



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: 022931

Date of Incident: 7/31/2024

Date Received: 8/1/2024

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Resident, [REDACTED], presented to Nurse with complaint of pain in his mouth. He was sent out to Forrest City Medical Center for further evaluation per order of APRN. Resident returned to the milieu, same day, 1407 (2:07 pm) with no issue.

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

Maltreatment Narrative:

Licensing Narrative: Program Coordinator reviewed provider reported incident for licensing concerns and inquired about camera footage. Facility provided documentation for this incident. Facility reported no camera footage being available. 8/6/2024, Program Coordinator inquired about witness statements. Facility reported they are still working on obtaining documentation. Facility also reported that resident had an altercation with a peer over a remote. 8/12/2024, Program Coordinator followed up with facility regarding witness statements. 8/13/2024, facility provided witness statements. 8/14/2024, Program Coordinator reviewed witness statements.