

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

P.O. Box 1437, Slot S150, Little Rock, AR 72203-1437

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## Notice of Incident

**Date of Incident**: 10/26/2021

Date Reported to DCCECE: 10/27/2021

Agency Name: Perimeter Behavioral of Forrest City

Agency Number: 142

Type of Facility: PRTF Facility License Type: Regular

Type of Incident: ER Visit

Incident Description: Resident began complaining of lower, middle abdomen pain. Resident

reported pain when urinating.

Agency's Interim Corrective Action: Resident was taken to the emergency room by staff for

further evaluation.

Licensing Specialist Assigned: C. Vardell Licensing Supervisor Assigned: A. Clowers

<u>Child Abuse Hotline</u> (Only applies to maltreatment incidents)

Was the Hotline Called: No Was it accepted? N/A Outcome: N/A

Assigned Investigator: N/A

Date of DCCECE's Follow-up: N/A

Type of Follow-up: N/A

**Details from Follow-up:**