

MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION OFFICE OF CHILDHOOD - CHILD CARE COMPLIANCE COMPLAINT INVESTIGATION OF SUBSTANTIATED STATUTE OR RULE VIOLATIONS

DATE OF REPORT 5/14/2019

DVN

002406702

FACILITY NAME

FAMILY AND WORKFORCE CENTERS OF AMERICA

FACILITY ADDRESS

1232 ROBERT L POWELL PL

CITY	ZIP CODE	PHONE NUMBER	COUNTY
WELLSTON	63133	(314) 726-3000	ST LOUIS

ASSIGNED SPECIALIST

SPAULDING, STEPHANIE

RULE/STATUTE VIOLATION(S)

VIOLATION(S)

19 CSR 30-62.192 (5)(A)

In case of accident or injury to a child, the provider shall notify the parent(s) immediately. If the child requires emergency medical care, the provider shall follow the parent(s) written instructions.

CONCLUSION SUMMARY

On May 13, 2019, Child A incurred a bruise to her forehead from falling and hitting her head on the gross motor room floor when a large blue ball rolled forward and Child A fell forward as well.

19 CSR 30-62.192 (5)(A) In case of accident or injury to a child, the provider shall notify the parent(s) immediately. If the child requires emergency medical care, the provider shall follow the parent(s) written instructions.

Ms. Trish attempted to contact Parent A with phone numbers for Parent A and both numbers were disconnected. In addition, Ms. Trish completed an incident/injury report that was provided to Parent A at pick up on May 13, 2019. However, Child A's enrollment form was not reviewed for any additional emergency contact phone numbers.

Following the incident with Child A on May 13, 2019, the emergency contact phone numbers for Parent A have been updated with the most current information.

CORRECTIVE MEASURES

CORRECTIVE MEASURE

The facility shall conduct a staff meeting to review the center's policies and all

Yes

9/24/2019

The facility shall conduct a staff meeting to review the center's policies and all licensing rules and regulations regarding accidents and injuries. The facility must provide the Section for Child Care Regulation with a statement, signed by all staff (paid employees or unpaid volunteers), to indicate they understand and agree to follow those rules and regulations.

DISPOSITIONDISPOSITION DATESUBSTANTIATED7/11/2019

APPROVING SUPERVISOR

CLARK, ANGELA