The Parkside School
learn grow thrive

Safe Touch Policy

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Signed:		
Next review due by:	January 2027 Mrs Lucy Mills Medical Lead	

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1. Aims

To ensure all staff carry out safe, confident, dignified and appropriate practice when using necessary and/or planned touch.
To enable students to understand what appropriate touch means to them.
To meet the intimate care, hygiene, communication and self-care needs of all pupils at the school.

1.1 Why is touch important to our pupils

Touch is a necessary and important part of the development for the children and young people who attend Parkside school. It develops meaningful and lasting appropriate relationships with both adults and peers and can be key in developing social, behavioural and cognitive skills. In line with the school safeguarding policy, it also enables children/young people to learn what is and what is not appropriate touch and from whom touch is appropriate. Touch is a fundamental and natural part of human interactions.

Touch is vitally important and should be used for the following reasons:

1.2 Communication

Touch is necessary to reinforce communication, whether it is to gain attention e.g. tapping on the shoulder or to teach nonverbal cues. Touch develops strong bonds between both adults and peers: developing relationships is a cornerstone of enabling communication. It supports greetings; whether the greeting is formal or informal, e.g. handshakes, high fives, 'Parkside hug' etc. It can support children and young people to develop their own physical presence through regular practice and modelled practice. Touch can develop early communication skills through intensive interaction and shared physical contact. It supports children and young people to develop and maintain appropriate and meaningful social relationships in line with their cognitive ability.

2. Educational Tasks

2.1 Cognitive and curriculum based touch

Touch is an important part of educational and cognitive development. Staff may find it necessary to give a physical prompt in order to enable the children or young people at Parkside to access the curriculum. This may take the form of working 'hand over hand', 'hand under hand', safely supporting a child or young person to access gross motor activities. Touch may take the form of a physical prompt to support attention giving skills e.g. guiding to a chair, applying deep pressure to meet sensory needs etc

2.2 Play and social development

Play and social development naturally include touch: people of any age who are at an early stage of social/emotional development often require and seek out physical touch. This should be appropriate to their development e.g. playing a tickling game where developmentally appropriate and if it has a communicative/social/emotional benefit.

For sensory/exploratory learners in particular, it is appropriate to take part in massage stories/Tac Pac. physical therapies, sensory integration and stimulation. This may take the form of, but not exclusive to:

- Staff engaging in intensive interactions
- Staff delivering massage programmes
- Staff delivering PT/OT programmes with advice from therapists

2.3 Intimate Care

Touch is necessary to support the intimate care needs of our pupils' intimate care policy. This should be carried out by familiar staff who are confident with the needs of the child/young person. Staff should use touch to meet hygiene needs but also maintain dignity and privacy.

2.4 Mobility and Sensory needs/impairments/multi-sensory impairments

Touch is necessary to support the physical needs of children/young people, in particular those with mobility barriers. Physical support may be used as guidance and/or to help with mobility or as part of an activity where a pupil needs support when moving. Some pupils may need moving and handling to protect students from harming themselves or others, including restrictive physical intervention. This must be carried out in line with the relevant policy guidelines and Norfolk Steps training.

Some students with visual or multisensory impairments may need guiding through physical touch. This could take the form of guiding a visual impaired person, guiding a hand to resources, using resources such as resonance boards and adjusting the position of hearing aids etc.

Students may require support with managing their sensory needs. This may take the form of co-regulation: staff may use touch to apply light or deep pressure in order to help the child or young person regulate their emotions or behaviour. This should be assessed on an individual basis.

2.5 Emotional Support

Displaying affection and warmth in the form of touch is appropriate to support the development of the children and young people at Parkside. This will support them in understanding who it is appropriate to get physical affection and warmth from and what is appropriate physical warmth and affection, dependent on the relationship with the child e.g. physical affection from parents will look different to physical affection from teachers/teaching assistants. Physical affection from strangers is not appropriate. Touch enables a child or young person to develop and express positive emotions and understand what is safe and what is not. This may take the form of physical reassurance, comforting hurt or distressed pupils. This should be conducted in line with the child or young person's development and should be assessed on an individual basis: some children or young people may react negatively to touch.

2.6 Administering medicine/first aid:

This should be conducted in line with the administering medication/first aid policy. Touch is vital in supporting the medical needs of the children or young people at Parkside.

3. Keeping Staff and Pupils safe

3.1 Hand Holding

Staff should use professional discretion when hand holding. Offering to link arms is preferential. It may be necessary to hold hands if it has been advised by therapists, is a preferred and appropriate means of comfort to the child and is developmentally appropriate. This should be part of a professional discussion around a child/young person/ group of children/young people. Developmental levels can often be more relevant to our pupils than chronological age.

Staff should be aware that physical touch or intervention may be misinterpreted by peers or unfamiliar adults. All touch should be in line with policy and be part of a wider professional discussion. Safe physical touch should be taught as part of the curriculum where developmentally appropriate. Staff should not deliver physical touch such as massage ro deep pressure when alone with a child or young person. Staff should understand the reasons why they use physical touch and how to use it effectively. Staff to be familiar with the safe touch policy and have specialist training where necessary and appropriate e.g. delivering massage.

3.2 Inappropriate Touch

It is not appropriate to touch students in the following areas: Genitals Chest / breast Bottom
Except for: First aid Intimate/ Personal care Medical needs

In these circumstances staff should ensure that there is another member of staff present who the pupil is comfortable and familiar with. For pupils receiving touch of an intimate nature consent should have been gained from the pupil involved. It is not acceptable to kiss students. If a student initiates a kiss between themselves and a member of staff, staff need to withdraw from the situation. Our responsibility is to ensure that our pupils are safe and prepared for life beyond school.

If you are in doubt about any issues concerning appropriate touch, or you observe any practice that causes concern, you should discuss this with a member of the Senior leadership Team. All staff have a responsibility to ensure safe and appropriate practice at all times.