



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

**Date of Incident:**10/10/2022

**Date Received by DCCECE:** 10/17/2022

**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:** 10.10.22 2:10pm **Please give a description of the incident:** Per staff report upon admission the resident had a temperature of 102.7 **Actions Taken:** Resident was referred to FCMC for further evaluation. The resident was diagnosed with: Encounter screening, unspecified. The resident was isolated for 24 hours and monitored by nursing in the milieu and school. **Guardianship:** Foster Care Placement

**Interim Action Narrative:** Resident was evaluated at FCMC. **Diagnosis:** encounter screening, unspecified. He was isolated for 24 hours and monitored by nursing.

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**Maltreatment Narrative:**

**Outcome:**

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**Licensing Narrative:** Licensing Specialist will follow-up with facility. No licensing concerns noted.