

Notification of a Critical Incident

(Completed by Executive Officer in consultation with Principal or delegate)

Incident #	IN15023	
Status of incident (Critical/Non-Critical)	Critical Incident- File ref: 2015/01773	
Type of incident (violence, fire/smoke, etc)	weapons, blades and other sharp instruments	If other provide further details: [REDACTED]
Network	Tuggeranong Network	
School	[REDACTED]	
Date of incident	[REDACTED] 2015	
Time of Incident	[REDACTED]	
Principal	[REDACTED]	
Reporting Officer's name & position	[REDACTED] Deputy Principal	
What occurred? (Dot point order of events succinctly)	<ul style="list-style-type: none"> • At approximately [REDACTED] staff were alerted [REDACTED] that a [REDACTED] student [REDACTED] • [REDACTED] • [REDACTED] • At approximately [REDACTED] the Police were called, as were [REDACTED] and an ambulance. • Police [REDACTED] • Police made the decision to [REDACTED] • Ambulance arrived, [REDACTED] • [REDACTED] • Support has been offered to [REDACTED] [REDACTED] have also been notified of the events. • The school, [REDACTED] will develop a plan prior to [REDACTED] • The school will remain in contact with [REDACTED] • Staff involved have been offered EAP support. 	
Any injuries?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Details: [REDACTED]
Police involvement?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Details: Yes, attended site
Other emergency services? <small>If yes, which service?</small>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Details: Ambulance attended [REDACTED]
Has counselling been organised /provided?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Details: To students and staff involved
Parents contacted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Details: [REDACTED] contacted.
Schools Network Leader – Stephen Gwilliam Method of clearance: Verbal	Date cleared – [REDACTED] 2015	
Date to SPA and ETD Media & Communications		
Senior Policy Advisor to complete		
Deputy Director-General clearance (signature) Date cleared		
Incident Status Confirmed	Yes <input type="checkbox"/> No <input type="checkbox"/>	Page 1

Further Distribution to:	
For critical incidents only - date sent to Minister's Office	