



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: 8/14/2023

Date Received by DCCECE: 8/14/2023

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] Date/Time of incident: 8-11-23/07:30

Please give a description of the incident: The resident hit a wall last night and was monitored by Nurses. During the next day pain and swelling persisted and the resident could not bend his wrist per his report. Corrective Actions Taken: The resident was assessed and checked by Nurse and then recommended by APRN to go to FCMC for a medical examination and X-Ray. The resident was diagnosed with no acute findings after X-Ray and an examination was performed and sent by to the facility for continued monitoring by Nurses. Additional Information: None currently. Guardian Notified: Sheila Gale, DCFS worker

Interim Action Narrative: Resident was assessed by nursing and APRN referred resident to FCMC for further evaluation.

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist received provider reported incident via email. 8/15/2023, Licensing Specialist reviewed provider reported incident for licensing concerns. Licensing Specialist inquired about resident hitting the wall. Licensing Specialist informed that resident hits walls at will unprovoked.
