



**Placement and Residential Licensing Unit**

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**Notice of Serious Incident**

**Case Number:** 021762

**Date of Incident:** 6/5/2024

**Date Received:**6/6/2024

**Facility Name:** Perimeter Behavioral of Forrest City

**Facility Number:**142

**Incident Type:** Licensing

**Report Description:** Resident, [REDACTED], was sent to Forrest City Medical Center by order of APRN due to complaint of back and keg pain. The Safety team learned while speaking with Resident and his Mother that while on pass, he and his mother were involved in a car accident. Resident returned to the milieu same day at 1700 (5:00 pm cst) with bandages and RICE instructions. No other issues presented.

**Interim Action Narrative:** Resident was sent to FCMC for further evaluation.

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**Maltreatment Narrative:**

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**Licensing Narrative:** Program Coordinator reviewed provider reported incident for licensing concerns. Facility provided documentation that has been uploaded. Facility reported that resident is not on any restrictons due to resident having full range of motion and no injuries.