

# Positive Touch Policy



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### POSITIVE TOUCH POLICY

Hatfield Wick Education works with very vulnerable and challenging pupils who are experiencing difficulties which may leave them feeling distressed, angry, or disorientated.

In these circumstances it is natural for children and young people to seek comfort from the adults they trust. If these adults feel they must never reach out to comfort a child at such a time, it would be deeply concerning, particularly in situations where the withholding of touch with a very distressed or dysregulated child can be damaging to their recovery and future development.

Many neuroscientific and psychological studies have shown that a lack of soothing touch in childhood, particularly during times of distress, can result in physical ill-health and problems with anxiety, aggression, or depression in later life.

### 1. POSITIVE TOUCH

The appropriate therapeutic use of touch is defined by situations in which abstinence (i.e. not to touch the child) would actually be inhumane, unkind and potentially psychologically or neurobiologically damaging.

There is strong, empirically backed evidence that the use of touch in the comforting of a child who is in an acute state of distress is very beneficial. Not to reach out to the child in such circumstances, could also be re-traumatising.

The damaging long-term effects of this have been extensively researched worldwide and are well documented. In many states of distress, touch can often be the only means of maintaining a connection with the child when he or she can no longer hear or make therapeutic use of the adult's words.

### 2. POSITIVE TOUCH AS A PREVENTATIVE MEASURE

Therapeutic touch can also be appropriate as a way of preventing a behaviour or state of heightened anxiety occurring before it occurs, for example, to calm a pupil or to guide them away from a stressful situation.

### 3. POSITIVE TOUCH TO SUPPORT SENSORY PROCESSING.

Many of our students suffer with sensory processing disorders which can also lead to heightened anxiety and/or sensory seeking behaviours. The use of therapeutic touch in these circumstances is also acceptable. This may include squeezing and hugging providing it is done in an appropriate manner (sideways)

## 4. POSITIVE TOUCH TO SUPPORT POSITIVE BEHAVIOUR AND BUILD RELATIONSHIPS.

Some pupils may seek therapeutic touch in response to positive behaviour. For example, hugging (from the side) tickling or physical play within an appropriate setting. It may also be beneficial to use therapeutic touch to support the building of positive working relationships especially when we consider that many of our pupils are unable to communicate and form bonds through a verbal medium.



#### GUIDELINES AROUND APPROPRIATE TOUCH

For the most part positive touch should only involve the extremities or the back. For example, a hand on the arm or shoulder. Supportive hugs where appropriate should be 'side on' so that genitals are not touching. Obviously positive touch should not involve private areas of the body and should never be done in way which makes the pupil feel uncomfortable or violated. This constitutes a safeguarding issue as described below.

### THE USE OF TOUCH IN THE CONTEXT OF SAFEGUARDING CHILDREN

Hatfield Wick Education staff are aware of touch, which is posing as therapeutic, but which is actually being used to satisfy the practitioner's need for contact rather than that of the children. Naturally, staff are also fully cognisant of touch that is invasive, or which could be confusing, traumatising, or experienced as stimulating in any way whatsoever. Should any such touch be used, it would be deemed as the most serious breach of our Safeguarding Policy. Therapeutic touch is for the benefit of the pupil not the staff member.

### 7. RESTRICTIVE PHYSICAL INTERVENTION

Please note that in the terms of Hatfield Wick Education therapeutic touch is not the same as a restrictive physical intervention. We have a separate policy for this.

### 8. STAFF TRAINING IN USING APPROPRIATE POSITIVE TOUCH

All Hatfield Wick Education staff have received specialist, advanced training from members of the senior leadership team on working with children and young people. All staff have regular clinical supervision to explore specific scenarios such as therapeutic touch and other aspects of their work.

Staff are trained to use touch only when it is necessary in the scenarios mentioned above and only when non-physical means are not enough. The training forms part of staff induction and will take place before staff have direct contact with pupils. In the training staff will be provided information regarding:

- appropriate positive touch;
- when to use positive touch;
- when not to use positive touch;
- how to follow a support/sensory/behaviour/learning plan with regards to positive touch;
- what to do if they are unsure in any way about what is appropriate.

### 9. HELPFUL RESOURCES

https://greatergood.berkeley.edu/article/item/hands on research

https://www.kidsinspire.org.uk/blog/the-benefits-of-positive-touch



https://schoolsweek.co.uk/why-teachers-should-reclaim-the-power-of-touch/