



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

Date of Incident: 3/3/2023

Date Received by DCCECE: 3/6/2023

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: 3/3/2023/ 11:50am Please describe the incident: Per staff report the resident was brought to the nurse's station complaining of a hurt Rt hand 5th digit. The resident stated he jammed his finger playing basketball. Actions Taken: The resident was assessed by nursing and APRN. During assessment the resident was referred to FCMC for further evaluation due to a possible adverse medication reaction. The resident returned from FCMC with the diagnosis of: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]. Nursing will continue to monitor the residents' progress while in school and the milieu. Guardianship: Private Placement

Interim Action Narrative:

Maltreatment Narrative:

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