



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	HARBOUR EARLY LEARNING MANAGEMENT PTY LTD
Provider Number	PR-40031090
Provider Approval Status	Approved

Service

Service Legal Entity Name	Harbour Early Learning Aranda Pty Ltd
Service Trading Name	Harbour Early Learning Aranda
Service Approval Number	SE-00016718
Service Approval Status	Approved

Incident Details

Incident Type	Injury Trauma
Incident Date	31/10/2024
Incident Time	31/10/2024 04:50 PM
Location	Outdoors
Sub Location	Play space
General Activity at the time	Play-based program
Cause of Injury/Trauma	Fall/Trip
Did Emergency Services attend	No



Further Details of the Incident	<p>P01 was crying and pointed to the obstacle course. She repeated the word 'jump', indicating she had jumped from a small a-frame onto a safety mat. An educator also witnessed her jumping. She was comforted and offered an ice pack. This was applied for approx 20 mins to the area that she was indicating was hurting, her right ankle. P01 was seemingly happy and chatting to educators. Upon collection, which occurred as the ice was being applied, her father investigated if she had full range of movement. P01 seemed able to move appropriately and did not seem in pain. There were no visible marks.</p> <p>This morning P01's mother called to say she was taking her to the doctor as she wasn't weight bearing on her legs so thought she would just get it checked. This afternoon P01's mother called again and told us that P01 had a buckle fracture high on her right shin. This means that she will need to wear a full cast for 2 weeks and then be re-assessed by the paediatric specialist. We discussed that P01 will stay home Monday and Tuesday as she gets used to the cast and family discover what support measures are required. Mum reported she is not on any pain relief medication as she is quite comfortable (as she has seemed since the jump). We organised for mum and P01 to come into the centre on Tuesday to have a meeting and work out a return to care plan to ensure we are putting measures in place to support P01's health and safety.</p>
Details of Action Taken (e.g. First Aid)	Comfort and first aid followed. Monitored P01 and reassured her whilst applying an ice pack to the affected area.
Please detail what steps were taken to ensure parents were notified as soon as practicable, including time, date and nature of notification	Incident occurred late in the day and P01 showed no signs of injury sustained, nor was she upset after a short cuddle. Staff knew that dad would arrive at the centre shortly and so one educator sat with her and held the ice pack - dad arrived at 5:25pm. Dad spent time talking to the team and investigating P01 's foot, moving it and visually inspecting. There was no identifiable issue.
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	Educators always carefully and actively supervise identified risk areas in the outdoor play space, including the portable climbing equipment and any obstacle course assembled. Adequate safety mats are carefully arranged, considering fall zones.
Photos and Evidentiary Documents	
Educator first aid certificates P01 P01 incident 31.10.24.pdf	First aid certificates
Gabadang Working Directly with Children records 31.10.24.pdf	Gabadang classroom working directly with children record 31.10.24



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?	No
Type of Injury/Trauma	Broken bone/fracture/dislocation (known or suspected)
Part of the Body	Leg/foot

Contact Details

Name	P0:P01
Phone Number	P03
Email Address	P03