



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

Date of Incident: 9/30/2022

Date Received by DCCECE: 10/1/2022

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: 9/30/2022 9:30am Please give a description of the incident: Per staff report; the resident complained of fever, cough, and sore throat. Resident was assessed by APRN and referred to FCMC for further evaluation. Actions Taken: Resident was assessed by APRN and referred to FCMC for further evaluation. The resident was diagnosed with streptococcal pharyngitis. The resident will remain in isolation for the next 24 hours to prevent widespread throughout the facility. Nursing will continue to monitor the residents' progress through the milieu and school before and after isolation. Guardianship: SD Foster Care

Interim Action Narrative:

Maltreatment Narrative:

Outcome:

Licensing Narrative: No licensing concerns noted.