

1.14 Appropriate Physical Contact, Comfort and Affection Policy

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1.14 Appropriate Physical Contact, Comfort and Affection Policy

Policy Statement

At Miss B's Nursery, we recognise that warm, nurturing relationships are fundamental to children's emotional wellbeing, development and learning. We believe that children should feel safe, secure, valued and cared for within an environment where practitioners respond sensitively to their emotional needs.

Positive physical contact, when appropriate, can help children feel secure, reduce anxiety and support the development of trusting relationships. However, all physical contact must always be appropriate, respectful, child-centred and carried out within clear professional boundaries.

Our practice is underpinned by the principles of the **Statutory Framework for the Early Years Foundation Stage (EYFS)**, which requires providers to promote children's emotional wellbeing, ensure each child has a key person and safeguard and promote children's welfare.

Legislative Framework

This policy is informed by:

- Statutory Framework for the Early Years Foundation Stage (EYFS)
- Children Act 1989
- Children Act 2004
- Working Together to Safeguard Children
- Keeping Children Safe in Education (safeguarding principles)
- Equality Act 2010
- Human Rights Act 1998
- United Nations Convention on the Rights of the Child (UNCRC)

Children's Rights

We recognise children's rights under the UN Convention on the Rights of the Child, including:

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- **Article 3** – The child's best interests must be a primary consideration.
- **Article 12** – Children have the right to express their wishes and feelings.
- **Article 16** – Children have the right to privacy and dignity.
- **Article 19** – Children have the right to protection from all forms of abuse.
- **Article 39** – Children have the right to recover from distress in a caring environment.

Children have the right to receive comfort when they are upset, frightened, anxious, injured or distressed.

Our Principles

At Miss B's Nursery we will:

- build warm, secure and respectful relationships;
 - provide emotional comfort when children need reassurance;
 - ensure all physical contact is appropriate to the child's age, stage of development and individual needs;
 - respect children's personal space and body autonomy;
 - encourage children to communicate if they do not wish to be touched;
 - promote children's understanding of consent and respectful relationships in an age-appropriate way;
 - maintain clear professional boundaries at all times.
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Appropriate Physical Contact

Appropriate physical contact may include:

- comforting a distressed child with a side hug or cuddle;
- holding a child's hand;
- sitting alongside or allowing a child to sit next to a practitioner;
- carrying a child when necessary for safety or comfort;
- supporting a child to sleep in accordance with our Safer Sleep Policy (for example, gentle patting or reassuring touch while settling);
- helping children with personal care in accordance with our Intimate Care Policy;
- assisting children with dressing, toileting or hygiene;
- supporting children during medical treatment or first aid;

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- helping children participate safely in physical activities;
- congratulating or celebrating achievements with a high five, fist bump or child-initiated hug.

Physical contact should always be responsive to the child's needs rather than the adult's wishes.

Hugs and Comfort

We recognise that some children seek physical reassurance when they are:

- upset;
- tired;
- frightened;
- overwhelmed;
- separating from parents;
- unwell;
- celebrating an achievement.

Where appropriate, practitioners may offer reassurance through a hug or cuddle.

Our approach is:

- child-led wherever possible;
- brief and proportionate;
- responsive to the child's emotional needs;
- respectful of the child's wishes.

Practitioners should never insist on giving a hug if a child does not want one.

Children should also never be expected to hug adults or other children.

Teaching Consent and Body Autonomy

We actively promote children's understanding that:

- their body belongs to them;
- they can say "no thank you" to unwanted physical contact;

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- adults will listen when they communicate discomfort;
- there are different ways to show kindness and affection.

Alternative greetings may include:

- waving;
- smiling;
- verbal praise;
- high fives;
- fist bumps;
- thumbs up.

This helps children develop confidence, self-esteem and an understanding of personal boundaries.

Professional Boundaries

Practitioners must always maintain appropriate professional relationships.

Staff must:

- act in the child's best interests;
- ensure physical contact is appropriate and necessary;
- remain aware of how actions may be perceived;
- avoid unnecessary or prolonged physical contact;
- respect children's dignity;
- follow safeguarding procedures at all times.

Where practicable, practitioners should remain visible to colleagues while comforting children, without compromising the child's privacy.

Physical Contact That Is Not Appropriate

Staff must never:

- force physical affection;
- request hugs for their own comfort;
- kiss a child;

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- allow children to sit on their lap for prolonged periods unless there is a genuine care need;
 - tickle children;
 - engage in rough or boisterous physical play;
 - restrain a child except where necessary to prevent immediate harm and in accordance with the Behaviour Policy;
 - touch intimate body areas outside of agreed intimate care procedures;
 - make comments that could embarrass or humiliate a child;
 - use physical contact as punishment.
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Responding to Distressed Children

When a child is distressed, practitioners should:

1. Remain calm.
 2. Move to the child's level.
 3. Speak gently and reassuringly.
 4. Ask if the child would like a hug or other comfort where appropriate.
 5. Respect the child's response.
 6. Offer alternative comfort if physical contact is declined.
 7. Inform parents if significant distress has occurred.
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Supporting Babies and Young Children

We recognise that babies and younger toddlers often require more physical reassurance to support secure attachment.

Practitioners may:

- cuddle babies during bottle feeding;
- provide comfort during separation from parents;
- gently rock or hold babies where appropriate;
- provide reassuring touch while settling to sleep, in line with our Safer Sleep Policy;
- respond promptly to crying.

These interactions support secure attachments and emotional development and are consistent with the EYFS key person approach.

Children with Additional Needs

Some children with SEND or medical needs may require additional physical reassurance or support.

The level of physical contact will be guided by:

- the child's individual needs;
- parental views;
- professional advice;
- Individual Support Plans or Healthcare Plans.

Reasonable adjustments will be made in accordance with the Equality Act 2010.

Partnership with Parents

We will:

- explain this policy during registration;
- discuss individual comfort preferences where appropriate;
- respect cultural and family beliefs where reasonably practicable;
- work with parents to ensure children feel emotionally secure.

Parents are encouraged to share information about what comforts their child.

Staff Training

All staff will receive training and guidance on:

- safeguarding;
- professional boundaries;
- recognising children's emotional needs;
- attachment and child development;
- positive behaviour support;
- responding to distressed children;

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- this policy during induction.
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Procedure for Appropriate Physical Contact

When a child seeks or requires physical comfort, practitioners will:

1. Assess why the child requires comfort.
 2. Consider the child's age, development and wishes.
 3. Offer verbal reassurance first where appropriate.
 4. If physical comfort is appropriate, provide brief, reassuring contact.
 5. Continue talking calmly to the child.
 6. Encourage the child to regain independence when ready.
 7. Record significant incidents if appropriate (for example, following injury, safeguarding concerns or serious distress).
 8. Share relevant information with parents where necessary.
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