



Division of Child Care & Early Childhood Education
P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437
P: 501.682.8590 F: 501.683.6060 TDD: 501.682.1550

Notice of Serious Incident

Date of Incident: 4/12/2023

Date Received by DCCECE: 4/13/2023

Facility Name: Perimeter of the Ozarks

Facility Number: 237

Facility Type:

Incident Type: Licensing

Report Description: Name: [REDACTED] DOB: [REDACTED], Notified: Guardian, APRN, DON, CEO On 4/12/23, it was reported to RN by therapist that resident self-reported that she had been hoarding her medication in a cup in her bedroom and took them all together the previous night. Upon assessment of resident by RN, there were no deviations from baseline as far as mental, cognitive or physical functionality. Residents room was searched, no contraband found. No camera footage available upon preview. In order to prevent recurrence, resident will be required not to be wearing long sleeves during medication passes. Since her current medications cannot be crushed (per APRN), thorough mouth checks will be conducted after each medication pass. Per APRN, restrict bathroom for one hour after all med pass throughout the day/night. If resident must go to the bathroom within that hour, 2 staff must be present for constant line of sight. Therapist preformed C-SSRS, scoring resident high risk. As a result, resident was placed on a suicide precaution safety plan with constant line of sight until further determination by therapist.

Interim Action Narrative: Resident was assessed by the nurse. Her room was searched for contraband. Resident will be required not to wear long sleeves during medication passes. Thorough moth checks will be conducted after each medication pass. Restrict bathroom for one hour after

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident. Licensing Specialist will follow-up with facility on resident's guardianship. Resident is private placement. Licensing Specialist informed that all residents will be cheek checked during medication passes. Facility visited 4/24/23 in response to self-report that a client reported hoarding medication for the purpose of self-harm. Facility policy reviewed which states: A thorough mouth check is performed at the time of administration to assure that the resident swallowed the medication. DON Sarah Kroon consulted whom stated that clients are advised to open their mouth and lift up their tongue after taking medication.



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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks

Facility Number: 237

Licensee Address: 2466 SOUTH 48TH STREET
SPRINGDALE AR 72766

Licensing Specialist: Clayton DeBoer

Person In Charge: Sarah Kroon

Record Visit Date: 4/24/2023

Home Visit Date: 4/24/2023

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Facility visited in response to self-report that a client reported hoarding medication for the purpose of self-harm.

Facility policy reviewed which states: A thorough mouth check is performed at the time of administration to assure that the resident swallowed the medication. DON Sarah Kroon consulted whom stated that clients are advised to open their mouth and lift up their tongue after taking medication.

Provider Comments:

CCL Staff Signature :

Date: 7/31/2023



Provider Signature :

Date: 7/31/2023

