



Placement and Residential Licensing Unit
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Notice of Serious Incident

Case Number: 023314

Date of Incident: 8/18/2024

Date Received: 8/19/2024

Facility Name: Perimeter Behavioral of Forrest City

Facility Number: 142

Incident Type: Licensing

Report Description: Resident, [REDACTED], was sent out to Forrest City Medical Center for further evaluation to his inner thigh due to redness, swelling, and irritation per order of APRN. Resident returned to the milieu, same day, 1750 (5:50 pm) with no issue.

Interim Action Narrative: Resident was ordered to be evaluated at FCMC by APRN.

Maltreatment Narrative:

Licensing Narrative: Licensing reviewed provider reported incident for licensing concerns. Facility provided documentation for this incident that will be reviewed. 8/20/2024, Program Coordinator reviewed documentation provided by the facility and uploaded document.