

Child Safe Standards

GUIDELINES FOR PHYSICAL CONTACT WHEN WORKING WITH CHILDREN

There will be times when physical contact with children is necessary. Such contact should always be made in an appropriate manner.

What physical contact is appropriate?

The requirements of sports can vary significantly and contact which is appropriate in one sport may not be appropriate for another. However, it is widely recognised that in some situations appropriate physical contact is required to support an athlete or participant. These include:

- To provide guidance to develop a particular skill;
- To prevent an injury;
- To administer first aid or attending to an injured or unwell child;
- Assisting a child with a disability; or
- Comforting a child if they are in distress.

When physical contact is appropriate and required – it should NOT be 1:1:

If physical contact is appropriate and required in a particular situation, wherever possible, that physical contact should occur:

1. in view of the public;
- 2 in an open space; and
- 3 in clear sight of other adults.

For clarity, avoid all situations where one adult and one child are left alone together.

How should appropriate and required physical contact be undertaken?

1. Always seek permission from the child to touch them prior to any contact occurring. For example, "Can I move your forearm to adjust your technique?"
2. Be aware of and respect signs indicating the child is uncomfortable with physical contact. This may include limited eye contact or a step away from you.
3. Use words to accompany physical contact, explaining what you are doing and why.
4. Have a polite and respectful conversation with parents/guardians and children (especially teenagers) to ensure you are aware of any sensitivities specific to:
 - Children from diverse cultures; or
 - Children with a disability or medical condition.
5. If congratulating children, use non-intrusive contact such as a brief pat on the upper arm, upper back, high-five or hand shake.
6. Provide skill-teaching support to acceptable body regions such as the shoulders or upper back, providing it is in context for the sport and necessary for the skill or technique being demonstrated.
7. Massage and first aid services should only be provided by qualified personnel and:
 - a. in the case of first aid, only when necessary to treat illness or injury or during a life-threatening situation; and
 - b. in the case of massage, only when the masseur is formally engaged by your organisation or a child's parent(s)/guardian(s) for that specific service to be provided.

8. Physical restraint and intervention should only occur if there is a serious and imminent risk to an individual's safety. This may include reaching out to grab a child by the arm to move them away from a dangerous situation or holding a child so they don't fall to the floor and injure themselves.
9. If it is necessary to comfort a child in distress, do so in the presence of at least one other adult and in view of others. A more Senior Person at the club/organisation should be informed of situations in which children are or have been in distress and it should be logged with the club in an appropriate, secure place. Where there is concern for a child's welfare or wellbeing, always designate an appropriate person to notify the parent(s) or guardian(s) of the situation and ensure that the wellbeing of the distressed child is monitored to identify any patterns of behaviour that may be of concern.

What is inappropriate physical contact with children?:

- Hugs, cuddles, tickling, initiating or permitting kissing exchanges or other intimate contact.
- Assisting children with uniform fit-out or changing of their clothes (unless you are a designated carer/helper of a child or young person or a person with a disability);
- Attending to injuries in isolated first-aid rooms without the presence of at least one other adult;
- Physical contact with private body parts; and
- Sitting a child on your knee.

The following practical strategies

1. Transport

Try to avoid:

- Transporting a child unaccompanied; or
- Transporting a single child with adults who are related or in a relationship.

2. Social events

- The behavioral expectations for communication or physical contact with people under the age of 18 do not change from club sporting activities to social events.

Try to avoid:

- Being alone with a child outside club sport environments; or
- Children attending the private homes of any personnel from the sporting organisation.

3. Overnight or away trips

Overnight and away trips frequently happen within sport. For example, this may be necessary to attend a training camp, regional, state or national competition

Ensure that:

- Appropriate levels of supervision are discussed and adhered to at ALL times (i.e. ratio of children per adult).
- The gender mix of supervising adults is appropriate for the children participating.
- If staying overnight, practical options are explored so that adults and children do not sleep in the same room overnight (i.e. school camps).
- At least one of the supervising adults should have a current first aid qualification.

Try to avoid:

- Adults sharing rooms with children; and
- Where possible, supervising adults that are related or partners (if only two are present).

4. Discipline:

From time-to-time there may be a child taking part in a sporting activity who does not behave. Setting clear rules and expectations for everyone's behaviour will assist with the management of this, but not completely prevent it from happening. Strategies may also include:

- Asking the parent what strategies they could suggest might work with the child
- Asking the parent for assistance
- Do not shame children, but if necessary utilise a time-out area for children, in view of the public (i.e. designated area on the sidelines).
- Adopt positive methods for managing challenging behaviour such as directing other children to move away from the situation and/or talking one on one to the child concerned.

Do not:

- Physically restrain a child for poor behaviour i.e. by grabbing them by the arm; or
- Respond to poor behaviour from a child with poor or aggressive language.

5. First Aid:

Injuries, while not pleasant and sometimes severe, can occur when children participate in sport. In line with the development of a child safe environment, determine:

- Who will be responsible for the provision of first-aid and where it will be undertaken in the normal course of events (i.e. at a regular facility or at a 'home' event); and
- Who will be responsible for the provision of first-aid and where it will be undertaken when the club event is 'away.'

In addition

- Only expose the injured part of a child's body (i.e. only remove a shoe and sock for an ankle injury) and using draping if needed.
- Utilise a first-aid room which is not isolated and is easily accessible (i.e. open door, visual access into the room via windows).

6. Supporting Children with a Disability:

Most children with a disability will have a 'plan' for managing toileting and other personal care needs. It is not likely that this assistance will be required from organisation personnel however, should the situation arise it is important to manage this with consideration to the child's dignity and safety for the child and organisation personnel. An individual plan should be discussed with the parents of the child and documented.

Try to avoid:

- Offering to assist with toileting or other personal care needs when there is a carer or parent present or where the assistance is not necessary.
- Over assisting and touching when providing assistance, particularly when assisting a child with a disability.

This document was developed utilising and adapting content from:

- *Play By The Rules (2016), Guidelines for Working With Children*
- *Laura Johnston of People, Integrity and Culture Consulting (2020)*
- *Government of South Australia, Department of Education and Children's Services (2011), Protective practices for staff in their interactions with children and young people : guidelines for staff working or volunteering in education and care settings*

- *Network of Community Activities (2014), Appropriate Physical Contact in OOSH*
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