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Notice of Serious Incident

Date of Incident: 8/20/2023

Date Received by DCCECE: 8/21/2023

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: State: Date/Time of incident: 8/20/23-10:30 Resident was sent out to Forrest City Medical Center for nausea and vomiting. Corrective Actions Taken: Resident was assessed and checked by nurse. The nurse consulted with APRN who recommended that **Sector** be sent to Forrest City Medical Center for assessment. The diagnosis at Forrest City Medical Center was nausea with vomiting unspecified, fever unspecified, noninfective gastroenteritis and colitis unspecified. Resident was not able to identify with nurse or hospital staff the cause of nausea and vomiting either. Additional Information: None currently. Guardian Notified: Nicole Netherton, DCFS worker

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

Maltreatment Narrative:

Licensing Narrative: Licensing Specialist reviewed provider reported incident for licensing concerns.

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