



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

Date of Incident: 1/16/2023

Date Received by DCCECE: 1/17/2023

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: 1/16/2023 12:54pm Please describe the incident: Per the staff report, the resident complained of pain in his Rt ankle from playing basketball Actions Taken: Resident was assessed by nursing. The APRN was contacted and requested the resident be sent out to FCMC for further evaluation. The resident was diagnosed with the following: [REDACTED] [REDACTED] The ankle mortis is intact. Soft tissues are grossly unremarkable. Nursing will continue to monitor the residents' progress in the milieu and school. Guardianship: TX Foster Care

Interim Action Narrative: Resident was assessed by nursing and had further evaluation at FCMC.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident. No licensing concerns noted.