



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	YWCA Canberra
Provider Number	PR-00005876
Provider Approval Status	Approved

Service

Service Legal Entity Name	YWCA Charles Conder School Age Care
Service Trading Name	YWCA Charles Conder School Age Care
Service Approval Number	SE-00009663
Service Approval Status	Approved

Incident Details

Incident Type	Child Missing
Incident Date	17/10/2024
Incident Time	17/10/2024 03:10 PM
Did Emergency Services attend	No
Further Details of the Incident	YWCA Quality Support Team have been advised of an incident that occurred on Thursday 17 October 2024 regarding child P01 P01. Currently YWCA Canberra are waiting for a return call from the parent to discuss the events. Known Information - The Program Manager approached the Kindy room and spoke to the teacher who advised that P01 was in a split class and not in the classroom. - The Program Manager went to the suggested classroom and was informed that P01 had left. - The Program Manager returned the remaining children to the demountable and went to School Office. - The Program Manager spoke to the family via the phone, who had contacted the school to speak to the school age care program. - The family confirmed P01 had reached a family members house.
Details of Action Taken (e.g. First Aid)	



Please detail what steps were taken to ensure parents were notified as soon as practicable, including time, date and nature of notification

Spoke to guardian via phone at approx. 3:10pm.
Attempted call to **P01** **P01** on 18 October 2024 at approx 4:00pm.

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

Review transition with the school for school representatives/teachers to communicate changes to class environments and grouping.

Photos and Evidentiary Documents

NA.pdf

INCIDENT REPORT WILL BE PROVIDED ON MONDAY 21 OCT
FOLLOWING INTERNAL INVESTIGATION

Child Details

Child's Name

P01 **P01**

Child's Gender

Male

Child's Date of Birth

P02

Parent(s)/Guardians(s) Name

P01 **P01**

Parent's Email

P03

Parent(s)/Guardians(s) Phone

P03

Missing Type

Child did not attend-child initiated

Duration Missing

Less than 10 mins

Contact Details

Name

P01 **P01**

Phone Number

P03

Email Address

P01