



# JOHN RAY JUNIOR SCHOOL

(part of CHANGE Schools Partnership)

## Safe Touch and Positive Handling Policy

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## 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. Some children will need to access additional support for the social, emotional and mental health needs. Such children, may require support from our Nurture Intervention may have been subject to trauma or distress or may not have had a positive start in life, they may also struggle with attachments and relationships with others. It is with this in mind that staff seek to respond to children's developmental stage and developmental needs by using appropriate safe touch through supporting pupils and through mindfulness and story massage

At John Ray Junior School, we believe that children have the right to independence, choice and inclusion, and we seek to provide opportunities for personal growth and emotional health and wellbeing. However, rights also involve responsibilities, This includes respecting other people's rights.

Our policy takes into account the extensive neurobiological research and studies relating to attachment theory and child development that identify safe touch as a positive contribution to brain development, mental health and the development of social skills. At John Ray Junior School, we have adopted an informed, evidence based decision to allow safe touch as a developmentally appropriate intervention that will aid healthy growth and learning. Our policy rests on the belief that every member of staff need to know the difference between appropriate and inappropriate touch. Hence, staff need to demonstrate a clear understanding of the difference. Equally, when a child is in deep distress, staff are trained to know when and how sufficient connection and psychological holding can be provided without touching.

## Safe Touch

The purpose of safe touch is to improve relationships within the Nurture group as well as promoting improved self-regulation and self-awareness. It supports the principles for Nurture and encourages the appropriate social skills and peer interaction which can then be applied outside the Nurture Group. One tool we use at John Ray Junior School is Story Massage (<https://www.storymassage.co.uk/the-story-massage-programme>).

"The benefits of positive touch are backed by extensive research from the [Touch Research Institute Miami](#) with findings including:

- Improved calmness and concentration
- Increased self-confidence, self-awareness and self-esteem
- Improved social skills
- Increased engagement in activities
- Better communication
- Building respect and positive relationships"

(<https://www.storymassage.co.uk/the-story-massage-programme>).

The use of positive touch is use as an introducing activity to establish a safe, calm environment before starting the Nurture session. This also allows for children to develop strategies to identify tools for self regulation as well as identifying and sharing personal boundaries and respecting the wishes of their peers, it promotes self-awareness and body awareness.

Every adult and child in Nurture has the right to withdraw from elements of positive touch.

## Different types of touch

There are five different types of touch and physical contact that may be used, these are:

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 putting an arm out to bar an exit from a room, taking a child by the hand, 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. Picture support of this is provided in our behaviour policy and staff are also trained on how to effectively use this strategy.

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, cuddling, tickling, sitting on an adult's lap, or hand or foot massage.

3. Contact play:

- 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 an adult chasing and catching the child or an adult and child playing a game of building towers with their hands.

4. Interactive play (rough and tumble play):

- This structured play follows clear rules and is operated under close supervision by staff. It will only ever take place when all participants are in agreement and completely understand the rules. This sort of play releases the following chemicals in the brain:
  - Opioids - 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.

Interactive play may include: throwing cushions each other or using soft foam bats to 'fence' each other.

5. Safe holding (calming and/or support a dysregulating child):

Only trained staff will support a child when behaviour is:

- Unacceptably threatening, dangerous, aggressive or out of control;
- In order to avoid harm to self or others or damage to property;
- To avoid an offence being committed and/or a breakdown of good order and discipline.

### Dysregulation

A child who is in a state of dysregulation and has no mechanism for self-calming or regulating their strong emotional reactions will be supported by staff. Staff will employ the safest and gentlest means of guiding a child, in line with our behaviour policy, which is entirely designed to be therapeutic and to enable the child to feel safe and soothed and bring him or her down from an uncontrollable state of hyper arousal and/or stress. Maintaining boundaries in such cases can be a vital corrective emotional experience, without which the child can be left at risk of actual physical or psychological damage.

The brain does not develop self-soothing neuronal pathways unless this safe emotional regulation has been experienced. Physical containment of a dysregulating child can be the only way to provide the reassurance necessary to restore calm and in some cases the use of a safe hold will be implemented with trained staff.

During any incident of safe hold, staff must seek as far as possible to:

- Lower the child's level of anxiety during the safe hold by continually offering verbal reassurance and avoiding generating fear of injury in the child;

- Cause minimum level of restriction of movement of limbs consistent with the danger of injury (so, for example, will not restrict the movement of the child's legs when they are on the ground unless in an enclosed space where flailing legs are likely to be injured);
- Ensure at least one other member of staff is present.

Steps to take before positive handling prevention strategies and calming measures will be employed and the following action should be taken before a safe hold is used.

- Conversation, de-escalation, distraction, coaxing skills, gentle persuasion or redirection to other activities (e.g. touching the child's arm and leading him / her away from danger, gently stroking the child's shoulder with permission);
- Encourage the child to help him/herself feel more secure by wrapping a blanket tightly around him/herself or holding on tightly to a large cushion or stuffed toy;
- Put distance between the child and others - move others to a safer place;
- Calmly remove anything that could be used as a weapon, including hot drinks, objects, furniture;
- To prevent a child continuing to pose harm in a dangerous situation, advise others to leave, but remain with the child yourself; Provide space for only a short period while waiting for help, preferably where a member of staff can observe the child at a safe distance;
- Keep talking calmly to the child, explain what is happening and why, how it can stop, and what will happen next;
- Use first aid procedures in the event of injury or physical distress when safe to do so.

*There are some situations where those without training might find it reasonable to use a degree of force. necessary interventions are fully in line with guidelines set out in the Government Document 'Use of Reasonable Force in School' (DfEE 2013) and in the Education Act Section 550A.*

- *Everyone has the right to defend themselves against an attack provided they do not use a disproportionate degree of force to do so.*
- *In an emergency, for example, if a child was in immediate risk of injury or on the point of inflicting injury on someone else, any member of staff would be entitled to intervene.*

### **Sharing Information**

A detailed written statement recording a physical safe hold will be made as soon as possible after the incident in the safe hold incident book by all staff members present, including witnesses and must include:

- What took place, to and by whom, it's severity and how long it lasted;
- What effects there were and to whom;
- Circumstances leading up to the incident (who was involved, time of day and where it occurred, what activities were taking place etc);
- Actions that were taken by staff to avoid restraining;
- Details of other children or staff who were present at the time.
- Parents and cares must be informed by the Headteacher or senior leaders.

A copy of the written statement will be shared with the Headteacher.

Staff will identify what actions would be appropriate for future use and prevention, including environmental/policy/procedural change.