

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

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**Notice of Serious Incident** 

Case Number: 018351 Date of Incident: 1/2/2024 Date Received by DCCECE: 1/3/2024 Facility Name: Perimeter Behavioral of Forrest City Facility Number: 142 **Incident Type: Licensing** Report Description: Serious injury requiring outside medical attention Residents State: Name/DOB: Date/Time of incident: 1-2-24/13:34 Please give a description of the incident: Resident was sent to the ER after falling in the gym while playing and injuring 3rd digit. Corrective Actions Taken: Nurse assessed and he was sent to Forrest City Medical Center for medical examination and x-ray after consultation with the APRN. Diagnosed with non-displaced hairline fracture of the epiphysis of the middle phalanx. Sent back to the facility for continuance of care. Additional Information: None currently. Guardian Notified: Parent/Legal Guardian Interim Action Narrative: Resident was assessed by the nurse and sent to FCMC for further evaluation. Maltreatment Narrative: Licensing Narrative: Program Coordinator reviewed provider reported incident for

licensing concerns.