

## **Touch Policy**

At Ravenscroft School, we have a touch policy. This means that members of staff are able to physically guide, touch or prompt children in an <u>appropriate</u> way at the <u>appropriate</u> time. Staff may need to physically touch, guide or prompt students if they require personal care, assistance with writing, eating, dressing etc. Staff need to be clear and open about the use of touch, how it supports the development and wellbeing of pupils and be able to explain the rationale for its use. This policy applies to all school-related activities whether on site or off-site on Educational Visits.

There must always be clarity and transparency in all activities which involve touch. Wherever possible a description of how touch is used to facilitate learning should be documented within class planning. E.g. P.E. and music

Some pupils have different needs in respect of touch and they have their own individual plans/policies: Individual Risk Assessments, Pastoral Support, Planned Intervention – Touch, Intimate Care and Positive Behaviour Plans.

## THE PURPOSE OF TOUCH

Touch is used routinely within school for a wide variety of reasons and functions:

**COMMUNICATION -** The use of touch enables us to reinforce positive, communicative exchanges or as the main form of communication in itself. It enables staff to respond non- verbally to a pupil's own use of physical contact during interactions and social contacts. These forms of contact are most likely to occur during Interaction and routine, social exchanges.

**LEARNING** - Touch is an important element of teaching and learning and enables us to establish the fundamentals of communication such as enjoying being with another person and being able to attend to them or using and understanding eye contacts. It is often necessary to physically prompt during co-active, directed educational tasks and life skills activities such as learning to eat and drink. Curriculum areas such as P.E. and music generally require varying levels of touch, these are essential in terms of giving support and quidance.

**PLAY -** Pupils who are at early stages of development are likely to engage in tactile and physical exchanges during their play. Staff should respond sensitively to the individual needs of the pupils and model appropriate, physical exchanges and play skills.

**THERAPEUTIC ACTIVITIES AND PHYSICAL SUPPORT -** A variety of therapies complement and support pupils' learning. These are carried out by therapists or by members of the school staff facilitating the therapy programmes. Physical support may be necessary for some pupils' who have difficulties with independent mobility. This may include deep pressure or other touch on advice from the Occupational Therapist.

**EMOTIONAL WELLBEING -** Touch enables staff to offer pupils reassurance, security and comfort. In context it can be used to help them understand their emotions and feelings.

**PERSONAL AND INTIMATE CARE -** Some pupils require support with aspects of their personal and intimate care. This includes: eating and drinking, toileting, dressing and undressing, wiping noses and washing hands and faces. (See Intimate Care Policy)

**MEDICAL CARE -** This may involve giving first aid for minor accidents, the administration of medication, oxygen and enteral feeding (including stoma care). Pupils with specialised needs will have care plans which are agreed with parents and carers.

## **GUIDANCE FOR THE USE OF APPROPRIATE TOUCH**

In most circumstances staff should only ever be making physical contact with the upper part of the body and this primarily should be the hands, arms and shoulder area. It is generally deemed appropriate to touch others on the upper arm which would appear to be regarded as a neutral zone in most cultures.

**Lifting:** Children should <u>never</u> be lifted or carried except in cases where the child is at immediate risk of harm or in an emergency.

**Hugging:** members of staff that are using touch for comfort or reward must use a 'school hug'. This is a sideways on hug, with the adult putting their hands on the child's shoulders. This discourages 'front on' hugging, and the adult's hands on the shoulders limit the ability of the child to turn themselves into the adult. This can be done either standing or sitting.

**Hand-Holding:** children sometimes enjoy being able to hold hands with adults around them. This is perfectly acceptable when the hand holding is consensual and not habitual. Handholding should not be used to lead children in place of communication. Leading a child by the wrist is **never** acceptable.

**Lap-Sitting:** Children should be taught to seek comfort/attention through other means, for example a hand hold or sideways hug. If a child attempts to sit on a staff member's lap, they should explain to them that this is not what is done in school, and ask them to sit next to them if it is appropriate.

## Safeguarding

It is very important that, as far as possible, the pupils give consent to any touch. All staff should be sensitive to any verbal or non-verbal communication from pupils indicating they do not want to be touched. It must always be considered that for touch to be positive it should be consensual.

Where a young person indicates that touch from an adult is not welcome, perhaps by moving away or flinching to avoid, the staff member should apologise to demonstrate a respect for personal boundaries.

Staff should be aware of any changes in a pupil's behaviour which may indicate the need to reduce or withdraw touch, particularly during play or Intensive Interaction sessions. All changes in behaviour in response to touch should be recorded in order to inform any relevant touch plan.

Touch must never be in response to or be intended to arouse sexual expectations or feelings .Staff should be sensitive to the danger of touch being misunderstood and triggering sexual arousal and must be alert to all signals from the pupil they are supporting.

It is never appropriate for a member of staff to touch a pupil's intimate body areas except as part of agreed intimate or medical care.

A pupil may inadvertently or deliberately touch intimate parts of a member of staff's body. If this occurs the member of staff should withdraw from the situation without giving negative feedback and should report and submit a record of the incident in detail to the Safeguarding Officer.

Where a member of staff feels that it would be inappropriate to respond to a pupil seeking physical comfort, outward rejection should always be avoided in favour of diversion or some other such tactic and the reason, where appropriate, for avoiding physical contact should be given to the pupil.

At times, a pupil may, in crisis or distress, hold a staff member in a way which is not described in this policy (e.g. 'front on' hug/lap sitting). If this should happen staff should ensure that a senior member of staff has been informed to protect themselves. Staff may be asked to make a note of this, this will be in order to record and monitor the amount of times the pupil is doing this to staff to see whether this is a 'controlling' behaviour, or whether the child is displaying distressed behaviour regularly.

All staff have a responsibility to ensure that all practice at Ravenscroft School is safe and appropriate. We should all expect to be observed by others and be prepared to discuss any concerns we have in a professional manner. Any member of staff who is concerned about another member of staff's practice should discuss their concerns with the Head Teacher or another senior member of staff as appropriate.

This policy should be read in conjunction with the following policies: Early Help, Safeguarding & Child Protection, Intimate Care, Physical Intervention and Professional Conduct

The following documents have been taken into account in the production of this policy:
Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings. 03/09
Use of reasonable force: Advice for headteachers, staff and governing bodies July 2013 DfE

This policy was agreed on	March 2019
Next review due	April 2022

Appendices (separate to policy):

• Touch – Planned Intervention