

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: 11/6/2021

Date Reported to DCCECE: 11/8/2021

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 _____. was in an altercation with several peers when he sustained injuries to his face. He refused to allow nurses to assess him so he was taken to the emergency room for further evaluations.

Agency's Interim Corrective Action: Resident was taken to the emergency room for further evaluation.

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

Child Abuse Hotline (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: 11/9/2021 Type of Follow-up: Email

Details from Follow-up: Licensing Specialist emailed PaSonna Hope to find out what the ratio was at the time of the incident, how many residents were involved in this altercation, and if camera footage has been reviewed. PaSonna emailed back stating that the staff/child ratio was 3:14 and five residents were involved in the altercation. Camera footage was reviewed by management and it was determined that staff did respond quickly and appropriately.