



Division of Child Care & Early Childhood Education
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Notice of Serious Incident

Date of Incident:9/4/2022

Date Received by DCCECE: 9/6/2022

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Facility Type: Residential

Incident Type: Licensing

Report Description: Residents Name/DOB: [REDACTED] **Date/Time of incident:**9/4/2022 7:21pm **Please give a description of the incident:** Per staff report the resident complained of sore throat with white patches on RT tonsil. Resident was assessed by APRN and referred out to FCMC. Resident was diagnosed with Acute upper respiratory infection; unspecified. **Actions Taken:** Resident was isolated from other residents for at least 24 hours. Nursing will continue to monitor symptoms while in the milieu and school. **Guardianship status:** Parental, AR

Interim Action Narrative:

Maltreatment Narrative:

Outcome:

Licensing Narrative: No licensing concerns noted.