



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	Camp Australia Pty Limited
Provider Number	PR-00002539
Provider Approval Status	Approved

Service

Service Legal Entity Name	CAMP AUSTRALIA PROPRIETARY LIMITED
Service Trading Name	Camp Australia - St Jude's Primary School OSHC
Service Approval Number	SE-40016130
Service Approval Status	Approved

Incident Details

Incident Type	Injury Trauma
Incident Date	1/04/2025
Incident Time	01/04/2025 04:30 PM
Location	Outdoors
Sub Location	Outdoor other
Location (Other)	Incident took place during a group of children playing soccer on the School Oval near the goal posts.
General Activity at the time	Play-based program
Cause of Injury/Trauma	Child/Child interaction
Did Emergency Services attend	No



<p>Further Details of the Incident</p>	<p>P01 P01 was playing soccer on the school oval with a group of children being supervised by Educator P01 P01. Educator P01 P01 had to speak to the group regarding rough play as some children were trying to pick each other up.</p> <p>P01 was then picked up by some other children and fell to the ground (grassed oval) landing on his left side and shoulder. Educator P01 P01 was first to check on P01 and asked if he was okay in which P01 replied yes, I'm fine and got to his feet and continued playing soccer with the group.</p> <p>Educator P01 P01 monitored P01 during this time and did not display any symptoms of injury or discomfort.</p>
<p>Details of Action Taken (e.g. First Aid)</p>	<p>Educator P01 P01 was first to check on P01 and asked if he was okay in which P01 replied yes, I'm fine and got to his feet and continued playing soccer with the group.</p> <p>Educator P01 P01 monitored P01 during this time and did not display any symptoms of injury or discomfort.</p> <p>It was the next day that it was discovered that P01 had actually sustained a broken collarbone which was confirmed by the parents.</p>
<p>Please detail what steps were taken to ensure parents were notified as soon as practicable, including time, date and nature of notification</p>	<p>1.4.2025 5:15pm P01 P01 (mum) was spoken to at pick up by Educator P01 P01 to explain the incident and that P01 had only just started (5:14pm) to complain of being in pain and discomfort.</p> <p>2.4.2025 2:15pm St Judes Primary School Notified Camp Australia Service Leader P01 P01 that they had received notification from P01 P01 (mum) that P01 had sustained a broken collarbone and wouldn't be attending school.</p> <p>2.4.2025 2:30pm Service Leader P01 P01 rang and spoke to P01 P01 (mum)</p> <p>2.4.2025 2:37pm Service leader P01 P01 rang and spoke to Area Manager to inform him of the incident.</p>
<p>Name of Witness to the incident</p>	<p>P01 P01</p>
<p>Please detail what steps were taken or will be taken to prevent or minimise this type of incident in the future</p>	<p>The Team has addressed rough play, play and activities that they should be avoiding, personal space/boundaries and behaviour expectations with all children in a mini meeting.</p> <p>Service Leader debriefed and reflected on the incident in a team meeting and discussed active supervision and discouraging any play that deemed unsafe, revisited Management of Children's Incidents and Illnesses policy and Incident reporting.</p>
<p>Photos and Evidentiary Documents</p>	
<p>20250404 - Incident Notification Template - Illness - Injury - Trauma St Judes OSHC 1.3.2025.pdf</p>	<p>Form</p>



Child Details

Child's Name	P01
Child's Gender	Male
Child's Date of Birth	P02
Parent(s)/Guardians(s) Name	P01
Parent's Email	
Parent(s)/Guardians(s) Phone	P03
Was urgent medical attention required by a registered practitioner/hospital?	Yes
Type of Injury/Trauma	Broken bone/fracture/dislocation (known or suspected)
Part of the Body	Torso

Contact Details

Name	P01
Phone Number	P03
Email Address	P03