



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

Date of Incident: 2/19/2023

Date Received by DCCECE: 2/20/2023

Facility Name: Perimeter of the Ozarks

Facility Number: 237

Facility Type: Residential

Incident Type: Licensing

Report Description: Name: [REDACTED], DOB: [REDACTED], Guardian: [REDACTED] - notified o Incident: On 02/19/23 @ approximately 1900 [REDACTED] was at the nursing station sitting while phone call time was occurring. Per staff she bit her hand x 1. RN assessed [REDACTED] and no skin was broken and no bleeding occurred. [REDACTED] processed with this RN and was given PM medications. She returned to unit without further incident. Self-harm precautions-initiated x 7 days.

Interim Action Narrative:

Maltreatment Narrative:

Licensing Narrative:Licensing specialist completed an unannounced licensing visit to facility today. Verified that there is documentation of a current self-harm safety plan for this resident. Resident was in the classroom within LOS of staff at time of visit. No additional licensing follow up is required at this time.