



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	Communities@Work
Provider Number	PR-00005824
Provider Approval Status	Approved

Service

Service Legal Entity Name	
Service Trading Name	Communities@Work Monash Out of School Hours Care
Service Approval Number	SE-00009694
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	22/01/2021
Incident Time	12:15 PM
Location	Indoors
Sub Location	Play Space/Classroom
General Activity at the time	Meal time
Cause of Injury/Trauma	Hot water/steam
Did Emergency Services attend	No
Further Details of the Incident	At 12:15pm, P01 P01 (11 years) was sitting with Educators and children eating lunch. While eating 2 minute noodles, she accidentally knocked the cup on to her lap resulting in redness to her thighs. Immediate First Aid was carried out.
Child's Name	P01 P01
Child's Date of Birth	P02

Submitted By: P01 P01



Child's Gender	Female
Was urgent medical attention sought by a registered practitioner and/or hospital	No
Type of Injury/Trauma	Burn
Part of the Body	Leg/foot
Details of Action Taken (e.g. First Aid)	P01 P01, Nominated supervisor administered first aid to P01. Affected area was placed under continuous running water for recommended time. Burn gel applied.
Please detail what steps were taken to ensure parents were notified as soon as practicable, including time, date and nature of notification	<p>- 22/1/21 P01 P01 (Father) was contacted via phone call at 12:26pm and informed of the incident by P01 P01 (Nominated Supervisor)</p> <p>- 22/1/21 P01 P01 (Mother) contacted Monash School Holiday Program at 12:43pm to check on P01 and inform the service that P01 will be taking P01 to the walk in centre after pick up</p> <p>- 22/1/21 P01 P01 (Father) sent a text message to the service at 1:54pm to inform them that P01 had attended the walk in centre. P01 stated the nurse commended the team on their First Aid skills and said P01 will be fine.</p> <p>- 25/1/21 P01 P01 attempted contact with P01 P01 (Father) at 11:11am to check on how P01 was going. He returned the call to P01 at 11:27am</p>
Name of parent or guardian notified	P01 P01
Email of parent or guardian notified	P01
Phone number of parent or guardian notified	P03
Name of Witness to the incident	P01 P01
Please detail what steps were taken or will be taken to prevent or minimise this type of incident in the future	Reminder to children about eating safely during meal times. Conversations with Educators about the incident.
Photos and Evidentiary Documents	
P01 P01 Incident Form 22.1.21 page 1.jpg	Communities@Work incident form P01 P01 22.1.21
P01 P01 Incident Form 22.1.21 page 2.jpg	Communities@Work Incident Form P01 P01 22.1.21

Contact Details

Name	P01 P01
Phone Number	P03
Email Address	P01 P01

Submitted By: P01 P01



ACT
Government
Education

Notification Number: **NOT-40504710**
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