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Out-of-Home Care Therapeutic Support Practitioner
Movement Therapeutic Support Services

MOVEMENT
THERAPEUTIC SUPPORT SERVICES

Child-Focused Complaints & Reporting Procedure

Movement Therapeutic Support Services
Non-Clinical Therapeutic Support for children living in Out-of-Home Care, Queensland

Document Information	
Policy Title	Child-Focused Complaints & Reporting Procedure
Organisation	Movement Therapeutic Support Services (sole trader)
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Approved By	Principal Practitioner
Applicable Legislation	Child Safe Organisations Act 2024 (Qld); Child Protection Act 1999 (Qld); Working with Children Check Act 2000 (Qld)

1. Purpose

This procedure sets out how Movement Therapeutic Support Services ("the Practice") receives, responds to, and learns from complaints, concerns, disclosures and allegations of harm involving a child or young person. It is designed to be transparent, accessible, trauma-informed, and to empower children and young people to speak up safely, knowing they will be taken seriously.

This procedure gives effect to Standard 6 (Processes to respond to complaints and concerns are child-focused) of Queensland's Child Safe Standards under the Child Safe Organisations Act 2024 (Qld), and should be read together with the Practice's Child Safety & Wellbeing Policy, Code of Conduct, and Privacy Policy.

2. Scope

This procedure applies to complaints or concerns raised by, or on behalf of, a child or young person receiving services from the Practice, and to complaints raised by carers, case managers, schools, or other stakeholders about the conduct of the Principal Practitioner or any personnel engaged by the Practice. It covers concerns, suspicions, disclosures, and allegations of harm, as well as complaints about breaches of the Practice's Code of Conduct or general service quality.

3. Our Commitment

- Every complaint or concern is taken seriously, responded to promptly, and treated with respect.
- Children and young people are believed, listened to, and kept informed in a way that suits their age and understanding.
- The process is trauma-informed: no child will be made to repeat their account unnecessarily, and support is offered throughout.
- Confidentiality is respected as far as possible, while recognising that some information must be shared to keep a child safe or to meet legal obligations.
- There is no retaliation, or perception of retaliation, against anyone who raises a concern in good faith.
- Processes are culturally safe and responsive, consistent with the Universal Principle for Aboriginal and Torres Strait Islander children under the Child Safe Organisations Act 2024 (Qld).

4. Legislative & Policy Context

This procedure is informed by:

- the Child Safe Organisations Act 2024 (Qld), including the 10 Child Safe Standards and the Universal Principle;
- Queensland's Reportable Conduct Scheme, which commenced on 1 July 2026 and governs how allegations of reportable conduct by workers are notified and managed;
- the Child Protection Act 1999 (Qld), including mandatory reporting obligations;
- the Working with Children Check Act 2000 (Qld) (Blue Card);
- the Privacy Act 1988 (Cth) and the Australian Privacy Principles.

5. Who Can Raise a Concern

A complaint, concern, disclosure or report can be made by:

- a child or young person receiving services from the Practice;
- a foster or kinship carer, family member, or support person;
- a Child Safety Officer, case manager, or other professional involved with the child;
- a school or education provider;
- any other person who has a concern about the safety or wellbeing of a child, or about the conduct of the Principal Practitioner or Practice personnel.

A concern can be raised anonymously. Anonymous concerns will be taken just as seriously, though the Practice's ability to follow up or provide feedback may be limited without contact details.

6. What Can Be Reported

- A concern or worry about a child's safety, wellbeing, or a change in their behaviour.
- A suspicion that a child has been, or is at risk of being, harmed (including by someone outside the Practice).
- A disclosure made by a child about harm they have experienced.
- An allegation that the Principal Practitioner or any engaged personnel has breached the Code of Conduct or acted inappropriately towards a child.

- A complaint about the quality, cultural safety, or appropriateness of a service provided.
- Feedback or suggestions about how the Practice could do better in keeping children safe.

7. How to Raise a Concern

Concerns can be raised in whatever way feels safest and most comfortable. This includes:

- Telling Heather directly, in person, during a session or visit — in words, drawing, or however feels easiest.
- Asking a trusted adult (a carer, teacher, or case manager) to pass the concern on.
- Phone: 0424546181
- Email: movementtherapeuticss@outlook.com
- In writing, given to Heather
- Through the child's Child Safety Officer or case manager, who can raise it with the Practice directly.

Because the Practice is a sole trader operation, there is no separate internal manager to escalate to. Where a concern is about the Principal Practitioner herself, or where a child or carer does not feel comfortable raising it directly with her, concerns can instead be raised with any of the external contacts listed in Section 10.

8. What Happens When a Concern Is Raised

8.1 Immediate Safety

If there is any immediate risk to a child's safety, the Practice will act immediately to protect the child, including contacting Queensland Police Service (000 in an emergency) and the child's Child Safety Officer or case manager, ahead of any other step in this procedure.

8.2 Response Timeline

Timeframe	Action
Immediately	Listen to the child or person raising the concern without judgement. Do not promise confidentiality that cannot be kept. Take action immediately if there is any immediate safety risk.
Within 24 hours	Acknowledge receipt of the concern to the person who raised it (where contact details are available), and record the concern in the Movement Incident Register.
Within 3 business days	Assess the concern, determine whether a Mandatory Notification or Reportable Conduct notification is required (see Sections 9 and 10), and advise the child's Child Safety Officer or case manager where appropriate.
Within 10 business days	Complete the assessment or investigation of the concern (where practicable) and communicate the outcome, in an age-appropriate way, to the child and relevant stakeholders.
Ongoing	Check in with the child to make sure they feel safe and supported, and confirm they know what has happened as a result of speaking up.

8.3 Trauma-Informed Practice

Wherever possible, a child will not be asked to repeat their account of what happened multiple times. Information will be gathered sensitively, at the child's pace, using age-appropriate language, and with a trusted support person present if the child wishes. No child will be made to feel blamed or disbelieved.

8.4 Cultural Safety

For Aboriginal and Torres Strait Islander children and young people, the Practice will, where appropriate and with the child's and family's agreement, involve a cultural support person in the complaints process to ensure it is culturally safe and responsive.

9. Interaction with Mandatory Reporting

Any person may report a concern about a child to Child Safety under section 13A of the Child Protection Act 1999 (Qld). The Practice requires the Principal Practitioner to make such a Mandatory Notification whenever the threshold set out in the Child Safety & Wellbeing Policy is met, regardless of the outcome of any complaint investigation and regardless of whether the child, carer, or referring agency consents. This is a standard the Practice imposes on itself. A person who gives information about alleged harm or risk of harm in good faith is protected from liability by section 197A of the Child Protection Act 1999 (Qld), and the identity of a notifier is protected by section 186A.

10. Concerns About the Principal Practitioner or Personnel (Reportable Conduct)

Since 1 July 2026, Queensland's Reportable Conduct Scheme requires certain organisations to notify and investigate allegations of reportable conduct — broadly, sexual or physical abuse, significant neglect, or serious misconduct involving a child — by their workers. As a sole trader without an internal disciplinary structure, the Practice manages allegations against the Principal Practitioner or any engaged personnel by referring them directly to the appropriate external body rather than self-investigating:

- Blue Card Services (Working with Children Check regulator) — for concerns affecting a person's suitability to work with children: 07 3211 6999 or blue-card.qld.gov.au
- Queensland Police Service — for any concern that may involve a criminal offence: 000 (emergency) or 131 444 (non-emergency)
- Department of Families, Seniors, Disability Services and Child Safety — for concerns about a specific child's safety: contact the Regional Intake Service for the child's region during business hours, or the Child Safety After Hours Service Centre on 1800 177 135 outside business hours and on weekends (24 hours, 7 days)
- Queensland Family and Child Commission (QFCC) — the regulator for the Child Safe Standards and Reportable Conduct Scheme: qfcc.qld.gov.au
- The Client's own Authorised Representative or complaints process, where services are delivered under a Service Agreement with an agency.

The Practice will not investigate an allegation against itself. Instead, the Principal Practitioner will cooperate fully with whichever external body takes carriage of the matter, and will comply with any resulting conditions, including possible suspension of services to the child concerned pending the outcome.

Allegations Concerning the Practitioner

If an allegation is made about the Practitioner, the following obligations apply under the Child Safe Organisations Act 2024 (Qld):

- The Practitioner must give the Commission an initial report within three business days of becoming aware of the allegation.

- The Practitioner must ensure an investigation is conducted. If the Practitioner is not reasonably able to investigate because the allegation concerns them, they are not required to do so. In that situation, they must notify the Commission and explain why they cannot investigate.
- Any worker who becomes aware of an allegation about the Practitioner must report it directly to the Commission rather than to the Practitioner.
- The Commission may investigate the allegation on its own initiative.
- For the purposes of the Act, the Practitioner is a worker of their own entity.

11. Support for the Person Raising a Concern

- The child will be told, in age-appropriate language, what will happen next and roughly how long it will take.
- The child may have a support person of their choosing present during any conversation about the concern, where appropriate.
- Carers and families will be kept informed as the matter progresses, subject to the confidentiality and privacy considerations in Section 12.
- No child, carer, or staff member will be penalised, treated differently, or retaliated against for raising a concern in good faith.

12. Confidentiality & Information Sharing

Information about a complaint or concern will only be shared with those who have a legitimate need to know — for example, the child's Child Safety Officer or case manager, or an external authority such as those listed in Section 10. The Practice will not promise a child complete confidentiality where sharing information is necessary to keep them, or another child, safe. All records are handled in accordance with the Practice's Privacy Policy.

13. Recordkeeping

Every concern, complaint, disclosure or allegation — regardless of how minor it may seem — will be recorded in the Practice's Movement Incident Register, including: the date and nature of the concern; who raised it; the steps taken in response; any notifications made to external bodies; and the outcome. Records are retained for a minimum of seven years, or until the child turns 25, whichever is later, consistent with the Practice's Record Management & Retention Policy.

14. Review & Continuous Improvement

- This procedure is reviewed at least annually, and after any significant complaint or incident, to identify opportunities for improvement.
- Where appropriate and safe to do so, feedback from children and families about their experience of the complaints process will be sought and used to improve this procedure.
- Changes to relevant legislation, including updates to the Child Safe Organisations Act 2024 (Qld) or the Reportable Conduct Scheme, will be reflected in this procedure as soon as practicable.

15. Related Documents

- Child Safety & Wellbeing Policy
- Code of Conduct

- Movement Incident Register
- Privacy Policy
- Record Management & Retention Policy

Practitioner Signature

Heather Russell | Out-of-Home Care Therapeutic Support Practitioner | Movement Therapeutic Support Services

Signature:  Date: 03/09/26

APPENDIX A

A Guide for Children & Young People — in plain language

If something doesn't feel right, you can tell someone.

You have the right to feel safe. If something happens that worries you, upsets you, or doesn't feel right — with Heather, or with anyone else — you can talk about it. You won't get in trouble for speaking up.

You can tell:

- ★ Heather, in person — you can talk, draw, write it down, or show her however feels easiest.
- ★ A carer, teacher, or your case worker — they can help you tell Heather, or someone else.
- ★ You can call or text: 0467457123
- ★ You can email: movementtherapeuticss@outlook.com
- ★ If you don't want to tell Heather, that's okay. You can tell your case worker, or you can call Child Safety yourself on 1800 177 135. Someone answers that number any time, day or night, including weekends.

What happens next?

- ★ Someone will listen to you and take you seriously.
- ★ You won't have to keep telling the story over and over.
- ★ An adult you trust can be with you while you talk, if you want.
- ★ We will tell you what is going to happen, and check in with you to make sure you feel okay.
- ★ If you are in danger right now, call 000.

Remember

It is never your fault. You did the right thing by speaking up. You have the right to feel safe, and you are allowed to keep telling people until someone listens.

APPENDIX B

Compliance Mapping Table: Queensland Legislative Requirements

1. Child Safe Organisations Act 2024 (Qld)

Legislative Requirement	Where This Procedure Meets It
Standard 6 – Child-focused complaints processes	Section 1: this procedure gives effect to Standard 6; Section 3: child-centred, trauma-informed commitments; Section 7: multiple child-friendly reporting pathways; Section 8: clear timelines; Appendix A: plain-language guide for children.
Accessible, child-friendly reporting options	Section 7: verbal, drawing, writing, email, phone, via trusted adult; Appendix A: simplified instructions for children.
Trauma-informed responses	Section 3: "no child will be made to repeat their account unnecessarily"; Section 8.3: sensitive, paced information gathering.
Cultural safety for Aboriginal and Torres Strait Islander children	Section 3: commitment to cultural safety; Section 8.4: involvement of cultural support persons.
No retaliation for raising concerns	Section 3: "no retaliation"; Section 11: "no child, carer, or staff member will be penalised…"
Clear, transparent processes	Section 8: detailed response timeline; Section 12: confidentiality rules; Section 13: record-keeping.
Continuous improvement	Section 14: annual review and post-incident review.

2. Reportable Conduct Scheme (Qld), commenced 1 July 2026

Legislative Requirement	Where This Procedure Meets It
Notify QFCC of reportable conduct allegations	Section 10: identifies QFCC as the regulator and directs allegations to external bodies.
Timely assessment and notification (within 3 business days)	Section 10 (Allegations Concerning the Practitioner): the Practitioner gives the Commission an initial report within three business days of becoming aware of the allegation (s 34(2)); an interim or final report follows within thirty business days (s 34(3)).
Investigation obligations	Section 10: the Principal Practitioner does not investigate an allegation against herself, notifies the Commission and gives it her reasons why she cannot reasonably investigate (s 36(2)).
Cooperation with external bodies	Section 10: "The Principal Practitioner will cooperate fully with whichever external body takes carriage of the matter…"
Child safety during investigations	Section 10: suspension of services if required; Section 8.1: immediate safety actions.
Record-keeping of allegations and outcomes	Section 13: Movement Incident Register, notifications, outcomes retained for minimum periods.

3. Child Protection Act 1999 (Qld)

Legislative Requirement	Where This Procedure Meets It
Mandatory reporting of significant harm	Section 9: "Where a concern… gives rise to a reasonable suspicion… a Mandatory Notification… will be made."
Mandatory reporting regardless of consent	Section 9: "regardless of whether the child, carer, or referring agency consents."
Immediate action where a child is at risk	Section 8.1: immediate safety response including contacting QPS and Child Safety.
Information sharing with Child Safety	Section 8.2 and Section 12: sharing information with Child Safety Officers as required.

4. Working with Children Check Act 2000 (Qld)

Legislative Requirement	Where This Procedure Meets It
Report concerns affecting suitability to work with children	Section 10: directs concerns to Blue Card Services.
Risk-management approach to child safety	Sections 3, 7, 8, 11, 12: child-focused, trauma-informed, culturally safe, and protective processes.
Clear conduct expectations	Section 6: breaches of Code of Conduct included; Section 10: external referral for misconduct.

5. Privacy Act 1988 (Cth)

Legislative Requirement	Where This Procedure Meets It
Collect, store, and use information lawfully	Section 12: information shared only with those who "need to know"; Section 13: structured record-keeping.
Explain limits of confidentiality to children	Section 3: "Confidentiality is respected… while recognising some information must be shared…"; Section 11: children told what will happen next.
Retention and secure storage of records	Section 13: minimum retention periods consistent with the Record Management & Retention Policy.

6. General Child Safety Governance Requirements

Legislative Requirement	Where This Procedure Meets It
Clear scope and applicability	Section 2: defines who the procedure applies to.
Multiple reporting pathways including external escalation	Section 7 and Section 10: internal and external options.

Legislative Requirement	Where This Procedure Meets It
Age-appropriate communication	Section 3 and Appendix A: child-friendly language and processes.
Feedback loops and transparency	Section 8.2 and Section 11: acknowledgement, updates, outcome communication.
Continuous improvement and review	Section 14: annual review and post-incident review.