



Division of Child Care & Early Childhood Education
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Notice of Serious Incident

Date of Incident: 11/4/2023

Date Received by DCCECE: 11/6/2023

Facility Name: Perimeter Behavioral of West Memphis

Facility Number: 231

Incident Type: Licensing

Report Description: Resident [REDACTED] DOB [REDACTED] (Guardian: Mother, [REDACTED]) Resident was sent to the emergency room for complaints of Shortness of breath and cough. Resident states she has a history of Asthma. Discharge medications were take 4 puffs of albuterol every 4 hours for 2 days (use spacer). Take [REDACTED] for 7 days. Resident returned safely to Perimeter of West Memphis.

Interim Action Narrative: Resident was referred to the emergency room for further evaluation.

Maltreatment Narrative:

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