



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

Date of Incident: 1/26/2023

Date Received by DCCECE: 1/27/2023

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: 1/24/2023 unknown/Reported 1/26/2023 5:00pm Please describe the incident: Per the staff report, the resident complained of pain and swelling in his Rt thumb due to playing basketball in the gym. The residents had a 5 on 5 basketball tournament competing for a residential hall party. 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]. The proximal and distal carpal rows are adequately aligned. The soft tissues are grossly remarkable. Nursing will continue to monitor the residents' progress while in school and on the milieu. Guardianship: Private Placement

Interim Action Narrative: Resident was assessed by nursing and the APRN was contacted. APRN ordered for resident to be further evaluated at FCMC.

Maltreatment Narrative:

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