



Placement and Residential Licensing Unit

P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437

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Notice of Serious Incident

Case Number: 019709

Date of Incident: 12/30/2023

Date Received: 1/3/2024

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Resident had pain and swelling in right hand and nose, bruise also noted on his nose from altercation with another peer the night before. Nurse assessed [REDACTED] and he was sent to Forrest City Medical Center for medical examination and x-ray after consultation with the APRN. [REDACTED] diagnosed with buckle fracture displaced of the 5th metacarpal metaphysis. Sent back to the facility for continuance of care all residents involved separated and allowed to process with staff.

Interim Action Narrative: Resident was assessed by the nurse and sent to FCMC for further evaluation.

Maltreatment Narrative:

Licensing Narrative: Provider reported incident was sent to licensing via email on 1/3/2024 but was not entered into ELS. Program Coordinator entered provider reported incident into ELS for documentation purposes.