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Notice of Serious Incident

Date of Incident: 12/30/2022

Date Received by DCCECE: 1/3/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Facility Type: Residential

Incident Type: Licensing

Report Description: Residents Name/DOB: Date/Time of incident: 12/30/2022 12:30pm Please describe the incident: Per staff report, the resident was playing basketball in the gym and hurt his Rt ankle. The resident complained of pain and swelling. Actions Taken: The nurse evaluated the resident. The resident was sent out to FCMC for further evaluation; he was diagnosed with the following: Nursing and staff will continue to monitor the residents' progress while in the milieu. Guardianship: Private Placement

Interim Action Narrative: Resident was assessed by the nurse and further evaluation at FCMC. Diagnosis:

Maltreatment Narrative:

Outcome:

Licensing Narrative: Resident was assessed by the nurse and evaluated further at FCMC. Diagnosis: . No licensing concerns noted.

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