



## C01 Notification of Complaint

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 Complaints

#### Provider

Provider Name	Goodstart Early Learning Ltd
Provider Number	PR-00001129
Provider Approval Status	Approved

#### Service

Service Legal Entity Name	
Service Trading Name	Goodstart Early Learning ANU
Service Approval Number	SE-40009242
Service Approval Status	Approved

### Complaint Details

Please select the relevant notification and provide/attach the information required	Complaints alleging that the Law has been contravened
Please supply the following information: - Complainant name and contact details	[Redacted] (Educator) - Centre PH: <b>P03</b> [Redacted]
Please supply the following information: - Date complaint received - Copy of written complaint (or written summary) and any other relevant documentation (including correspondence, photographs, statements, etc) - Steps taken/actions planned by approved provider in response to the complaint	It is alleged that Educator <b>P01</b> <b>P01</b> , witnessed educator <b>P01</b> <b>P01</b> , pick enrolled child, <b>P01</b> <b>P01</b> (age 2y 1m) up by the arm and move <b>P01</b> outside after <b>P01</b> did not respond to being told to go outside by <b>P01</b> . It is further alleged that as <b>P01</b> put <b>P01</b> <b>P01</b> hit her head and began to cry. It is alleged that <b>P01</b> walked away leaving <b>P01</b> to cry whilst <b>P01</b> comforted <b>P01</b> . The Centre Director has been made aware of the allegation and is completing an assessment to determine the next required actions. <b>P01</b> parents have been notified of the alleged incident and were thankful for being informed. The respondent, <b>P01</b> , will be working under supervision during the investigation process.
Please upload any relevant documentation	

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## Child Details

Child's Name	P01 P01
Child's Gender	Female
Child's Date of Birth	P02

## Contact Details

Name	P01 P01
Phone Number	P03
Email Address	P03