



## 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	CHABAD ACT LIMITED
Provider Number	PR-40001919
Provider Approval Status	Approved

#### Service

Service Legal Entity Name	
Service Trading Name	My Little Star Early Learning Centre
Service Approval Number	SE-00014279
Service Approval Status	Approved

#### Incident Details

Incident Type	Reg 12-Any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or for which the child attended, or ought reasonably to have attended, a hospital
Incident Date	2/09/2022
Incident Time	04:15 PM
Location	Unknown
Sub Location	Unknown
General Activity at the time	Unknown
Cause of Injury/Trauma	Fall/trip
Did Emergency Services attend	No



Further Details of the Incident	<p>At around 3:40 pm, I received a call from p01 p01 saying that her son, p01 p01 was complaining of a sore head. p01 had told p01 that he had fallen back and hit his head on a red pole and that an educator asked if he was okay. p01 said that she wasn't made aware and wanted to know what had happened as p01 was limiting his head movements.</p> <p>I told p01 that I would look into it and get back to her. I spoke with the two Team Leader's in p01 ' room (p01 and p01 P01) and they weren't aware of any incident and said that p01 had been happy and only cried when he was picked up. We spoke with every educator and no one else had witnessed p01 falling, him being upset, or asking him if he was okay.</p> <p>As we have CCTV at My Little Star, i will be able to view the footage from the day, but unfortunately, p01 who accesses the cameras, had already left for his Sabbath and I was unable to view anything.</p> <p>At 4:15pm, I received an email from p01 stating that his dad was taking him to the hospital as he is unable to move his head and that the hospital had questions about the fall.</p>
Details of Action Taken (e.g. First Aid)	None
Please detail what steps were taken to ensure parents were notified as soon as practicable, including time, date and nature of notification	None as we were notified by the family.
Name of Witness to the incident	No witness
Please detail what steps were taken or will be taken to prevent or minimise this type of incident in the future	We will be reviewing our footage and reviewing our Supervision Plans and discussing Active Supervision and putting plans in place.
Photos and Evidentiary Documents	
Screenshot (2).png	Email regarding hospital



## Child Details

Child's Name	p01 p01
Child's Gender	Female
Child's Date of Birth	P02
Parent(s)/Guardians(s) Name	p01 p01
Parent's Email	P03
Parent(s)/Guardians(s) Phone	P03
Was urgent medical attention required by a registered practitioner/hospital?	Yes
Type of Injury/Trauma	Head injury/concussion
Part of the Body	Spine/back

## Contact Details

Name	p01 p01
Phone Number	P03
Email Address	P03