

Karate & Dance Fed Ltd - 17150545

Chief Executive Officer: Mr. J Byrne



Physical Touch & Appropriate Contact Policy

Kindness – Diversity - Friendship

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1. Policy Statement

Karate & Dance Federation Ltd (KDF) recognises that appropriate physical contact is a normal and sometimes necessary part of working with children and young people in karate, dance, Early Years provision, SEND-inclusive activity, first aid, emotional support and emergency situations.

Physical contact must always have a clear and legitimate purpose, remain proportionate to the circumstances and be consistent with safeguarding, dignity, professional boundaries and the individual student's needs. Appropriate touch should never be secretive, sexualised, punitive, humiliating or used for an adult's own emotional needs.

KDF also recognises that there will be occasions when a child needs to be physically lifted, carried or picked up. This may be necessary because of age, injury, immediate danger, disability, distress, fatigue, environmental risk or another legitimate welfare reason. Picking up a child is not prohibited where it is necessary and appropriate, but it must be undertaken safely, transparently and only for as long as reasonably required.

KDF's approach reflects its values of Kindness, Diversity, Friendship and supports the KDF Promise: Every Student, Every Session, Every Time.

2. Purpose

The purpose of this policy is to establish clear expectations for appropriate physical contact between KDF staff, volunteers and students.

It explains when touch may be appropriate, how consent and communication should be approached, how physical contact is used in karate and dance instruction, when comforting contact may be suitable, when children may be picked up or carried, how physical intervention differs from routine touch and how concerns about inappropriate contact must be reported.

The policy aims to protect children from inappropriate contact while ensuring staff are not so fearful of touch that they fail to provide reasonable care, instruction, reassurance or immediate safety assistance.

3. Scope

This policy applies to all directors, employees, coaches, assistant coaches, administrators, volunteers, junior coaches, young leaders and other persons acting on behalf of KDF.

It applies during KDF Karate, KDF Dance, Early Years provision, SEND-inclusive sessions, performances, gradings, events, external activities, first aid and any other situation in which physical contact may reasonably occur.

Relevant sections also apply to adult students, with appropriate recognition of adult autonomy and consent.

4. Safeguarding Principles

Physical contact must always be considered in context. Contact that is entirely appropriate in one situation may be inappropriate in another.

Staff should be able to explain why contact was necessary, what they were trying to achieve and why the type and duration of contact were proportionate.

Where there is a safer and equally effective non-contact alternative, staff should consider using it, but KDF does not require staff to avoid all touch where appropriate contact supports learning, safety or welfare.

5. Appropriate Touch

Appropriate touch is physical contact that has a legitimate purpose connected to teaching, safety, welfare, first aid, emotional support or participation.

Examples may include guiding a student's arm during a technique, correcting posture, supporting balance, helping a young child put on equipment, providing first aid, reassuring a distressed child or moving a child away from immediate danger.

Appropriate touch should normally be brief, purposeful and professionally appropriate.

6. Inappropriate Touch

Inappropriate touch includes contact that is sexualised, unnecessary, secretive, degrading, punitive or unrelated to a legitimate professional purpose.

It also includes touching intimate areas without a genuine medical, care or emergency reason, prolonged physical closeness that is not appropriate to the situation, deliberately ignoring a child's clear discomfort or using touch to establish favouritism or dependency.

Any concern about inappropriate touch must be reported under KDF safeguarding procedures.

7. Consent and Communication

Where practicable, staff should explain physical contact before it occurs, particularly when adjusting posture, demonstrating technique or providing non-urgent support.

Simple phrases such as "Can I move your arm slightly?" or "I'm going to support your shoulder while you balance" can help students understand what is happening.

Consent should be respected wherever possible. A student who does not want routine instructional touch should be offered an alternative method where this can be done safely.

8. Children Who Cannot Easily Express Consent

Some younger children or students with SEND may not communicate consent verbally.

Staff should therefore observe body language, facial expression, withdrawal, distress or other signs of discomfort and adjust accordingly.

Where regular physical support is required, staff should understand the student's known preferences and agreed support arrangements.

9. Student Choice and Bodily Autonomy

KDF will support children to understand that their body belongs to them and that they may express discomfort about touch.

This principle does not mean a child can prevent necessary emergency intervention where immediate safety is at risk, but ordinary contact should respect the student's preferences wherever reasonably practicable.

Staff should avoid language suggesting that a child must accept physical affection or contact simply because an adult intends it kindly.

10. Physical Contact in Karate

Karate instruction may legitimately involve physical contact for demonstration, partner work, pad work, positioning, controlled sparring and technical correction.

Staff must ensure that contact remains relevant to the skill being taught and does not become unnecessarily prolonged or intrusive.

Where a correction can be demonstrated visually or verbally, staff may use that approach where appropriate, particularly if a student appears uncomfortable with touch.

11. Physical Contact in Dance

Dance instruction may involve physical guidance for posture, alignment, balance, positioning, partnering and safe movement.

Staff should explain corrections where appropriate and use the minimum contact necessary to support the movement.

Any contact around sensitive areas must be carefully considered and avoided where a safer instructional method is available.

12. Demonstration With Students

Students should not routinely be selected for demonstrations in a way that makes them uncomfortable.

Where demonstration involves close physical contact, the coach should explain what will happen and seek appropriate agreement.

The student should be able to decline without humiliation.

13. Partner Work

Partner work is a normal element of both karate and dance.

Staff should monitor whether students are comfortable working together and should intervene where contact becomes rough, inappropriate or unwanted.

Students should understand that consent and respect apply during partner work as well as adult-led instruction.

14. Early Years Provision

Early Years students may require more physical assistance because of age, confidence, balance, emotional regulation and limited independence.

Staff may appropriately help with equipment, support movement, hold a hand, provide reassurance or lift a child where necessary.

Physical support should remain warm and caring while retaining professional boundaries.

15. SEND Support

Some SEND students may require additional physical prompting, guidance or regulation support.

Any recurring support should be proportionate to the student's needs and, where significant, reflected in an individual support plan.

Staff should avoid assuming that a disabled child automatically requires more touch than other students.

16. Comforting a Distressed Child

A distressed child may seek reassurance through physical contact, such as holding a hand, brief side contact or a hug.

Staff should respond in a manner appropriate to the child's age, circumstances and known preferences.

Where a child initiates a brief hug, this does not automatically make the contact inappropriate. Staff should keep the response proportionate and professional rather than rejecting the child abruptly.

17. Hugs

Hugs may be appropriate in some circumstances, particularly with younger children or where a child is distressed, celebrating an achievement or initiating brief affectionate contact.

Staff should avoid prolonged, secretive or overly intimate embraces.

Where possible, contact should remain observable and consistent with the professional relationship.

18. Holding Hands

Holding a child's hand may be appropriate for reassurance, transition, safety, navigation through busy areas or support for a younger child.

It may also be used where a child requests it for confidence or regulation.

Hand-holding should not be forced where unnecessary.

19. Sitting Close to Students

There may be occasions when staff sit beside or near a child to provide reassurance, sensory support or quiet conversation.

Staff should avoid unnecessarily positioning children on their lap, particularly older children, where an alternative seating arrangement is available.

With very young children, brief lap contact may occasionally occur naturally, but should remain appropriate, observable and not become routine where other support is available.

20. Picking Up Children

KDF permits staff to pick up or lift a child where there is a legitimate and proportionate reason to do so.

This may include moving a young child away from immediate danger, helping after a minor fall, supporting an Early Years child who cannot safely move independently, responding to significant distress, assisting a child with mobility needs or transferring a child where this forms part of an agreed support arrangement.

Picking up a child should never be used as punishment, intimidation or a method of forcing ordinary compliance.

21. Picking Up a Distressed Child

A young child who is highly distressed may sometimes seek to be picked up or carried by a trusted adult.

Where this is appropriate, safe and genuinely supportive, staff may do so for a short period while helping the child regulate.

The child should be put down when they are ready and safe to do so, and staff should avoid unnecessarily prolonging the contact.

22. Picking Up a Child for Immediate Safety

Where a child is at immediate risk of harm, staff may lift or carry them away from danger if this is the safest reasonable option.

Examples may include moving a young child away from a doorway, vehicle movement, hazardous area, aggressive incident or unsafe equipment.

Immediate safety takes priority over obtaining advance consent where delay would expose the child to harm.

23. Picking Up a Child Following Injury

Where a child is injured, staff should not automatically lift or carry them if spinal, head, neck, hip or other serious injury is suspected.

The First Aid & Emergency Medical Response Policy should be followed and unnecessary movement avoided.

Where the injury is minor and the child can safely be assisted or carried, staff may provide appropriate support.

24. Manual Handling Considerations

Lifting or carrying a child creates manual handling considerations as well as safeguarding considerations.

Staff should avoid attempting to lift a child where the person's weight, movement, behaviour or physical condition makes the lift unsafe.

Where regular transfer support is required, an individual handling plan and suitable training may be necessary.

25. Two-Person Assistance

Where a child requires significant physical assistance and one-person handling would be unsafe, two trained or suitable adults should assist where practicable.

Staff should not improvise risky lifts simply because the child needs to be moved quickly where no immediate danger exists.

Appropriate equipment or specialist advice may be required for recurring transfer needs.

26. Carrying Children

Where carrying is necessary, staff should support the child securely and avoid positions that create unnecessary intimacy or risk.

The child should be carried only for the shortest reasonable period and set down in a safe place once the immediate need has passed.

Staff should avoid carrying older or heavier children unless there is a clear safety or care need and it can be done safely.

27. Picking Up Children Who Resist

A child who actively resists being picked up should not ordinarily be lifted unless immediate safety requires it.

Forcing a struggling child into a carry can increase injury risk to both the child and adult.

Where the issue is ordinary refusal or non-compliance rather than immediate danger, staff should use behaviour-management and de-escalation approaches instead.

28. Physical Contact During Dysregulation

A dysregulated child may seek or reject physical contact.

Staff should use known support strategies and avoid assuming that touch will always calm the student.

Where contact increases distress, staff should provide space unless immediate safety requires intervention.

29. Sensory Seeking and Deep Pressure

Some students may seek sensory input such as pressure, weighted items or firm contact.

Staff should only provide direct sensory contact where this is understood, appropriate and within agreed support arrangements.

Specialist sensory strategies should not be improvised without sufficient understanding of the child's needs.

30. Physical Contact During First Aid

First aid may require direct physical contact, including contact close to ordinarily private areas depending on the injury.

Staff should explain what they are doing wherever possible, preserve dignity and expose only the minimum area necessary.

Where feasible, another adult may be present during more sensitive treatment, but urgent care must not be delayed unnecessarily.

31. Intimate Care

KDF does not routinely provide intimate care.

Where a child requires assistance with toileting, changing or another intimate need because of age, disability or medical circumstances, the support must be handled under appropriate individual arrangements and safeguarding principles.

Staff should preserve privacy while ensuring adequate accountability and must not undertake intimate care beyond their competence or agreed role.

32. Changing Clothes and Uniform Assistance

Younger children may occasionally require assistance with clothing, shoes, protective equipment or costume.

Staff should provide only the level of help reasonably necessary and should encourage independence where appropriate.

Assistance involving more intimate changing should follow enhanced privacy and safeguarding arrangements.

33. Physical Contact in Emergencies

Emergency situations may require physical contact that would not ordinarily be necessary.

Examples include providing CPR, preventing a child entering danger, moving someone from an immediate hazard or assisting during evacuation.

Staff acting reasonably and in good faith to protect life or immediate safety will be supported.

34. Physical Intervention to Prevent Harm

Physical intervention is distinct from ordinary appropriate touch.

It may only be used where reasonably necessary to prevent immediate harm and should use the minimum force for the shortest time required.

It must not be used to force ordinary compliance, punish a student or resolve minor disruption.

35. Restrictive Physical Intervention

Where staff physically restrict a child's movement to prevent immediate harm, the incident should be treated seriously.

The intervention should stop as soon as the immediate risk reduces.

Significant interventions must be recorded and reviewed under KDF's Aggressive, Volatile & Challenging Behaviour Policy.

36. Prohibited Physical Practices

KDF prohibits corporal punishment, deliberately inflicting pain, choking, neck holds, punitive restraint, slapping, shaking, dragging or any physical action intended to humiliate or frighten a child.

Children must not be physically forced into splits, stretches, kicks, positions or movements beyond safe and reasonable coaching practice.

Physical contact must never be retaliatory.

37. Physical Contact and Discipline

Touch must not be used to punish a student.

Staff should not grab, shove, pull or physically reposition a child in anger because they are not listening or following instructions.

Where behaviour is difficult, KDF's Behaviour Management Policy should be followed.

38. Safeguarding Visibility

Appropriate touch should ordinarily be observable and capable of being explained openly.

Staff should avoid unnecessary contact in secluded or hidden areas.

Where privacy is necessary for first aid or personal support, safeguarding accountability should still be maintained.

39. One-to-One Situations

Physical contact during one-to-one coaching or support requires particular professional awareness.

The same standards apply as in group situations, but staff should ensure the environment remains appropriately observable or accessible.

One-to-one status is not a reason to avoid legitimate physical instruction, but it increases the importance of transparency.

40. Junior Coaches and Young Leaders

Junior coaches and young leaders may use ordinary age-appropriate instructional contact under adult supervision.

They should not be expected to carry out intimate care, significant physical intervention or complex lifting of students.

Where a situation escalates or requires physical management, an adult member of staff should take responsibility.

41. Staff-to-Staff Physical Boundaries Around Children

Staff should also model appropriate professional boundaries in their own physical interactions while children are present.

Sexualised, excessively intimate or otherwise inappropriate conduct between adults in front of students undermines safeguarding culture.

KDF staff should demonstrate respectful and professional behaviour consistently.

42. Parents and Visitors

Parents and visitors should not use unnecessary physical contact with children who are not in their care.

Where a parent intervenes physically with another child during a dispute, staff should step in and manage the situation.

Any inappropriate adult-child contact should be reported through safeguarding procedures.

43. Photography and Touch

Staff should be particularly mindful of how physical contact may appear in photographs or videos.

Legitimate coaching contact can be misunderstood when captured without context, so images should be selected carefully and should not unnecessarily focus on close physical positioning.

KDF's Online Safety, Photography, Filming & Digital Communication Policy should be followed.

44. Student-on-Student Touch

Peer contact is normal in karate and dance but must remain within the boundaries of the supervised activity.

Students should understand that they may not use training as an excuse for unwanted touching, roughness, sexualised behaviour or deliberate aggression.

Staff should intervene where contact becomes inappropriate or unsafe.

45. Sexualised Behaviour

Any sexualised touching, grooming behaviour or inappropriate physical contact by an adult toward a child must be treated as a safeguarding concern.

Staff must not attempt to manage potentially abusive contact solely as a conduct issue.

Concerns should be escalated immediately under KDF's safeguarding and allegations procedures.

46. Reporting Concerns About Adult Contact

Any staff member, volunteer, student or parent may report a concern about physical contact.

A concern should not be dismissed simply because the adult says the contact was intended to be helpful.

The Safeguarding Lead should consider context, necessity, proportionality, the student's response and any previous concerns.

47. Low-Level Concerns

Some contact may not meet the allegation threshold but may still be inconsistent with expected professional boundaries.

Examples may include repeated unnecessary hugging, excessive physical familiarity, repeatedly positioning a child on an adult's lap or unnecessary close contact.

Such concerns should be considered under KDF's Allegations & Low-Level Concerns About Adults Policy.

48. Allegations of Harm

Where physical contact may have harmed a child, may amount to an offence or may indicate that an adult poses a risk to children, the concern must be escalated under KDF's safeguarding allegation procedure.

KDF should seek appropriate LADO, children's social care or police advice where required.

Internal fact-finding must not compromise an external safeguarding investigation.

49. Recording Significant Contact

Routine appropriate coaching contact does not require individual recording.

However, significant or unusual physical contact should be recorded where this supports transparency, particularly where a child was carried during a crisis, significant physical intervention occurred, injury resulted or the student became distressed by the contact.

Records should be factual and proportionate.

50. Recording When a Child Is Picked Up

Picking up a young child briefly for ordinary welfare or reassurance does not normally require a formal incident record.

A record should be made where the child was lifted because of significant behavioural escalation, emergency danger, injury, physical intervention, unusual distress or where the circumstances could reasonably lead to concern or misunderstanding.

Where in doubt, staff should record and notify an appropriate senior person.

51. Parent Communication

Parents or guardians do not need to be informed every time ordinary appropriate instructional contact occurs.

They should normally be informed where significant physical intervention, injury-related carrying, unusual distress or another significant physical-contact incident occurs.

Communication should be factual and should explain the purpose of the contact.

52. Individual Physical Support Plans

Where a student regularly requires lifting, transfer assistance, significant physical prompting or other recurring physical support, KDF should consider an individual support or handling plan.

The plan should identify what assistance is required, what the student prefers, who may provide the support and any relevant manual-handling or safeguarding considerations.

The plan should be reviewed where needs change.

53. Disability and Reasonable Adjustments

Some disabled students may require more physical assistance to participate safely.

KDF will consider reasonable adjustments while protecting dignity and independence.

Support should be based on actual individual need rather than assumptions about disability.

54. Cultural and Religious Considerations

Some students or families may have cultural or religious preferences concerning physical contact.

KDF will respect these preferences where reasonably practicable and compatible with safe participation.

Where a particular adjustment affects essential instructional or safety requirements, KDF should discuss alternative approaches with the family.

55. Gender Considerations

KDF does not operate a blanket rule that physical contact must only occur between people of the same sex.

Appropriate professional contact should be determined by purpose, consent, safeguarding and individual preference.

Where a student expresses discomfort with a particular arrangement, reasonable alternatives should be considered.

56. Medical Conditions

Some medical conditions may make particular forms of touch painful, unsafe or inappropriate.

Relevant healthcare information should therefore be considered before physical support is provided.

Staff should not manipulate injured joints, perform medical procedures or provide physical treatment beyond their competence.

57. Injury Prevention

Coaches should use physical correction only within safe biomechanical limits.

Students must not be pushed, forced or held into flexibility positions beyond their comfortable safe range.

Pain should never be treated as evidence that a correction is working effectively.

58. Manual Handling and Safe Movement

Where moving a student is necessary, staff should consider their own safety as well as the child's.

Staff should avoid twisting, overreaching or attempting loads beyond their physical capability.

KDF's Manual Handling & Safe Movement of Equipment Policy should be applied alongside any individual handling arrangements where relevant.

59. Emergency Evacuation

Some children may require physical assistance during emergency evacuation.

Where necessary, staff may hold, guide, lift or carry a child to achieve immediate safety.

Fire or other immediate danger takes priority over ordinary consent and handling arrangements, although staff should still use the safest method reasonably available.

60. Missing or Running Child

Where a young or vulnerable child is attempting to run into danger, staff may physically prevent or move them where necessary to avoid immediate harm.

This should use the least restrictive intervention reasonably available.

Any significant intervention should be reviewed afterward to consider whether additional preventative arrangements are needed.

61. Aggressive Incidents

Where a child becomes physically aggressive, staff should prioritise de-escalation and distance where possible.

Picking up or carrying an actively struggling child should generally be avoided unless immediate danger makes it necessary because this can increase risk of injury.

The Aggressive, Volatile & Challenging Behaviour Policy should govern the wider response.

62. Retreats and Touch

Use of the Tiger Retreat or Leopard Retreat should not ordinarily require physical movement of a child by staff.

Students should normally be invited or supported to move there themselves.

A child must not be carried into the Retreat as punishment or forcibly placed there because they refuse an instruction.

63. Restorative Practice

Where a student becomes upset by physical contact or an incident involving touch, restorative discussion may be appropriate once the student is calm.

Staff should listen to how the contact felt from the student's perspective rather than assuming that good intentions automatically resolve the issue.

Where a safeguarding concern exists, restorative discussion must not replace formal reporting.

64. Complaints

Parents, guardians or students may raise concerns about physical contact through KDF's normal complaints or safeguarding procedures.

KDF will take concerns seriously while distinguishing between appropriate professional touch, boundary concerns and allegations of harm.

Staff should not be discouraged from appropriate care because a complaint has previously occurred, but learning from legitimate concerns should inform future practice.

65. Staff Support

Staff may feel anxious after an incident involving significant contact, especially where a child required carrying or physical intervention.

KDF should provide appropriate debrief and management support.

Support should reinforce professional learning without creating a culture in which staff are afraid to act when a child genuinely needs physical help.

66. Training

Relevant staff should receive safeguarding and professional-boundary training appropriate to their role.

Where staff regularly provide physical assistance, Early Years support, SEND support or physical intervention, additional training may be required.

Training should distinguish appropriate touch, safe lifting, emergency intervention and prohibited practices.

67. Monitoring Practice

Lead Coaches and senior staff should observe whether physical contact within sessions remains appropriate and proportionate.

Where coaching culture begins to normalise unnecessary handling or intrusive correction, this should be addressed through supervision and training.

Monitoring should also identify staff who appear excessively reluctant to provide legitimate support because they fear all physical contact.

68. Kindness

The KDF value of Kindness means using physical contact only to support, protect, reassure or teach appropriately.

It also means recognising when a distressed or young child genuinely needs the reassurance of a trusted adult.

Kindness requires both warmth and clear professional boundaries.

69. Diversity

The KDF value of Diversity means recognising that different students have different physical, sensory, cultural and communication needs.

Some students may seek appropriate contact while others strongly prefer personal space.

KDF will adapt support wherever reasonably practicable while maintaining safe and effective provision.

70. Friendship

The KDF value of Friendship means teaching students that respectful relationships include personal boundaries and consent.

Friendship does not create entitlement to another person's body.

Students should learn that they can be supportive while respecting when somebody does not want physical contact.

71. The KDF Promise

This policy supports the KDF Promise: Every Student, Every Session, Every Time.

Every student should receive the physical assistance they genuinely need without inappropriate contact, unnecessary restraint or avoidable embarrassment.

The Promise means staff will neither use touch carelessly nor avoid necessary physical support simply because safeguarding requires professional judgement.

72. Related Policies

This policy should be read alongside KDF's Safeguarding & Child Protection Policy, Safeguarding Roles, Reporting & Responding to Concerns Policy, Allegations & Low-Level Concerns About Adults Policy, Behaviour Management Policy, Aggressive, Volatile & Challenging Behaviour Policy, Staff Code of Conduct & Professional Standards, Professional Boundaries & Relationships Policy, SEND Policy, Early Years Policy, Disability & Reasonable Adjustments Policy, Medical Needs, Medication & Individual Healthcare Support Policy, First Aid & Emergency Medical Response Policy, Accident, Incident, Near-Miss & RIDDOR Policy and Manual Handling & Safe Movement of Equipment Policy.

These policies should be applied together where physical contact involves behaviour, safeguarding, first aid, disability, medical support, lifting, personal care or professional-boundary concerns.

73. Policy Review

This policy will normally be reviewed annually, but an earlier review will take place following a significant physical intervention, allegation concerning touch, serious injury, recurring need to carry or transfer a student, safeguarding audit or significant change in relevant guidance.

KDF will continue to support a balanced professional approach in which appropriate touch is not feared or unnecessarily prohibited, but every physical interaction remains purposeful, proportionate, respectful and capable of being explained openly.

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