

Keelman's Way School

Touch Policy



These guidelines outline the principles and procedures for physical touch between staff members and pupils at Keelman's Way School. They should be read alongside the following school policies for:

- Positive Handling and Physical Intervention
- Moving and Handling
- Safeguarding Children
- Intimate Care

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

Background

Research has recognised that 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 and is 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 on for all other sensory systems. Positive touch is beneficial for both psychological and physiological development.

- Psychologically touch can be calming and relaxing and is vital for emotional wellbeing.
- Physiologically 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.

Guidelines on the use of Physical Touch

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

Purposes

Staff at Keelman's Way School routinely engage in physical touch with pupils for the following reasons:

- To aid and develop communication – touch cues, physical prompts, intensive interaction and to make social interactions.

- To offer physical support and guidance – help with mobility, moving and handling, guiding pupils into rooms.
- To offer reassurance and support – comforting distressed or upset pupils, communicating warmth, comfort and reassurance and to develop positive emotions.
- Physical intervention and managing challenging behaviours.
- Play and intensive interaction.
- Physical prompting and support – gestural and physical prompts during learning activities such as hand overhand or hand under hand support.
- To support pupils with personal care routines.
- Protection – from other students or from themselves (for example self-harming or absconding), including restraint and physical intervention.
- To carry out therapy programmes – physiotherapy, occupational therapy, yoga, rebound therapy and hydrotherapy, following programmes and advice.
- Responding to pupils' physical contact.
- Giving rewards such as high fives or a pat on the back.

General Principles and Guidelines

- Staff need to have a clear idea of why they are using physical touch with pupils. Staff should not be touching pupils for the sake of it or because it is easier or saves time. Ask for support and clarification from Senior Leaders if you are unsure.
- Where appropriate have consent from the pupil who is involved in the use of touch. Always explain to the pupil what you are doing and why. The exception to seeking consent is where physical touch is being used to manage challenging behaviour and physical intervention is required as a last resort. See the physical intervention policy for more information.
- Be prepared to openly discuss and explain why you are using physical touch with pupils.
- 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.
- Some pupils may provoke a physical intervention situation in order to gain physical contact.
- Each class should have clear guidelines and documentation available for those pupils who require regular physical touch. These should be put in place when a pupil has regular access to any of the following:
 - Physiotherapy programmes – these should be produced by the physiotherapy team and the class teachers.

- Occupational Therapy programmes (such as joint compressions or deep tissue massage) – these should be produced by the occupational therapist and the class teacher.
- Personal Care Needs – each pupil who needs personal care should have a personal care plan.
- Manual Handling plan
- Physical Intervention Plans – each pupil who requires intervention must have a physical intervention plan. Parental permission must be sought and all plans need to be agreed by the Head Teacher. These should be part of Pupil Care Files documentation.

All of the above programmes should be stored in each pupil's individual folder.

- Use of physical touch should be discussed openly and regularly. Staff should not feel embarrassed or ashamed of the use of touch and regular discussions should take place between staff teams.
- Students with physical disabilities need support to touch and interact in ways that happen naturally with their peers.
- Staff also need to consider the influences of race, gender, age, sexual identity and disability:
 - Gender differences may make someone feel uncomfortable
 - A child's personal history 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 comfort pupils

It would not be appropriate or beneficial to suggest that staff do not comfort pupils who are upset or distressed. Staff need to be aware of a pupil's individual needs and circumstances and should use their professional judgement when comforting pupils.

Pupils who have reached puberty

Staff need to be vigilant and aware that pupils who have reached puberty may become sexually aroused by 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 a management plan put in place.

Students who touch staff inappropriately

Occasionally students 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 a more senior member of staff.

If possible, staff should not give negative feedback, beyond a firm 'no' with appropriate facial expression, to the student as this may reinforce the behaviour. If this is a regular occurrence, the methods for managing this behaviour should be highlighted on student's behaviour plan.

If staff feel it is not appropriate to respond to physical contact from a child they should be directed to engage in alternative behaviour.

Hand Holding

Staff should use their professional judgement when holding hands with students. Our students often needs support with walking and balance or may need support to prevent them from absconding. It may be more appropriate to use CPI transport techniques (see physical intervention policy) as these may be safer and more secure.

- Staff need to be aware of the developmental age of the students they are supporting, and be clear the physical contact used is appropriate for the individual student. Developmental levels can often be more relevant to our students than their chronological age.
- In using touch during personal care routines 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 personal care policy.
- Staff should be aware of the types of touch used. Pupils with ASD, multisensory impairment and/or sensory integration difficulties may become confused and distressed with certain types of touch. It is important to verbalise reassurances as well.
- Other people who may be watching can misinterpret physical Intervention procedures. Some pupils may also provoke a physical intervention situation in order to gain physical contact. **Staff should ensure that they follow agreed behaviour plans and physical intervention practices at all times in order to protect the pupils and themselves.**

Inappropriate Touch

It is not appropriate to touch students in the following areas:

- Genitals
- Chest/Breast
- Bottom

Exceptions to this include:

- First Aid
- Personal Care
- Medical Needs

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

It is not acceptable to kiss students at any age. If a student initiates a kiss between themselves and a member of staff, staff need to withdraw from the situation.

It is not acceptable to grab a student by their wrist.

Staff should not be lifting, pulling or supporting students by their wrist.

Staff should not be lifting, pulling or supporting students by their wrists. It is preferable to either hold a student's hand, guide them from behind or to follow the school's physical intervention guidelines on transporting pupils.

If you are in any doubt about any issues concerning appropriate touch, or you observe any practice that causes concern, you should discuss this with the Head Teacher.

All staff have a responsibility to ensure safe and appropriate practice at all times.

Signed.....
Head Teacher

Date.....

Signed.....
Chair of Governors

Date.....

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