

POSITIVE TOUCH POLICY

Signature of Head:	Anne Hutchinson
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Signature of Chair of Governors:	Fred Jenkins
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These guidelines outline the principles and procedures for positive touch between staff members and pupils at Longcause Special School. They should be read alongside the following school policies for:

- Behaviour & Emotional Support (which includes our approach to physical intervention)
- Safeguarding and Child Protection
- Intimate Care
- Codes of Conduct
- Whistleblowing
- Supporting pupils in school with medical conditions

All staff and volunteers at school are expected to follow these guidelines.

Background

Staff at Longcause Special School have had discussions around the use of positive touch in school and agreed the need to establish clear guidelines and a consistent approach across the school regarding appropriate touch.

Research by Harlow has recognised that positive physical touch is incredibly important for a child's development. Touch is essential in order to provide sensitive, good quality care and to support natural interactions. It is a crucial part of the development, emotional wellbeing, care and education of our pupils.

Touch is the earliest sensory system to become functional and is the foundation for all other sensory systems. Due to the nature of our pupils, they often are missing this sensory system and need to learn how this works, first through co-regulation and then whilst developing self-regulation. Positive touch is beneficial for both psychological and physiological development.

- Psychological: touch can be calming and relaxing and is vital for emotional wellbeing.
- Physiological: touch facilitates the growth of the body's cells and the development of the brain and nervous system.

However, in the current social climate there is a tendency to associate touch with intimacy and sexuality. Safeguarding children from inappropriate physical interactions is crucial but it

is also essential to recognise that the use of positive appropriate touch is incredibly important for a child's wellbeing, sensory regulation and emotional security. Staff are to safeguard themselves as well as the pupils they work with. Therefore, we recognise the need for clear guidelines on how to meet pupils needs for positive touch whilst keeping them safe.

Guidelines on the use of Positive Touch

The guidelines that follow describe the school's procedures on the use of appropriate positive touch.

Purpose:

Staff at Longcause Special School engage in appropriate positive touch with pupils for the following reasons:

- To aid and develop communication touch cues, physical prompts, intensive interaction.
- To model appropriate positive touch.
- To offer reassurance and support comforting distressed or upset pupils, communicating warmth, comfort and reassurance and to develop positive emotions.
- To support play and intensive interaction.
- To physically prompt and support gestural and physical prompts during learning activities such as hand over hand, physical development lessons or swimming.
- To support pupils with intimate care plans.
- To carry out therapy programmes such as physiotherapy, occupational therapy and rebound therapy; following programmes and advice.
- To responding to pupils' physical contact.
- Giving intrinsic rewards and to develop positive relationships such as high fives.

General Principles and Guidelines:

- Staff need to have a clear idea of why they are using positive physical touch with pupils. Staff should not be touching pupils for the sake of it. Discuss the use of touch with colleagues if you are unsure. Staff need to consider where they are with a pupil and ensure they are not hidden away.
- New staff within their class teams, will be made aware of pupil snapshots and risk behaviour plans at the earliest appropriate opportunity.

- Be prepared to openly and regularly discuss and explain why you are using positive touch with pupils. Staff should not feel embarrassed or ashamed of the use of touch and regular discussions should take place between staff teams.
- Staff should be sensitive to signals (non-verbal and verbal) that indicate that a child dislikes touch. For example, a child may pull away or make negative facial expressions.
- Pupils with physical and social difficulties need support to learn appropriate touch and how to interact in ways that happen naturally with their peers.
- Staff also need to consider the influences of race, gender, age, sexual identity, disability and of any trauma experienced:
 - -Gender differences may make someone feel uncomfortable.
 - -A child's personal history, especially when they have experienced trauma, may distort the understanding of a 'safe' adult.
 - -Pupils from ethnic minority backgrounds may be used to different types of touch.
 - -Pupils with multisensory impairments may be startled by touch.
 - -Pupils with sensory integration difficulties may interpret touch differently to others.

It is important for staff to familiarise themselves with the needs of different pupils and to ask advice if they are unsure.

Specific Guidelines and Principles

The Use of Touch to Show Empathy to Pupils

Some pupils may need physical contact to comfort them in times of distress or pain. Others may need it to help them to regulate e.g. deep pressure. Staff need to be aware of a pupil's individual needs and circumstances and should use their professional judgement when comforting or supporting pupils.

Hand Holding

Staff should use their professional judgement when holding hands with pupils i.e. take into account developmental age, needs, gender. Our pupils often need support with walking and balance.

Developmental Age

Staff need to be aware of the developmental age of the pupils they are supporting, and be clear the positive physical contact used is appropriate for the individual pupil. Developmental levels can often be more relevant to our pupils than their chronological age.

Intimate Care

In using touch during personal care routines (intimate care plans), staff should ensure that pupils are comfortable and familiar with the staff members delivering the personal care. Further information is available in the school's intimate care policy.

Sensory Impairment/ Trauma

Staff should be aware of the types of touch used. Pupils with Autism, multisensory impairment and/or sensory integration difficulties may become confused and distressed with certain types of touch. It is important to re-evaluate the needs for touch if pupils are tactile defensive or adverse to touch. Being open and honest and forewarning pupils about upcoming touch (e.g. hand over hand) may support this process. This is also an approach that will support pupils who have experienced trauma or adverse childhood experiences (ACES).

Educating Pupils about Touch

As part of our Relationships, Sex and Health Education (RSHE) curriculum, pupils will also engage in 'staying safe' mornings which covers positive touch. Due to our pupils' social difficulties, they are often vulnerable in this area. Therefore, in order to protect and educate them, we cover the following content:

Skill 1: Knows everybody's bodies are private and what this means

Knows that the parts of their body covered by underwear is private Knows that other people should not usually see or touch private parts of their bodies Knows that they should not see or touch private parts of other people's bodies.

Skill 2: Knows how people can actively communicate and recognise consent from others

Knows that they can always say no to unwanted touch Knows that there are times their permission should be sought before being touched

Skill 3: Knows that it is not always ok to keep secrets if it is related to being safe

Knows what a secret is Knows when it is ok to keep secrets

Skill 4: Knows how to seek advice if they are feeling unsafe or worried

Knows what things might make them feel unhappy or unsafe in family relationships

Pupils will also learn about puberty and relationships in LLfL (Longcause Learning for Life) which will reinforce the concepts of 'private parts' and 'consent'. Staff will use these messages in real life situations if pupils touch others in an inappropriate way.

Pupils who have Reached Puberty

Staff need to be vigilant and aware that pupils who have reached puberty may become sexually aroused by positive physical contact. Staff need to be mindful of this and alternative methods of contact identified. If the pupil seems to be sexually aroused by the member of staff's actions during personal care routines, it is important that this is recorded and that the safeguarding team undertakes a review of approaches.

Pupils who Touch Staff Inappropriately

Occasionally, pupils may engage in physical contact that staff find inappropriate. Staff should withdraw from these situations as soon as possible and these should be discussed with ELT/SLT.

In some situations, staff should not give negative feedback to the pupil as this may reinforce the behaviour. However, in other situations, the pupil will need clear information which can be reinforced in RSHE lessons (see above). If this is a regular occurrence, the methods for managing this behaviour should be highlighted and discussed in a meeting with a member of the safeguarding team. Strategies for managing this behaviour should also be listed on their pupil snapshot. If staff feel it is not appropriate to respond to physical contact from a child, staff should avoid open rejection and should try to divert and redirect the child instead. The issue will be discussed and dealt with through a solution focused approach in order to help the pupil learn from the incident and avoid shaming the child.

Concerns with Touch

Other people who may be watching can misinterpret positive touch. Some pupils may also provoke a physical intervention situation in order to gain physical contact. Staff should ensure that they follow agreed risk behaviour plans, policies and procedures at all times in order to protect the pupils and themselves. If you are in any doubt about any issues concerning appropriate touch, or if you observe any practice that causes concern, you should discuss this with the Head Teacher or Safeguarding team. If your concern relates to the Headteacher, you should contact the Chair of Governors. All staff have a responsibility to ensure safe and appropriate practice at all times.

Inappropriate Touch

It is not appropriate to touch pupils or for pupils to touch adults in the following areas:

- Genitals (penis, vagina/vulva)
- Chest/breasts
- Bottom

Exceptions to this include:

- First Aid
- Personal Care
- Medical Needs

In these circumstances, staff should try to ensure that there is more than one person present and that consent has been gained from the pupil involved, where possible.

It is not acceptable to kiss pupils. If a pupil initiates a kiss between themselves and a member of staff, staff need to withdraw from the situation.