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Notice of Serious Incident

Date of Incident: 8/1/2023

Date Received by DCCECE: 8/2/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Date and time of Incident: 8/1/23 (a) 1800 PM Resident presented to nurses' station complaining that he found a swollen area on the left side of his neck and that his throat felt a little sore earlier. Actions Taken: APRN notified, and an order was obtained to send to FCMC for further evaluation and treatment. Results: Enlarged Lymph node (lymphadenopathy). Proper notifications were made. Guardianship: Michael Brewster, CPS,

Interim Action Narrative: Resident was assessed. APRN notified and ordered for resident to have further evaluation and treatment at FCMC.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist informed of provider reported incident. 8/2/2023, Licensing Specialist reviewed provider reported incident for licensing concerns.