Safe Touch Policy

Hazel Oak School

September 2026

To be reviewed Oct 2027

Agreed by Governors on ……

Aims

Children have the right to independence and choices, and we seek to provide opportunities for personal growth and emotional health and wellbeing. However, rights also involve responsibilities, such as not harming other people's rights. Children unable to control their actions or unable to appreciate danger have a right to be protected; and staff have a duty of care to exercise.

Rationale

Children learn who they are and how the world is, by forming relationships with people and things around them. The quality of a child's relationship with significant adults is vital to their healthy development and emotional health and wellbeing.

Many children who require emotional support from school may have been subject to trauma or distress or may not have had a positive start in life. It is with this in mind that staff seek to respond to children's developmental needs by using appropriate safe touch.

Attachment theory and child development identifies safe touch as a positive contribution to brain development, mental health and the development of social skills.

All staff need to be aware of procedures within this policy. The policy should be seen in the wider context of the behaviour Policy, and the Safeguarding and Child Protection Policies. Staff always need to be mindful of appropriate behaviour. Staff are Team Teach trained in order to understand appropriate touch and the very occasionally need for physical intervention, as a last resort. Any physical interventions are recorded on the 'Solar system in line with Team Teach Practice. Co-regulation plans are written for children where physical interventions may be used. These are shared by staff with Parents and are part of a de-escalation plan.

Our policy rests on the belief that every member of staff needs to know the difference between appropriate and inappropriate touch. Staff need to be aware of what consent for each child looks like, whether this is verbal or non-verbal gestures such as a child holding out their hand. Parents/ carers should be made aware of the school's safe touch policy and must give consent if they are happy for staff, when appropriate to provide safe touch in a planned and agreed way.

In all cases, touch will be initiated with the utmost care, in the best interest of the child and allow for the dignity of both child and adult to be preserved. It will also not seek to de-skill the child, but to support their path to the highest level of independence.

Different types of touch

1. Casual / informal / incidental touch

Staff use touch with pupils as part of a normal relationship, for example comforting a child, giving reassurance and congratulating. This might include taking a child by the hand (if age appropriate), patting on the back or putting an arm around the shoulders. The benefit of this action is often proactive and can prevent a situation from escalating.

2. General reparative touch

This is used by staff working with children who are having difficulties with their emotions. Healthy emotional development requires safe touch as a means of calming, soothing and containing distress for a frightened, angry or sad child. Touch used to regulate a child's emotions triggers the release of the calming chemical oxytocin in the body. Reparative touch may include stroking a back, squeezing an arm, rocking gently, side hug, tickling, hand or foot massage. Because of the complex needs of our children reparative touch is used with many of them.

3. Contact/interactive Play

Play-based activities naturally include touch. People of any age who are at early levels of development are likely to be tactile and physical.

Contact play is used by staff adopting a role similar to a parent in a healthy child-parent relationship. This will only take place when the child has developed a trusting relationship with the adult and when they feel completely comfortable and at ease with this type of contact. Contact play may include tickle games, being supported to explore in messy play, being held or rocked in physical play or being helped to access playground equipment.

This sort of play releases the following chemicals in the brain:

Endorphins – to calm and soothe and give pleasure;

Dopamine – to focus, be alert and concentrate;

BDNF (Brain Derived Neurotropic Factor) – a brain 'fertiliser' that encourages growth.

4. Positive handling (calming a dysregulated child)

Staff may use physical intervention as is reasonable and proportionate in certain circumstances in order to prevent a pupil from doing, or continuing to do, a type of behaviour that may result in them harming themselves or another. This needs to be read in conjunction with the Behaviour Policy. It may also be a way of providing support for the child in order for them to regulate their emotions or their sensory needs. This will be in line with their sensory diets. For instance, staff may provide touch when carrying out deep pressure, TAC PAC, using a sensory brush, story massage, supporting a child with their peanut ball programme or through massage etc.

5. Physical support

In addition to sensory activities/ sensory diets touch may be used during activities such as swimming, physical education. Touch may be needed to help with mobility or as part of an activity where a pupil needs support when moving. It may be appropriate to facilitate correct positioning and to follow physiotherapy programmes — when a pupil is standing, kneeling, walking, sitting. Touch for safety may be needed for example if a pupil overbalances as a result of a need or through accident.

It is important to note that pupils should not be sat on adults' laps. If a pupil tries to sit on an adult's lap, they should redirect the pupil to a side help hug.

6. Using Touch to Communicate

Touch is beneficial as part of the process of establishing the fundamentals of communication (Nind and Hewett, 1994). Touch can be a necessary means to reinforce other communication (e.g. contingent touch when speaking) or to function as the main form of communication in itself. Touch enables staff and pupils to respond non-verbally or to respond to another person's own use of physical contact for communication. This is particularly likely to occur during intensive interaction or day to day greetings (handshakes, high fives etc.) Touch cues, hand over hand signing, physical prompts and Intensive Interaction are aided and developed by the use of supportive touch.

7. Using touch for Educational Development

Touch can also be used to direct children in educational tasks and in the development of skills. Physical prompting and support, gestural and physical prompts during learning activities. Total body movements, experiencing both fine and gross motor body movements with an adult, may form part of an introduction to a task or be used in order that the pupil may complete a given task. For example, in art it may be necessary to facilitate initial experiences with a new medium or to encourage/develop multi-sensory exploration/experience of natural materials.

8. In Self-care activities

Some children at Hazel Oak may need their personal care needs met by staff. Children will be assisted to take part in self-care activities such as feeding, brushing teeth, washing or dressing. Children will also have their intimate care needs met when having their nappy or pad changed (Intimate Care Policy).

All pupil specific planned safe touch, in line with this policy, will be detailed in an appropriate plan to be shared with families and implemented consistently by staff teams working with each young person.

This policy should be read in conjunction with the following policies:

- Intimate care policy
- Behaviour policy (including Team Teach approaches)
- Safeguarding policies