



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: 8/7/2023

Date Received by DCCECE: 8/8/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: x Serious injury requiring outside medical attention Residents

Name/DOB: [REDACTED] State: [REDACTED]s Date/Time of incident: 8-7-23/14:45

Name of Perimeter Staff Making Notification Date Time Name of Person Notified Antoine

T. Jackson LPC Clinical Director 8/8/2023 Signature and title of staff completing this form

Date: Name of Facility: Perimeter Behavioral of Forrest City Phone Number: 870-633-3200

Street Address, City, State, Zip: 1521 Albert St, Forrest City, AR 72335 Please give a

description of the incident: The resident injured foot after attacking a peer in a physical

altercation. Resident complained of pain, swelling and was able to put full weight on his

right foot. Swelling was noted in the foot. Corrective Actions Taken: The resident was

assessed and checked by a nurse, after consultation with the staff APRN, the resident was

taken to Forrest City Medical Center for examination. RICE Therapy with bandage was

given to the resident. When returned to the facility bandage was taken for safety, continued

monitoring, and RICE Therapy. Resident placed on Activities Restriction for safety until

cleared by Doctor and/or APRN. Additional Information: None currently. Guardian

Notified: Shaneka Guidry, CPS Worker

Interim Action Narrative: Resident was assessed by nurse. APRN ordered for resident to go to FCMC for examination. Resident placed on assaultive precautions.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist was informed of provider reported incident via email. 8/9/2023, Licensing Specialist reviewed provider reported incident for licensing concerns. Licensing Specialist inquired and reviewed camera footage. Licensing Specialist informed that resident jumped in the physical altercation. Licensing Specialist reviewed camera footage.



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Date: Name of Facility: Perimeter Behavioral of Forrest City Phone Number: 870-633-3200

Street Address, City, State, Zip: 1521 Albert St, Forrest City, AR 72335 Please give a

description of the incident: Resident got bitten by a peer during a physical altercation with a peer. The bite was to the left thumb, the skin was broken, and the wound was bleeding.

Corrective Actions Taken: The resident was assessed and checked by the nurse, the wound was cleaned, and triple antibiotic ointment with dressing was applied to the thumb. After consultation with the staff APRN, the resident was taken to Forrest City Medical Center for examination and X-ray. After examination was given an X-ray there were no broken bones and antibiotic was given and prescribed to the resident. The resident was sent back to the facility with wound to be monitored by the nurse. Additional Information: None currently.

Guardian Notified: Kassie Sauer, CPS Worker

Interim Action Narrative: Resident was assessed by the nurse. APRN ordered for resident to be examined and x-rayed at FCMC. Resident placed on assaultive precautions.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist was informed of provider reported incident via email. 8/9/2023, Licensing Specialist reviewed provider reported incident for licensing concerns. Licensing Specialist inquired and reviewed camera footage. Licensing Specialist reviewed camera footage.



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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: 8/9/2023

Home Visit Date: 8/10/2023

Purpose of Visit: Self Report Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:

Time of Visit: 10:30 am to 1:30 pm

Census: 57

Licensing Specialist spoke with Ms. Charlotte Lockert, CEO, Antione Jackson, Clinical Director, and Clifton Williams, Program Director, regarding ELS Cases #015431 and 015429. This incident happened on the 300 Hall in the dayroom. Licensing Specialist reviewed camera footage on 8/9/2023 for the provider reported incident.

Licensing Specialist observed residents playing cards at a table, sitting in chairs around the television, walking around the room, and horseplaying, ratio 2:12. Resident was observed walking around the room talking to different residents.

At 14:51, resident was observed pushing his peer. Licensing Specialist observed the two residents begin to fight. Staff was observed separating the residents. Licensing Specialist observed a peer [REDACTED] jump in the physical altercation. Licensing Specialist observed the peer that got into a physical altercation with resident being escorted out of the room.

Due to staff members and residents around the physical altercation, Licensing Specialist was unable to see the resident being bitten and peer [REDACTED] hurting his foot. Licensing Specialist did observe peer [REDACTED] limping away from the area of the physical altercation.

Licensing Specialist informed that both resident and peer were placed on assaultive precautions.

Provider Comments:

CCL Staff Signature :

Date: 8/18/2023



Provider Signature :

Date: 8/18/2023