



213A
EDU

C01 Notification of Complaint

Thank you for submitting your notification. Below is a copy of the information provided in your notification. If there are any issues, please contact your [Regulatory Authority](#) for assistance.

Notification of Complaints

Provider

Provider Name	OORAMA OPERATIONS PTY LIMITED
Provider Number	PR-40001489
Provider Approval Status	Approved

Service

Service Legal Entity Name	
Service Trading Name	Symonston Kinder Haven
Service Approval Number	SE-00009842
Service Approval Status	Approved

Complaint Details

Please select the relevant notification and provide/attach the information required	Complaint alleging that a serious incident has occurred or is occurring
Please supply the following information: - Complainant name and contact details	P01 P01 P03



Please supply the following information:

- Date complaint received
- Copy of written complaint (or written summary) and any other relevant documentation (including correspondence, photographs, statements, etc)
- Steps taken/actions planned by approved provider in response to the complaint

Date Received: 20.12.2022

Parent emailed service regarding the below concerns:

1. Supervision of children
2. Safety of children with sharp objects

Please see attached complaint

Action Taken:

1. Witness statements have been collected from educators - P01, P01, P01 and P01 regarding the complaint - 21.12.22
2. All scissors have been removed from classrooms and placed in the office including adult and child ones - 21.12.22
3. Centre Manager spoke with P01 on 21.12.22 regarding email and told her about the processes of investigations and planned to have a follow up meeting within a week to discuss outcome of the meeting.
4. Centre Manager spoke with Toddlers & Preschool Educators to acknowledge the child to not be allowed in the preschool area under advisement from P01 (mother) 21.12.22
5. CCTV has been requested from Regulatory Support for timeline 21.12.22

Please upload any relevant documentation

Complaint.pdf	Sup Doc
Record of Discussion.docx	Sup Doc

Child Details

Child's Name	P01 P01
Child's Gender	Female
Child's Date of Birth	P02

Contact Details

Name	P01 P01 - Centre Manager
Phone Number	P03
Email Address	P03