

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

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## **Notice of Serious Incident**

Case Number: 018927
Date of Incident: 2/1/2024
Date Received by DCCECE: 2/2/2024
Facility Name: Perimeter Behavioral of Forrest City
Facility Number: 142
Incident Type: Licensing
Report Description: Resident, DOB was taken to Forrest City Medical Center due to right hand swelling. Resident stated that he ?fell out of his chair on purpose and I know what I was doing.? Resident returned to facility at 1240 (12:40 pm cst) from Forrest City Medical Center with following findings: right hand swelling. No acute fracture or dislocation. The proximal and distal carpal rows are adequately aligned. The soft tissues are grossly unremarkable
Interim Action Narrative:
Maltreatment Narrative:
Licensing Narrative: On 02.14.24 during in person visit at the agency discussed this occurrence. No concerns-violations to be cited.