



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: 12/2/2023

Date Received by DCCECE: 12/6/2023

Facility Name: Perimeter of the Ozarks

Facility Number: 237

Incident Type: Dual

Report Description: SERIOUS OCCURRENCE REPORTING FORM ? Serious injury requiring outside medical attention ? Resident?s attempted suicide ? Allegation of abuse/neglect ? Resident?s death ? AWOL/Elopement ?*X* Allegation of sexual/physical abuse Victim: [REDACTED] Alleged Abuser: [REDACTED]

[REDACTED] Date/Time of incident: Saturday night after med pass (12/2/23) Name of Perimeter Staff Making Notification Date Time Name of Person Notified Agency Rep Sarah Whorton, RN, Director of Risk and Quality 12/06/23 1:30 pm See Below Sarah Whorton, RN, Director of Risk and Quality 12/06/2023 Name and title of staff completing this form Date: Name of Facility: Perimeter Behavioral of the Ozarks Phone Number: 479-957-9857 Street Address, City, State, Zip: 2466 S. 48th Street Suite B. Springdale, AR 72762 Please give a description of the incident: Resident [REDACTED] reported to me and therapist on 12/6/23 that on 12/2/23 after returning from her pass and taking her meds she went to her room and that her roommate at the time kept taking her blanket and smacking her on the butt. She reported her roommate [REDACTED] proceeded to escalate and that she then began to touch her vagina and eventually inserted her fingers inside her and was licking her vagina as well. [REDACTED] stated she did not tell her to stop because she is scared of [REDACTED] but it was not consensual. [REDACTED] stated she eventually told [REDACTED] she wanted to go to bed and [REDACTED] told her she would let her sleep and then went back to her own bed. [REDACTED] reported that [REDACTED] began masturbating after she went back to her own bed. Corrective Action: ? Residents separated. ? Residents placed on sexual misconduct precautions. Parties notified of event: [REDACTED], Guardian ([REDACTED] Travis Hood, CEO Art Hickman, Regional CEO Rebecca Thomas, VP Clinical Training Chris Perry, VP Risk Compliance/Quality Annika Perry, MSW ? Clinical Director Heather Harper, VP Nursing Sarah Kroon-Director of Nursing Disability Rights Report Email (Disability Rights of AR) Chelsea Vardell, Kendra Rice, Jarred Parnell and Felicia Harris (DHS)

Interim Action Narrative:

[REDACTED]:

Licensing Narrative: 12/7/2023 - A visit was conducted at the facility by Licensing Specialist Jarred Parnell. Video footage was reviewed for 12/2/2023 from 22:00 - 6:30 to evaluate supervision for nightly bed checks every 30 minutes. Video footage shows the staff checking the residents room around the time of the alleged incident. While viewing the footage between the hours of 5:00 AM and 6:00 AM the staff person did not do a bed check. The facility was cited for this. The alleged incident in the report is unfounded at this time.



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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks

Facility Number: 237

Licensee Address: 2466 SOUTH 48TH STREET
SPRINGDALE AR 72766

Licensing Specialist: Jarred Parnell

Person In Charge: Travis Hood

Record Visit Date: 12/7/2023

Home Visit Date: 12/7/2023

Purpose of Visit: Complaint Visit

Regulations Out of Compliance:

Regulation Number: 900.907.6

Regulation Description: Supervision during sleeping hours shall include a visual check on each child at least every thirty (30) minutes.

Finding Description: Staff failed to complete a bed check within thirty minutes between the 5:00 AM and 6:00 AM time frame.

Action Due Date: 2023-12-08

Action Due Description: Staff to be re-trained on bed checks and a system of reminder will be instituted in order to meet the standard for bed checks.

Comply Date:

Action Due Description: Staff to be re-trained on bed checks and a system of reminder will be instituted in order to meet the standard for bed checks.

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:


12/7/2023 - A visit was conducted to review camera footage for supervision and bed checks. The alleged incident happened in a bedroom where there are no cameras. Supervision was evaluated for this complaint.

Camera footage was reviewed for 12/2/2023 - starting at 22:00 and ending at 6:00 in the morning. Staff can be seen doing regular bed checks around the alleged time of the incident.

While reviewing footage it was revealed that the staff did not do a bed check within thirty minutes in between the 5:00 AM and 6:00 AM time period. The facility was cited for this.

Licensing is unable to issue a finding for the incident at this time.

Provider Comments:

CCL Staff Signature : 
Provider Signature : *Travis Hood, MS*

Date: 12/28/2023

Date: 12/28/2023



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521 Visit Compliance Report

Licensee: Perimeter of the Ozarks

Facility Number: 237

Licensee Address: 2466 SOUTH 48TH STREET
SPRINGDALE AR 72766

Licensing Specialist: Jarred Parnell

Person In Charge:

Record Visit Date: 3/28/2024

Home Visit Date: 3/28/2024

Purpose of Visit: Complaint Visit

Regulations Out of Compliance:

Regulations Needing Technical Assistance:

Regulation Not Applicable:

Regulations Not Correctable:

Narrative:


No in-person licensing visit completed on 3/28/2024.

Licensing Specialist received a complaint on 12/6/2023 for ELS Case #017905.


This complaint has been **FOUNDED** by licensing.

The facility was cited for standard 900.907.6

Provider Comments:

CCL Staff Signature : 

Date: 3/28/2024

Provider Signature : 

Date: 3/28/2024