



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: 7/18/2023

Date Received by DCCECE: Perimeter Behavioral of Forrest City

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Dual

Report Description: Upon further video review of incident previously reported on 7/19, it was noted that client and staff were involved in a verbal altercation that turned physical.

Action taken: Written statements were obtained from staff. [REDACTED]

[REDACTED]. Staff termination pending (he has been removed from the schedule) Clinical Director to retrain 3-11 staff on verbal de-escalation/TBRI Life Value Terms. Texas Caseworker ([REDACTED]) notified. Guardianship: Texas, CPS

Interim Action Narrative: Written statements were taken [REDACTED]. Staff member involved has been removed from the schedule pending the outcome of the investigation. Clinical Director will retrain 3pm to 11pm staff on verbal de-escalation.

Maltreatment Narrative: Reported again on 7/27/2023, call accepted. Referral # [REDACTED]

Licensing Narrative: Licensing Specialist reviewed complaint for licensing concerns. Licensing Specialist will inquire about camera footage. 7/20/2023, Licensing Specialist informed that camera footage is available. Licensing Specialist will inquire if [REDACTED] was accepted and the name of the staff member involved. 7/21/2023- Program Coordinator emailed the facility to determine the status of the staff and gather further information

regarding the altercation that took place between the resident and staff. Licensing Specialist will schedule day and time to review camera footage. Licensing Specialist informed that Mr. Jackson (clinical director) will begin the training for the 3-11 shift on Wednesday, July 26, 2023 and will run the training until Wednesday, August 4, 2023. 7/26/2023, Licensing Specialist reviewed camera footage. 7/27/2023, Licensing Specialist inquired about [REDACTED] notification. Licensing Specialist informed that Clinical Director called the incident in to the [REDACTED] Licensing Specialist reported incident to [REDACTED] [REDACTED] Licensing Specialist informed because of new system a referral number would be emailed. [REDACTED] call accepted, referral number emailed # [REDACTED] 8/8/2023, Licensing Specialist received training roster. 9/1/2023, Licensing Specialist inquired about assigned investigator. Licensing informed that staff ([REDACTED]) is no longer employed with the facility. 9/5/2023, Licensing Specialist informed of investigator and true finding.



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521 Visit Compliance Report

Licensee: Perimeter Behavioral of Forrest City

Facility Number: 142

Licensee Address: 603 KITTLE ROAD
FORREST CITY AR 72335

Licensing Specialist: Kendra Rice

Person In Charge: Charlotte Lockhart

Record Visit Date: 7/26/2023

Home Visit Date: 7/26/2023

Purpose of Visit: Complaint Visit

Regulations Out of Compliance:

Regulation Number: 9. 905. 4 .g

Regulation Description: The following actions shall not be used, including as discipline:

Findings Description: Staff was observed charging toward resident that could have caused bodily harm.

Action Due Date: 7/19/2023

Action Due Description: Staff was terminated.

Comply Date:

Sub Regulation Description:

Regulation Number: 1. 109. 1 .g

Regulation Description: Unprofessional conduct in the practice of child welfare activities shall include, but not limited to the following:

Findings Description: Staff member's actions toward resident was unprofessional.

Action Due Date: 7/19/2023

Action Due Description: Staff member was terminated.

Comply Date:

Sub Regulation Description:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Time of visit: 10:00 am to 11:00 am

Census: 59

AMENDED 7/27/2023

Licensing received a complaint on 7/18/2023 for ELS Case #015170.

Licensing Specialist reviewed camera footage for reported complaint on 7/18/2023 for ELS Case #05170. The incident took place on the 300 Hall.

Licensing Specialist observed five (5) staff members in the hallway of the 300 Hall. Ratio 5:1, due to resident also being in the hallway near the entrance doorway.

Licensing Specialist later observed staff and resident by 300 Hall door, ratio 2:1. It appeared that staff were holding the resident back. Licensing Specialist observed resident break away from staff and head toward the Program Manager's office. Licensing Specialist observed staff block resident from entering the Program Manager's office.

While staff had resident against the wall, Licensing Specialist observed what appeared to be a male staff member charge toward the resident and proceeded to swing at him. Staff was observed trying to separate the resident and the male staff member.

Facility will be cited for R905.4.g, the actions of the male staff member toward the resident could have caused physical injury or threat of bodily harm.

AMENDMENT: Facility will be cited for R109.1.g, the actions of the male staff member toward the resident was unprofessional.

Licensing Specialist was informed that male staff member has been terminated. Licensing Specialist observed documentation (Corrective Action Form) where staff was terminated. Other staff involved will be retrained on mandated reporting, verbal de-escalation/TBRI Life Value Terms.

Provider Comments:

CCL Staff Signature :

Date: 8/18/2023



Provider Signature :

Date: 8/18/2023





**ARKANSAS
DEPARTMENT OF
HUMAN
SERVICES**

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Perimeter Behavioral of Forrest City
603 KITTLE ROAD
FORREST CITY AR 72335

Kendra Rice
Donaghey Plaza
P.O. Box 1437
Little Rock, AR. 72203

Facility Visit Compliance Notice

Facility#: 142

Date of Visit: 9/25/2023

Visit Type(s): Revisit Complaint

Time: 12:15 AM - 0:36 AM

Visit Comment :

No in-person licensing visit completed on 9/25/2023.

Licensing Specialist received a complaint on 7/19/2023 for ELS Case [REDACTED].

This complaint has been **FOUNDED** by licensing. The facility was cited for R905.4.g and R109.1.g on 7/26/2023 for this complaint.

CCL Staff Signature :

Date: 9/25/2023

Provider Signature :

Date: 9/25/2023

Your Signature indicates that this form has been reviewed with you; it does not imply your agreement with it.

Right to Appeal: For more information on how to appeal these findings, refer to the minimum Licensing Requirements or contact your Licensing Specialist.