



Placement and Residential Licensing Unit

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Notice of Serious Incident

Case Number: 028173

Date of Incident: 3/9/2025

Date Received: 3/11/2025

Facility Name: Yellow Rock Behavioral Health

Facility Number: 203

Incident Type: Licensing

Report Description: Resident [REDACTED]

[REDACTED] On March 9th the resident reported left wrist pain to the APRN. Unknown source of pain. X-ray order for the left wrist. X-ray completed on March 9th. X-ray report: No acute fracture or dislocation. No followup at this time.

Interim Action Narrative:

[REDACTED] **Narrative:**

Licensing Narrative: Licensing Specialist Jarred Parnell reviewed the report. Licensing Specialist Jarred Parnell reviewed the report. Licensing was notified on 3/10/2025 by phone 479-466-0137 text message from facility staff Ronissa Adams that they were having technical issues logging into the portal and sending emails Licensing specialist recieved nursing notes and medical documentation. The documents were reviewed and uploaded to ELS.