

Process to notify circumstance posing risk to health, safety or wellbeing

You can follow the steps below to notify the Regulatory Authority about incidents that pose a risk to health, safety, or wellbeing of children:

1. Log into the NQAITS portal
2. Select the Service and click on 'Incident'

Search by Service ID, Service name, Provider ID or Provider name

Search Show Withdrawn Services

110 record(s)

Service ID	Service Name	State	Status	Provider Name
<input checked="" type="radio"/>			Approved	
<input type="radio"/>			Approved	

1 2 3 4 5 6 7 8 9 10 ... 11

Add Service Re-open Service New Forms Submitted Forms

Incident Complaint Manage Users

art COPYRIGHT | PRIVACY POLICY | DISCLAIMER | FREEDOM OF INFORMATION DISCLOSURE

3. Click on 'Begin'

Service: [text box]

INSTRUCTIONS > DETAILS > CONTACT INFO > SUBMISSION

PROVIDER DETAILS

Provider Name: [text box] Provider Approval Number: [text box] Provider Status: [text box]

SERVICE DETAILS

Service Trading Name: [text box] Service Approval Number: [text box] Service Status: [text box]

IMPORTANT INFORMATION BEFORE YOU BEGIN

You must ensure you are familiar with your obligations under the *Education and Care Services National Law* (National Law) and the *Education and Care Services National Regulations* (National Regulations).

Regulatory authorities in each state and territory are responsible for assessing most applications and notifications. Contact your **regulatory authority** for information.

You must make your notification to the regulatory authority within the relevant prescribed timeframe.

The following must be notified within 24 hours: any serious incident; any incident that requires the approved provider to close, or reduce the number of children attending, the service for a period; the attendance at the service of any additional child or children in an emergency.

The following must be notified within 7 days: any circumstance at the service that poses a risk to the health, safety or wellbeing of a child or children; any incident or allegation of physical or sexual abuse of a child or children at the service.

Privacy Statement

ACECQA and the regulatory authorities are committed to protecting personal information in accordance with the Privacy Act 1988 and the Australian Privacy Principles

Cancel Begin

4. For Type of Incident, select the option 'Any circumstance posing risk to health, safety and wellbeing' and click on 'Next'

TYPE OF INCIDENT			
Injury or trauma	Illness	Child missing	Child taken or removed
Child locked in or out	Death of a child	Emergency service attended	Closure or reduction in number of children attending the service
Any circumstance posing risk to health, safety and wellbeing	Attendance of additional children	Incident of sexual or physical abuse	Allegation of sexual or physical abuse

Previous Save and Close **Next**

Any circumstance posing risk to health, safety and wellbeing

5. Enter notification details, select appropriate options, and click on 'Next'

INCIDENT DETAILS

Incident date: *

Incident Management

Risk due to: * *i* Health Emergency

Health emergency type: * COVID-19

Reason for risk: * -- Please Select --

Please supply the following information: *

- Detailed description of the incident including nature of risk, cause, etc
- Detailed description of impact on the operation of the service
- Involvement of emergency services or other authorities (if relevant)
- Action taken by Approved Provider to manage the risk
- Any other relevant information

Previous Save and Close **Next**

6. Enter the name and contact details for this notification and then click 'Next'

NAME AND CONTACT DETAILS FOR THIS NOTIFICATION

Note: The contact for this Notification must be an individual who is authorised by the Notifier to act on their behalf with regards to the details on this notification.

Name *

Phone Number: *

Email Address: *

* Please fill in all fields

Save as application/notification default contact

7. Upload relevant documentation by clicking on 'Add Documents' and then click 'Next'

✓ INSTRUCTIONS > ✓ DETAILS > ✓ CONTACT INFO > SUBMISSION

Attachments Summary

ATTACHMENTS

You will need to upload the following documents:

Relevant documentation I will be posting or faxing instead

No documents have been uploaded.

8. Tick the checkbox to finalise the declaration and click 'Submit'

DECLARATION

declare that: *

1. The information provided in this application form (including any attachments) is true, complete and correct;
2. I have read and understood and the Applicant agrees to the conditions and the associated material contained in this form;
3. The Applicant understands that the Regulatory Authority and/or ACECQA will have the right (but will not be obliged) to act in reliance upon the contents of the application form, including its attachments;
4. I have read and understood a Provider's legal obligations under the *Education and Care Services National Law*;
5. The Regulatory Authority is authorised to verify any information provided in this application;
6. Some of the information provided in this application may be disclosed to Commonwealth for the purposes of the *Family Assistance Law* and may be disclosed to other persons/authorities where authorised by the *Education and Care Services National Law* or other legislation; and
7. I am aware that I may be subject to penalties under the *Education and Care Services National Law* if I provide false or misleading information in this form.
8. I agree that the regulatory authority may serve a notice under the National Law using the contact details provided in this application, including the postal, street or email address or fax number (in accordance with section 293 of the National Law).

If you need assistance changing the status of your service in NQAITs, or if you have any questions about your service operation, you can always contact the Information and Enquiries team on 1800 619 113 or by emailing ececd@det.nsw.edu.au