



213A
EDU

I01 Notification of Incident

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 Incident

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

Incident Details

Incident Type	Reg 175-Any circumstance arising at the service that poses a risk to the health, safety or wellbeing of a child or children attending the service
Incident date	20/02/2023
Incident Time	AM
Did Emergency Services attend?	No
Risk due to	Localised Issue
Please upload any relevant documentation	
Symonston Kinder Haven.pdf	Supporting Doc



Incident Management

Steps that were taken or will be taken to prevent or minimise this type of incident in the future

Detailed description of the incident including nature of risk, time, cause, etc.

Child: P01 P01
DOB: P02
Gender: Female

Parent: P01 P01
Mobile: P03

P01 P01 - Educator
P01 P01 - Casual
P01 P01 - Nominated Supervisor

At approximately 3pm the educator came to the office and spoke to the Nominated Supervisor. The educator said that she had accidentally served dairy yoghurt to a child who had a know intolerance.

During afternoon tea the mother called the service to check in on her child and with concerns about her child not having her afternoon bottle as it was her first day. During this conversation with the mother the educator mentioned that her child was happy eating yoghurt when the mother asked if it was dairy free.

The yoghurt was taken off the child and water was given. The mother's instructions were followed to monitor her while she was on her way.

The mother picked up her child around 3:54pm and was quite upset that this had happened as she hadn't been given dairy before and has already reacted to dairy through breast milk.

Additional Information

1) The special dietary request form is on file, and the team have been made aware of this with posters also being displayed around the service and in every room

Action Taken:

- 1) The child was monitored, and water was given
- 2) Witness statements completed
- 3) CM to follow up with the mother
- 4) Ensure alternate meals are provided for children with allergies or intolerances
- 5) Incorporating placemats for children prior to eating which will state any allergies or dietary requirements



Child Details

Child's Name

Child's Gender

Child's Date of Birth

Parent(s)/Guardians(s) Name

Parent's Email

Parent(s)/Guardians(s) Phone

Contact Details

Name **P01** **P01** - Nominated Supervisor

Phone Number **P03**

Email Address **P03**