



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/ 7:25am Please describe the incident: Per staff report the resident was brought to the nurse's station complaining of feeling dizziness, feeling fuzzy, and being sleepy. 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] The resident's medication was discontinued by the psychiatrist 3.3.23 The resident did not return with new orders or prescriptions. 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.