

# St. Joseph's R.C. Primary School

George Row, London SE16 4UP

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Headteacher: Mr. M. Macauley



Monday 10<sup>th</sup> October 2016

Dear Parents/Carers,

We would like to provide an opportunity for your child to take part in some Positive Touch sessions.

This is a new initiative which aims to develop children's physical coordination, fine manipulative skills, sense of touch and personal space. The sessions will be led by Katherine Knight who has worked with children in our school for over eight years developing positive pupil relationships. There will be eight sessions across the year and the first is on Thurs. 3<sup>rd</sup> Nov. 2016.

These sessions will take place in school with members of school staff present, once a week and each session will last for 10 to 15 minutes.

Example activities that will be carried out during this session are:

- Singing action rhymes, such as Round and Round the Garden.
- Clapping games, such as Pat-a-Cake.
- Circle/group games, such as Ring-o-roses and Huggy Bear (children have to get into size of groups called, e.g. Huggy Bear 2 - children get into groups of 2).
- Exploring different activities with puppets, e.g. brushing/twisting hair and dressing teddies with different fastenings on clothes, e.g. buttons, zips, poppers, laces.
- Relaxation strokes, e.g. gentle pressing and tracing different patterns on your partner's back with your finger.
- Exploring different textures using bare feet.
- Exploring different fun toys to promote the gentleness of touch, e.g. ladybird with rolling feet that can be rolled along your shoulders and arms.

As young children learn best through demonstration there will be times during the session when the school staff are required to physically show and assist the children with the different moves/activities. Therefore we require your consent for the tactile nature of these sessions.

If you have any questions please see Miss Alford. Please complete and return the permission slip below by

**Monday 17<sup>th</sup> October 2016.**

Yours sincerely,

Miss Alford  
(Deputy Headteacher)

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I give / do not give (**please mark clearly**) consent for my child \_\_\_\_\_ in \_\_\_\_\_ class to participate in the five Positive Touch sessions.

Signed: \_\_\_\_\_ (Parent / Carer) Print Name: \_\_\_\_\_ Date: \_\_\_\_\_