



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: 019417

Date of Incident: 2/23/2024

Date Received: 2/26/2024

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Dual

Report Description: Resident, [REDACTED], was found with a nicotine vape and a THC vape during routine checks. Staff confiscated the vapes and reported them to the Supervisors/Safety Team. The Safety team interviewed/collected written statements from Resident, Resident peer, and staff who was alleged the nicotine vape came from, as well as reviewed camera footage. Camera footage shows staff going into all Resident's room for routine bedtime checks but no evidence of vape usage from staff or Resident(s). Said staff was immediately placed on administrative leave 02/23/2024. AR [REDACTED]. AR DHS completed an interview with [REDACTED] today, 02/26/2024. Forrest City Police Department were contacted to confiscate both vapes 02/23/2024. Vapes were confiscated at approximately 3:15 pm. Report pending.

Interim Action Narrative: Staff was suspended pending the maltreatment investigation.

Maltreatment Narrative: AV is [REDACTED]. AO is age unknown [REDACTED]. AV is currently admitted to Perimeter Behavioral Health in Forrest City, Arkansas. AV was caught with a vape. While investigating where the vape came from, video showed that AO provided the vape to AV. Per AV and his roommates statement AO allowed AV to use the vape. AO was put on suspension pending investigation. The vape contained nicotine.

Licensing Narrative: 02.27.24 LS sent email to investigator requesting permission to proceed with monitoring this incident for MLS violations. 02.29.24 LS reviewed camera footage of the evening before the "vapes" were found on resident. 03.01.24 AO staff was terminated. Agency has implemented a more robust search process when admitting new youth. 3/28/2024- Maltreatment case closed as TRUE.

Arkansas Department of Human Services

Placement & Residential Licensing Unit

Licensing Compliance Record

Agency Name: Perimeter Behavioral of Forrest City	Person In Charge: Charlotte Lockhart
Address: 603 Kittle Rd., Forrest City, AR 72335	Phone: (870) 633-3200
Licensing Specialist: Eleanor White	
Date of Visit: 02/29/24	Purpose of Visit: Incident of 02.23.24
ELS Case 019417	

STANDARD REVIEWED	DISCUSSION/OBSERVATION	COMPLIANCE DATE	DATE CORRECTED
	<p>Time 3:00 PM to 5:00 PM Census: 52</p> <p>Immanuel Morris assisted Licensing Specialist with a camera footage review of the evening before (02.22.24) the morning incident on 02.23.24 when 2 "vapes" were found on resident [REDACTED]. Allegedly the vapes were given to resident [REDACTED] the evening of 02.22.24.</p> <p>Video footage shows AO staff doing routine nightly safety checks in all rooms. AO staff talks to resident [REDACTED] in the hall and is talking to other residents also. AO staff was in hall on his cell phone, but footage did not show him with a vape. Resident [REDACTED] alleges that AO staff only gave him the nicotine vape while in his room the night of 02.22.23. Resident [REDACTED] alleges the marijuana vape was given to him by another resident who snuck it in when he was being admitted to the facility. The other resident (not staff) gave resident [REDACTED] the marijuana vape and asked [REDACTED] to "recharge" the marijuana vape when [REDACTED] went on pass.</p> <p>On 02.23.24 both vapes were confiscated by the Forrest City Police Department.</p> <p>On 03.01.24 AO staff was terminated. The agency is implementing a more robust search policy for their admissions process.</p> <p>Agency is cited for violation of MLS 109.1 Unprofessional conduct in the practice of child welfare activities shall include without limitation: g) Engaging in behavior that could be viewed as sexual, dangerous, exploitative, or physically harmful to children.</p> <p>Complaint is founded.</p>		N/C

COMMENTS of Person receiving form:

<i>Charlotte Lockhart, CEO</i>	<i>4-1-24</i>	<i>Eleanor White</i>	<i>04/01/24</i>
PERSON SIGNING AS RECEIVING	DATE	LICENSING SPECIALIST	DATE