

COMMUNITY CHILD CARE FUND RESTRICTED GRANT:

Work Health and Safety notifiable incident form

Use this online form to immediately notify us of a serious Work Health and Safety (WHS) incident. However, please note your obligation to first report an incident to your WHS state or territory regulator.

You can also email us copies of reports and other documents as soon as they become available to the **CCCF restricted grant inbox** (CCCFRestricted@education.gov.au).

All form fields within this form should be considered mandatory.

Provider name

Service name	
Address	
Name of contact person/notifier	
Phone number	Email
Date of the WHS incident	Date incident was reported to the WHS regulator
 Are you notifying us about a CC Yes No 	OVID-19 work-related incident you have reported to your WHS regulator?

If **YES**, provide details of your notification to the WHS regulator. If you need more space, write the details in a separate document and attach it as instructed in point 5 below.

If **NO**, provide as much information you can below - immediately, or as soon as possible after you have reported the incident to the WHS regulator.

2.	Describe the	circumstances	surrounding	the inc	cident. P	lease cover:

- what happened
- why/how it happened
- what you are doing, or going to do, to prevent it happening again.

If you need more space, write the details in a separate document and attach it as instructed in point 5 below.

${\it 3. \ \ \, Email us a copy of the report you sent to your state/territory WHS regulator.}\\$

• If the report is available now, you can attach it to the email generated when you click **SUBMIT** below, or if you get the report later, submit it the <u>CCCF restricted grant inbox</u> once available.

4. Is the WHS regulator investigating incident?

Yes No

If **YES**, email the <u>CCCF restricted grant inbox</u> with a copy of the results of this as soon as it is available. Include your full name in your email.

5. Email us any supporting documents.

• Attach any supporting documents to the email generated when you click **SUBMIT** below, or submit to the <u>CCCF restricted grant inbox</u> when avaliable.

To use the submit button above, this form must be viewed in Acrobat Reader. It is available as a free download from the **Adobe website**.

Alternatively, complete, download and email the form directly to the **CCCF restricted grant inbox**.