

## **Division of Child Care & Early Childhood Education**

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## **Notice of Serious Incident**

**Date of Incident: 10/11/2023** 

Date Received by DCCECE: 10/12/2023

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing
Report Description: Serious injury requiring outside medical attention Residents Name/DOB:  State: Texas Date/Time of incident: 10/11/23/09:15 Please give a description of the incident: In the classroom a desk fell on resident?s right foot causing injury. Corrective Actions Taken: Resident was assessed and checked by nurse who pain and swelling of the foot Nurse consulted with APRN who advised that resident be sent to the Forrest City Medical Center for evaluation. After the medical exam there were that resident had  on X-Ray resident sent back to the facility for continuance of care. Additional Information: None currently. Guardian Notified: Kymberlie Malatek, CPS Worker
Interim Action Narrative: Resident was assessed by the nurse and referred to FCMC for an evaluation.
Maltreatment Narrative:

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