

Placement and Residential Licensing Unit P.O. Box 1437, Slot S140, Little Rock, AR 72203-1437 P: 501.682.8590 F: 501.683.6060 TDD: 501.682.1550

Notice of Serious Incident

Case Number: 028028

Date of Incident: 3/4/2025

Date Received: 3/5/2025

Facility Name: Perimeter of the Ozarks

Facility Number: 237

Incident Type: Licensing

Report Description: ? Serious injury requiring outside medical attention ? Resident?s attempted suicide ? Allegation of abuse/neglect related to a restraint ? Resident?s death ? AWOL/Elopement ? Allegation of sexual/physical abuse ? Sexual Misconduct X Other,

Date/Time of incident: 3/4/25 at ~17:00 Patient

Name of Perimeter Staff Making Notification Date Time Name of Person Notified DHS Charriot Sales, Director of Risk Management 3/5/25 13:00 Felicia Harris, Chelsea Vardell, Kendra Slade, Jarred Parnell OLTC Charriot Sales, Director of Risk Management 3/5/25 13:00 Jeff Rosenbaum, Angela Smith Disability Rights Center, Inc. Charriot Sales, Director of Risk Management 3/5/25 13:00 incidentreporting@disabilityrightsar.org Perimeter Charriot Sales, Director of Risk Management 3/5/25 10:30 Skyler Barnes, Chris Perry, Brandy Pfeifer, Carey Ouzts, Rebecca Thomas Guardian Hunter VanBrunt, Nurse 3/4/25 17:20 Shawnta Paxton Charriot R. Sales, Director of Quality and Risk Management 3/5/25 Signature and title of staff completing this form Date: Name of Facility: Perimeter Behavioral of the Ozarks Phone Number: 479-957-9857 ext. 108 Street Address, City, State, Zip: 2466 S. 48th Street Suite B. Springdale, AR 72762 Please describe the incident: On 3/4/25 at 17:05, Resident was examined by a nurse for right-hand pain. Upon examination, a large hematoma was noted. The hematoma was treated with ice, and the resident was administered for pain relief. During the exam, reported that the injury occurred after hitting a wall multiple times after a verbal altercation with a peer. The medical provider was notified of the situation, and a verbal order was given for to be sent to for further treatment; was transported via facility transportation with two staff. At the ?s hand was X-rayed, and a fracture was ruled out. was discharged with instructions to continue icing the affected area and to take for inflammation and returned to Perimeter at approximately 19:10. Actions Taken: ? pain management.

Administered first aid ? Transported resident to **a constant and a constant and constant and a constant and con**

Interim Action Narrative:

Narrative:

Licensing Narrative: Licensing specialist Jarred Parnell reviewed the report. Licensing specialist received incident report documentation from the facility. The documentation was reviewed and uploaded to ELS.