

Division of Child Care & Early Childhood Education

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Notice of Serious Incident

Date of Incident: 11/25/2023
Date Received by DCCECE:11/28/2023
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: Colorado Date/Time of incident: 11/25/23-13:30 Please give a description of the incident: Resident complained of right arm pain and stated his arm has been hurting for a few days. Resident did not disclose origin of pain or injury when prompted multiple times by the nurse. Corrective Actions Taken: Nurse consulted with APRN who advised that resident be sent to the Forrest City Medical Center for evaluation. After X-Ray and medical evaluation no significant findings were observed. Additional Information: None currently. Guardian Notified: Guardian
Interim Action Narrative: Resident was assessed by the nurse and referred to FCMC for an evaluation.
Maltreatment Narrative:
Licensing Narrative: Licensing Specialist informed and reviewed provider reported incident for licensing concerns.