of resident [REDACTED] of the PRTF program showed days in which medications were not initialed as administered by the nurse. Additionally, no note was made on why the resident did not receive the medication during that time or if it was a failure to document the administration of the medication. After review of the MAR's at Station 1 at the facility it was noted that PRTF resident [REDACTED] had no documentation that medication [REDACTED] was given to him on 8/9/21 or 8/11/21 at 8am.
R1005.7	<p>There was no documentation of the following restraints performed on resident [REDACTED] (SRU).</p> <ul style="list-style-type: none"><li>*Physical Restraint ordered by physician on 7/10/21</li><li>*Physical Restraint ordered by physician on 7/11/21</li><li>*Physical restraint ordered by physician on 7/20/21 @1539</li><li>*Physical restraint ordered by physician on 7/20/21 @ 0925</li><li>*Physical restraint ordered by physician on 7/20/21 @0808</li><li>*Chemical restraint ordered by physician on 7/20/21@1539</li><li>*Chemical restraint ordered by physician on 8/27/21</li></ul> <p>Additionally, there was no physician order in the chart for the documented chemical restraint used on resident [REDACTED] (SRU) on [REDACTED]/21.</p> <p>CEO Charlotte Lockhart reports that the restraint justification packets can not be located at this time. It is unknown at this time if this was a failure to document or if the packets have been misplaced as the Quality Risk Director and Director of Nursing previously employed are no longer here. The replacement staff for Quality Risk Director and Director of Nursing is due to begin work on 9/7/21.</p>

**Narrative:**

Licensing Specialist visited the facility from 11:50-18:00

Licensing Specialist completed a record check on two residents including [REDACTED] (DOB [REDACTED]) (PRTF) and [REDACTED] (DOB [REDACTED]) (SRU). Licensing Specialist also went to station 1 and conducted a review of the MAR's reports for residents [REDACTED] and [REDACTED].

Licensing Specialist discussed the progress being made by the facility on the Corrective Action Agreement with Licensing. The facility reports that they have now trained all required staff on both SAMA and Intent Training. Charlotte Lockhart provided the Specialist with a print out of all current employees to ensure we have received notification that every employee has now been trained.