CHARTERHOUSE
ALMATY

PHYSICAL CONTACT, INTIMATE CARE AND USE OF REASONABLE FORCE POLICY

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1. Policy Statement

Charterhouse Almaty is committed to safeguarding and promoting the wellbeing of all students. The school expects all members of staff to understand the boundaries of appropriate physical contact with students and the very limited circumstances in which reasonable force or restrictive intervention may lawfully and appropriately be used.

Corporal punishment is strictly forbidden in all circumstances. This includes:

- any physical act used as punishment;
- any physical response to misbehaviour, except where necessary to prevent harm or serious disruption;
- any action that could reasonably be regarded as degrading, belittling, humiliating or intimidating.

Any physical contact with students is always professional, proportionate, necessary and in the student's best interests. Staff are required to recognise that even well-intentioned physical contact may be misunderstood by students, parents, colleagues or others. Staff should therefore avoid any non-essential physical contact and always use professional judgement.

Reasonable force, including physical restraint, may only be used where necessary to:

- prevent a student from committing an offence;
- protect any person from injury;
- prevent serious damage to property;
- maintain good order and discipline where there is serious disruption and no safer alternative is available.

Reasonable force is only ever a last resort. De-escalation, prevention, calm verbal instruction and environmental management are used wherever possible before any physical intervention is considered.

Any significant incident involving reasonable force, restraint or restrictive intervention will be recorded on CPOMS and reported promptly to the Designated Safeguarding Lead (DSL). Parents will be informed at the earliest appropriate opportunity, unless there is a safeguarding reason not to do so.

This policy is designed to comply with the requirements of Kazakh legislation while aligning with UK safeguarding expectations, British independent school practice and relevant UK guidance where applicable.

2. Aims and Principles

This policy aims to:

- safeguard and promote the welfare, dignity and rights of all students;
- provide clear guidance to staff on appropriate physical contact, intimate care and reasonable force;
- ensure consistent practice across the school, especially in the Pre-Prep, where intimate care needs may be more common;
- protect students' privacy, dignity and emotional wellbeing during personal or intimate care;
- protect staff from uncertainty, misunderstanding or false allegations by setting clear expectations and recording requirements;

- support inclusive practice for students with disabilities, medical needs, developmental differences or special educational needs;
- ensure that any use of reasonable force is exceptional, proportionate, necessary, recorded and reviewed;
- promote positive behaviour, prevention and de-escalation as the normal approach to managing risk.

This policy is underpinned by the following principles:

Respect

Every child is treated with dignity, sensitivity and fairness. Any physical contact will respect the student's age, stage of development, individual needs, culture, privacy and emotional boundaries.

Safety

The welfare and safety of students are paramount. Any physical contact or intervention must minimise risk and prioritise the student's best interests.

Professionalism

Staff are required to act with integrity, self-control and professional judgement. Physical contact must never be casual, careless, punitive, secretive or capable of being interpreted as inappropriate.

Inclusivity

The school recognises that some students may require reasonable adjustments, physical support, intimate care or planned intervention. Such support must be sensitive, properly planned and clearly recorded.

Partnership with Parents

Parents are important partners in the care of their children. The school will communicate openly with parents and seek consent where appropriate, particularly in relation to intimate care, medical support or individual care plans.

Accountability

Staff are required to follow agreed procedures, report concerns promptly and record incidents accurately. Any concern about physical contact, restraint or staff conduct must be addressed in line with the Safeguarding and Child Protection Policy.

3. Terminology

For clarity and consistency, this policy uses terminology broadly aligned with UK guidance, including *Restrictive interventions, including use of reasonable force, in schools: Guidance for schools in England* (DfE, April 2026).

Physical contact

Any form of bodily contact between a member of staff and a student. This may include incidental contact, support, comfort, instruction, intimate care, medical care or physical intervention.

Intimate care

Any support provided to a younger child with personal care needs that they are unable to manage independently. This may involve assistance with toileting, changing clothes, hygiene or other sensitive personal needs. Any such support will be provided only when necessary, with appropriate regard for the child's dignity, privacy, age, cultural background and safeguarding.

Reasonable force

The minimum physical force necessary, used for the shortest possible time, in order to prevent harm, serious disruption or significant damage. The word "reasonable" means that the force used must be proportionate to the circumstances and must not exceed what is necessary.

Restrictive intervention

Any action that prevents, restricts or subdues the movement of a student's body, or part of the body. This may include physical restraint or, in some circumstances, non-physical measures that prevent a student from moving freely.

Restraint

A form of restrictive intervention which immobilises a student or limits their movement. It may or may not involve direct physical contact. For example, holding a student's arms to prevent them from striking another student would be restraint.

Significant incident

Any incident in which physical force goes beyond ordinary, appropriate physical contact between staff and students. This includes any use of restraint, restrictive intervention or force to manage behaviour or risk.

Seclusion

A non-disciplinary intervention in which a student is confined away from others and prevented from leaving, whether by physical obstruction, locked doors, blocking, intimidation or the belief that they will be punished if they try to leave. Seclusion is never appropriate as a behaviour management strategy at Charterhouse Almaty.

4. Appropriate Physical Contact

There are limited circumstances in which physical contact with a student may be appropriate. Such contact must always be necessary, proportionate, age-appropriate and professionally justified.

Appropriate physical contact may include:

- helping a young child with clothing, shoes or a coat;
- assisting a student who has fallen or is injured;
- providing first aid or medical support;
- supporting a student with a disability or mobility need;
- demonstrating a physical technique in PE, Drama, Music, the sciences or other practical subjects, where appropriate;
- guiding a young child safely away from danger;
- offering brief comfort to a distressed child, where appropriate;
- providing intimate care in accordance with this policy and any relevant Individual Care Plan.

Staff must avoid any physical contact that is unnecessary, prolonged, overly familiar or capable of misinterpretation. Staff should not initiate physical contact as a matter of routine and must be particularly cautious in one-to-one situations.

Where possible, staff should:

- explain what they are doing and why;
- seek the student's agreement, taking account of age and understanding;
- keep physical contact brief and limited to what is necessary;
- ensure another adult is nearby or aware where the situation is sensitive;
- record or report any contact that is unusual, significant or may be open to misunderstanding.

5. Supporting Students with Additional Needs

Some students with disabilities, medical conditions, developmental needs or special educational needs may require physical support or planned intervention. This may include assistance with mobility, personal care, regulation, medical needs or safety.

Where regular physical support is required, this must be set out in an Individual Care Plan, Individual Risk Assessment, Medical Plan, Learning Support Plan or other agreed document. The plan should specify:

- the nature of the student's needs;
- the type of physical support required;
- who may provide the support;
- any known triggers, risks or preferred approaches;
- communication with parents;
- recording requirements;
- review arrangements.

Reasonable adjustments may require carefully planned physical contact. In rare cases, they may also require planned restrictive intervention to prevent serious harm. Such arrangements must be approved by the relevant senior leader, DSL and, where appropriate, the School Nurse, Head of Inclusion and parents.

6. Comforting Distressed Students

Students, particularly younger children, may sometimes seek or need reassurance when distressed. Staff may offer brief, age-appropriate comfort where this is in the student's best interests.

When offering comfort, staff must:

- keep physical contact to the minimum required;
- allow contact to be child-initiated wherever possible;
- avoid holding a child close to the body unless there is a clear safeguarding, medical or safety reason;
- keep hands visible where possible;
- remain aware of the student's age, gender, culture, background and individual needs;
- avoid repeated or prolonged physical comfort with the same student;
- seek advice from a senior colleague if unsure.

If a student initiates physical contact that makes a member of staff uncomfortable, the staff member should gently and calmly redirect the contact without blaming or shaming the student.

7. Use of Reasonable Force and Restrictive Intervention

The use of reasonable force or restrictive intervention is permitted only in exceptional circumstances and only where necessary to prevent harm, serious disruption or significant damage.

Before any physical intervention is used, staff should, wherever possible:

- remain calm and use clear, authoritative verbal instruction;
- attempt de-escalation and give the student time and space to respond;
- remove other students from risk where possible;
- send for help immediately;
- seek support from a senior colleague;
- avoid physical intervention if this would create greater risk;
- use non-physical strategies first.

Where physical intervention is unavoidable, staff must:

- use the minimum force necessary;
- use force for the shortest possible time;
- avoid causing pain, distress or humiliation;
- explain calmly what is happening and why;
- release the student as soon as it is safe to do so;
- seek medical attention if required;
- report and record the incident as soon as possible.

Where possible, two members of staff should be present during any physical intervention. However, staff should not delay necessary action where immediate intervention is required to prevent injury or serious harm.

8. Prohibited Physical Actions

Corporal punishment in any form is strictly prohibited at Charterhouse Almaty. This may include, but is not limited to:

- hitting, slapping, kicking, pushing, shaking or deliberate pain infliction;
- twisting limbs;
- tripping;
- pulling hair or ears;
- holding a student by the neck, collar or throat;
- any hold that restricts breathing;
- double arm locks or other dangerous holds;
- seated double embrace;
- double basket-hold;
- nose distraction technique;
- holding a student face down;
- placing a student in an indecent, humiliating or degrading position;
- using force as punishment, retaliation or intimidation;
- using force to secure compliance where there is no immediate risk of harm or serious disruption.

Physical intervention must never be used to humiliate, threaten, punish or assert authority over a student.

9. Reporting, Recording and Review

Any significant incident involving reasonable force, restraint or restrictive intervention must be reported to the Designated Safeguarding Lead as soon as possible and recorded on CPOMS.

The record should include:

- the date, time and location of the incident;
- the names of students and staff involved;
- the circumstances leading to the incident;
- de-escalation or preventative strategies attempted;
- the nature and duration of any physical intervention;
- any injuries or medical attention required;
- the student's response;
- names of witnesses;
- when and how parents were informed;
- follow-up action, support or review required.

Parents must be informed at the earliest appropriate opportunity, unless the DSL determines that doing so may place the student or another person at risk.

Following any significant incident, the school should consider:

- whether the student requires pastoral, behavioural, medical or learning support;
- whether an Individual Risk Assessment or Care Plan is needed or should be reviewed;
- whether staff require further guidance or training;
- whether the incident raises safeguarding concerns;
- whether practice or supervision arrangements should be changed.

Any complaint or concern arising from the use of physical contact, reasonable force or restrictive intervention must be managed in line with the school's Safeguarding and Child Protection Policy and complaints procedures.

10. Intimate Care in the Pre-Prep

Intimate care refers to any personal care activity that involves direct or indirect physical contact with a pupil's private or personal areas, or any care task that a pupil cannot carry out independently and which may be sensitive in nature.

In the Pre-Prep, intimate care may include:

- support with toileting;
- nappy changing, where applicable;
- cleaning after soiling;
- assistance with dressing or undressing;
- support with washing or wiping;
- changing soiled or wet clothing;
- medical care requiring physical contact, such as applying creams or supporting medical devices, where included in a care plan.

Intimate care does not usually include everyday low-level support such as helping a child with shoes, a coat or brief hand holding for safety.

Pupils in the Pre-Prep should be encouraged to do as much as possible independently, according to their age, development and needs. Staff should provide only the assistance required.

Where intimate care is required for a younger child, staff must ensure that:

- parental consent has been obtained where appropriate;
- care is carried out in accordance with the pupil's Individual Care Plan, where one exists;
- the pupil is treated with dignity and sensitivity;
- the pupil is involved and informed as far as possible;
- privacy is maintained appropriately, while avoiding secrecy;

- physical contact is limited to what is necessary;
- staff wear protective gloves and follow infection control procedures;
- waste is disposed of hygienically;
- soiled clothing is bagged and sent home;
- any unusual concern, injury, comment or behaviour is reported to the DSL.

Where possible, two members of staff should be nearby or aware that intimate care is taking place. Doors should not be locked. The arrangements should balance the pupil's privacy with the need to safeguard both the pupil and staff.

11. Responding to Soiling or Toileting Accidents in the Pre-Prep

If a pupil in the Pre-Prep soils themselves or has a toileting accident, staff must respond calmly, discreetly and without criticism.

Staff should:

- reassure the child;
- protect the child from embarrassment;
- encourage the child to clean or change independently where possible;
- provide the minimum necessary assistance;
- follow hygiene procedures;
- inform parents where appropriate;
- record the incident if required by the child's age, care plan, frequency of incidents or safeguarding context.

Repeated toileting accidents, distress, unusual comments or unexplained marks must be reported to the DSL, as they may indicate an underlying medical, developmental or safeguarding concern.

12. Medical and First Aid Contact

Physical contact may be necessary when providing first aid or medical care. Such contact must be limited to what is required, conducted respectfully and, wherever possible, explained to the student.

Medical support must be provided in accordance with the school's Health and Safety Policy, first aid procedures, medical needs arrangements and any relevant Individual Care Plan.

Where a student requires regular medical care involving physical contact, a written plan must be agreed with parents and relevant staff.

13. Staff Protection and Professional Boundaries

To reduce the risk of misunderstanding or allegation, staff should:

- avoid unnecessary physical contact;
- avoid being alone with a student when sensitive physical contact is required, unless unavoidable;
- seek support from another adult where possible;
- explain actions clearly to the student;
- offer choices where appropriate;
- remain alert to the student's reactions;
- stop immediately if the student becomes distressed, unless stopping would create a greater risk;
- record and report any unusual, significant or concerning contact.

Staff must never:

- engage in physical contact that is secretive, unnecessary or overly familiar;
- use physical contact to punish, intimidate or control a student;
- ignore a student's distress or objection unless immediate action is required to prevent harm;
- provide intimate care beyond their training, role or agreed responsibility;
- fail to report concerns about another adult's conduct.

Any concern about a member of staff's physical contact with a student must be reported in line with the school's Safeguarding and Child Protection Policy, including procedures for low-level concerns and allegations against staff.

14. Statutory and Regulatory References

This policy is informed by relevant Kazakh legal requirements and by UK best practice guidance, including:

- Education Act 1996 and Education Act 2002
- Education and Inspections Act 2006, Section 93
- Department for Education, *Use of Reasonable Force*
- Department for Education, *Restrictive interventions, including use of reasonable force, in schools*
- Department for Education, *Keeping Children Safe in Education*
- Children Act 1989 and Children Act 2004
- Early Years Foundation Stage Statutory Framework
- Equality Act 2010
- Relevant safeguarding, health and safety, child protection and education requirements under the legislation of the Republic of Kazakhstan.

Where UK guidance and Kazakh legal requirements differ, the school will comply with Kazakh law while maintaining the highest practicable safeguarding standards in line with UK independent school expectations.

15. Staffing and Resources

Relevant staff receive appropriate training in safeguarding, behaviour management, intimate care, first aid, medical procedures and, where necessary, safe intervention. The table below outlines the responsibilities of individual post-holders and groups of staff in relation to this policy:

Post-holder	Responsibilities
The Head	○ Holding overall responsibility for ensuring this policy is implemented effectively
Designated Safeguarding Lead (DSL)	○ Advising staff on safeguarding issues relating to physical contact, intimate care and reasonable force ○ Reviewing CPOMS records involving physical intervention ○ Ensuring that concerns are escalated appropriately ○ Supporting staff where safeguarding questions arise
Head of Junior School; Head of Senior School; Deputy Head (Junior School); Deputy Head (Senior School)	○ Ensuring staff understand this policy ○ Supporting consistent implementation ○ Reviewing incidents and patterns ○ Ensuring appropriate supervision and staffing arrangements ○ Liaising with parents where required
All Staff	○ Reading and following this policy ○ Maintaining professional boundaries ○ Using de-escalation and preventative strategies ○ Reporting and recording concerns promptly ○ Seeking advice where unsure

16. Monitoring and Review

This policy will be reviewed annually, or sooner if there are changes to legislation, safeguarding guidance, local regulatory requirements or school practice.

The DSL and Senior Leadership Team will monitor the implementation of this policy through:

- Review of CPOMS records
- Review of significant incidents involving physical intervention
- Safeguarding audits
- Staff training records
- Parental concerns or complaints
- Patterns relating to intimate care or physical contact.

Any lessons learned from incidents, complaints or safeguarding reviews will be used to strengthen practice, training and supervision across the school.