

Relationships Education & Health Education Policy

(R&HE)

Combined with Personal, Social, Health & Economic Education (PSHE)

Durham Gilesgate Primary School

This policy has been updated in line with current DfE Relationships Education, Relationships and Sex Education and health Education statutory guidance 25 June 2019

Date policy approved/adopted	29 th May 2021- produced
Next review date	September 2021
Approved by:	
Head teacher	
Governor	

Primary Relationships, Sex Education & Health Education Policy Guidance

1. This policy was developed in response to:

- Children and Social Work Act (2017)
- Relationships Education and Relationships and Sex Education (RSE) and Health Education Guidance, (Department for Education June 2019)
- Equality Act, 2010 and schools
- Not Yet Good Enough: personal, social, health and economic education in schools, (Ofsted 2013)
- Special Educational Needs and Disability code of practice: 0-25 years, 2017
- Life Lessons: PSHE and SRE in schools: Fifth Report, (House of Commons Education Committee 2015)
- Keeping Children safe in Education Statutory Guidance, 2018
- Transforming Children and Young People's Mental Health Provision Green Paper (July 2018)

This policy should be read in conjunction with:

- E-safety/Online Policy
- Anti-bullying/Behaviour Policy
- Safeguarding Policy (including child sexual exploitation)
- Equality and Inclusion Policy
- PE, School Sport and Physical Activity (PESSPA) policy and PE & Sport Premium impact reports.

This policy provides the statutory policy content of RSHE whilst also including the school PSHE, responding to our school delivery model which covers all statutory requirements and also ensures we have content meaningful and applicable to pupil need.

2. The engagement and consultation process has involved:

- Pupil focus groups
- Consultation and engagement with parents / carers Remote or in person (parent information leaflet, questionnaires, parent drop ins, review evening)
- Audit and review of current PSHE content and the new RSHE curriculum content with staff and pupils
- Consultation, agreement and implementation of policy by school governors
- Consultation with school staff

This policy template has been developed regard to the DfE Relationships Education, Relationships and Sex Education and Health Education guidance 2019. Taking into consideration changing adolescent bodies which schools have a requirement to teach and strongly links with RSE.

Curriculum Intent

3. Defining our RSHE Programme and our PSHE content

Relationships Education is the building blocks of healthy, respectful relationships, focusing on family and friendships, including online. It gives children and young people the essential skills to build positive, enjoyable, and non-exploitative relationships.

Relationships and Sex Education (RSE) is lifelong learning about physical, sexual, moral, and emotional development. It is about the understanding of the importance of stable and loving

relationships both on and offline, respect, love, and care, for family life. It involves acquiring information, developing skills, and forming positive beliefs, values and attitudes. In our school we will teach relationships education.

Health Education – Physical Health and Mental Wellbeing

The focus in primary should be on teaching the characteristics of good physical health and mental wellbeing. Puberty including menstruation should be covered in Health Education and addressed before the onset of puberty. This should ensure male and female pupils are prepared for changes they and their peers will experience.

There should be a clear progression of what is **Relationships Education**, **Relationships and Sex Education and Health Education (RSHE) at primary school** through to RSHE in secondary school.

Personal Social and Health Education covers much of the content above and in addition, provides our pupils with a broader understanding of healthy, happy lifestyles, fostering skills and knowledge to support them in the modern world.

Pupils with special educational needs and disabilities (SEND)

At Gilesgate Primary School we tailor content and teaching of RSHE to meet the specific needs of pupils at different development stages and use a successive learning approach to ensure that teaching is sensitive, age-appropriate, developmentally appropriate and delivered with reference to the law and the statutory requirements.

4. Principles and Values –

In addition, Durham Gilesgate Primary believes that RSHE should:

- be an integral part of the lifelong learning process, beginning in early childhood (specifically with our 2 year olds and nursery setting onto our Primary) and to continue into adult life.
- Be an embedded learning opportunity across every day and school life
- be an entitlement for all pupils in our care.
- encourage every pupil to contribute to the school community that aims to support each individual as they grow and learn.
- be set within this wider school context and supports family commitment and love, respect and affection, knowledge, and openness. Family is a broad concept; not just one model, e.g. children living with blended families; those living with same sex parents, children looked after, adopted children, extended family. It includes a variety of types of family structure, and acceptance of diversity.
- encourage pupils and staff to share and listen to each other's views and the right to hold/express views. We are aware of different values and opinions to sexual orientation and gender identity without promotion of any family structure. The important values are love, respect, kindness, generosity and care for each other.
- generate an atmosphere where questions and discussion on personal matters can take place without any stigma or embarrassment.
- recognise that parents and carers are the prime educators in teaching their children about sex, relationships and growing up. We aim to work in partnership with parents/carers and pupils, consulting them about the content of programmes.
- recognise that the wider community has much to offer and we aim to work in partnership with other health and education professionals.
- Our main focus is to support pupils for living in a modern world.

RSHE (and PSHE within) has three main elements:

Attitudes and Values

- learning the importance of values, individual conscience and moral choices.
- Learning the value and valuing family life, stable and loving relationships, marriage and civil partnerships.
- learning about the nurture of children.
- Learning the value of and demonstrating respect, love and care.
- exploring, considering and understanding moral dilemmas.
- developing skills including negotiation and decision making.
- The importance of permission seeking/consent and giving, in relationships including online with friends, peers and adults.
- challenging myths, misconceptions and false assumptions about normal behaviour.

This combines our 'school values' themed work too (each month we focus on a school value), which raises the profile of our core value system, school ethos and we celebrate some of our work on our school 'Value Tree' display.

Personal and Social Skills

- learning to manage emotions within relationships confidently and sensitively, including off and online (linked also to our computing policy).
- developing positive self-esteem and confidence.
- developing and demonstrating self-respect and empathy for others.
- making informed choices with an absence of prejudice.
- developing an appreciation of the consequences of choices made and managing conflict (also linked to our behaviour policy)
- empower pupils with the skills to be able to recognise inappropriate/ uncomfortable situations and/or behaviours with their family, peers and adults, interacting online.
- How to report concerns or abuse, and the vocabulary and confidence needed to do so (also linked to our safeguarding policy).

Knowledge and Understanding

- Should know that their bodies belong to them, and the differences between appropriate and inappropriate or unsafe physical, and other, contact
- Know the key facts about puberty and the changing adolescent body, particularly from ages 9 through to age 11, including physical and emotional changes. (Health Education)
- Learn about menstrual wellbeing including the key facts about the menstrual cycle. (Health Education)
- learning about reproduction, human sexuality, gender identity, personal health, emotions and relationships. (Science curriculum, puberty and changing bodies)
- learning about where to go for help or advice in school and how to access a range of local and national support agencies.

5. Aims and Objectives

The aim of RSHE at Durham Gilesgate Primary is to provide balanced factual information about physical and emotional changes, together with consideration of the broader emotional, ethical, religious, and moral dimensions of sexual health. Our RSHE programme aims to prepare pupils for an adult life with appropriate content, suitable to pupils at their early phase of learning at our school in which they can:

- develop positive values and a moral framework that will guide their decisions, judgements and behaviour.
- have the confidence and self-esteem to value themselves and others and respect for individual conscience and the skills to judge what kind of relationship they want.

- understand the consequences of their actions and behave responsibly within personal relationships.
- avoid being pressured into uncomfortable or dangerous situations, including online sharing.
- communicate effectively by developing the appropriate language for sex and relationship issues.
- Understand seeking permission and consent
- develop awareness of their evolving sexuality, gender identity, challenge sexism and prejudice, which is inclusive to all children and young people.
- have sufficient information and skills to protect themselves in a variety of situations including from exploitation.
- be aware of sources of help and acquire the skills and confidence to access advice and support if necessary.

Curriculum Implementation

6. Roles and Responsibilities

The headteacher Mark Turner is responsible for the implementation of the school statutory RSHE content, linking to wider school policy (see p2) and safeguarding. We have school curriculum governors and an appointed PSHE and RSHE focussed Governor(s).

Alison Bancroft is our RSHE and PSHE Subject Leader (current as of Sept 2020)

Katrina Smithson is our Computing and ICT Subject Leader (including computer and online safety content)

RSHE (combining PSHE) content is delivered by class teachers and HLTA with additional outside visitors which may include; school nurse, dental practitioners etc enriching our programme.

7. Organisation and Content of RSHE including WHOLE SCHOOL agreed approaches

Durham Gilesgate Primary specifically delivers RSHE within a blend of curriculum timetabled focus including statutory RSHE content within our PSHE Programme, monthly school value themed work, Zones of Regulation programme delivery and Jigsaw.

Class teachers generally deliver the core content. School staff are usually the best people to work with the pupils on many of the RSHE topics as they are aware of each pupil's individual circumstances and can adapt the content structure and learning activities to support pupil need. Lessons are set within the wider context of the PSHE curriculum and focus more on the emotional aspects of development and relationships, although the physical aspects of puberty and reproduction may also be taught as part of National Curriculum Science. The PSHE Programme and Science National Curriculum are taught in every year.

Health curriculum is also taught within science and within our PE, School Sport and Physical Activity (programme) and is specific to skills, knowledge and application of knowledge within our PE curriculum. Our PE Subject Leader is Mrs. Fowler, assisted by Lorraine Stubbs. We have a whole school approach to reducing sedentary behaviour and improving physical activity levels for our pupils as part of the CMO recommendations for 60 mins of PA per day (30min within school) minimum for all pupils.- see our PESSPA policy.

PSHE curriculum is also delivered with support from professionals where appropriate. Our school nurse is a regular part of our school health care, and related RSE content, supporting pupils

learning. We plan for regular visits, working closely with the local police and other community appropriate links (when safe to do so, virtually and face to face).

Any RSHE lesson may consider questions or issues that some pupils will find sensitive. Before embarking on these lessons, a group/classroom agreement, formally known as a 'charter' are established which prohibit inappropriate personal information being requested or disclosed by those taking part in the lesson. Class teachers will bespoke this idea to the needs of their cohort/class pupils, ensuring 'kind eyes' and positive relationships when sharing and discussing sensitive topics.

When pupils ask questions, we aim to answer them honestly at an age appropriate level and within the group/classroom agreement established at the start of the sessions. If it is felt that answering a specific question would involve information at a level inappropriate to the age and development of the rest of the pupils, the question will be dealt with individually at another time. Children's whose questions go unanswered may turn to inappropriate sources of information.

The above whole school approach includes all school staff including lunchtime supervisors (and/or procedure to support answering children's questions).

More expert or specialist teachers and other professionals may support staff that are uncomfortable with teaching certain aspects of the RSHE curriculum. Support and professional development will be provided for these staff, so that they can develop their confidence in delivering the whole of the RSHE programme.

We also recognise that our pupils respond to both their known teacher(s) and to less known visiting adults when for instance learning about 'puberty' and we are flexible in blending our approach to best support pupils' learning in a positive and constructive environment.

At Gilesgate Primary all staff will use scientifically correct vocabulary to avoid misunderstandings and ambiguity. The vocabulary used will include penis, vulva, vagina, testicle, scrotum, breasts and pubic hair. A list of vocabulary is made available on the school website.

8. Planning:

Long Term Planning

Our Planning Framework is based around Jigsaw which has 6 Puzzle Pieces each Year. Within Each Puzzle Piece work is differentiated for each year group so that there is a spiral curriculum with knowledge and skills building year on year as children progress through the school.

The Six Puzzle Pieces are

- Being Me in My World
- Celebrating Difference
- Dreams and Goals
- Healthy Me
- Relationships
- Changing Me

This means that we can fully meet our requirements to teach Relationships Education and Health Education within a broader curriculum for Personal, Social, health and Economic Education.

Medium Term Planning and resources

Class teachers: The class teacher uses the MT planning provided by Jigsaw to structure the sequence of individual lessons across each term.

SEND: As discussed earlier (p3) Staff use the planning document flexibly with their cohort, adapting it to the unique needs and abilities of our pupils, as their development will not necessarily correspond to their chronological age or their key stage in many aspects of their learning in PSHE and RSE & Health Curriculum. Much of the learning will be revisited and consolidated with a focus on the quality of learning rather than the quantity of 'topics' covered.

Curriculum Impact

10. Assessment & Learning

Assessment is an ongoing process within quality teaching and learning.

Formalised assessment and any recording is carried out where appropriate, for example, at the end of every module and involves teacher, pupil and peer assessment of knowledge and understanding, interpersonal skills, and attitudes linked to a successive-outcomes from long term and medium term planning.

At Durham Gilesgate we believe in the PSHE Association assessment model; "It is important for pupils to have opportunities to reflect on their learning and assessment increases pupils' motivation and improves learning as their raised awareness of their development illustrates the value of their learning. It is important for teachers to feel confident that learning has taken place, to be able to demonstrate progress, and to identify future learning needs." This model of working is built into Jigsaw, It also allows SLT, governors and inspectors to see the impact that RSHE/PSHE education is having for pupils and for whole school outcomes; including Ofsted judgements on personal development, behaviour and welfare, safeguarding, spiritual, moral, social and cultural (SMSC) development and the promotion of fundamental British values. We value the opportunity to demonstrate the Impact of our Implemented curriculum.

The model of assessment that is most meaningful in PSHE education is ipsative assessment. Ipsative assessment is based on the pupil's previous work, rather than performance against externa criteria and standards, the focus being upon the pupil aiming to improve their 'personal best'. The benchmark against which progress is measured is the pupil's own starting point.

Assessing learning in PSHE education must therefore use a combination of teacher assessment and pupil self- and peer assessment.

e.g. pupils themselves will be able to judge, for instance, whether they feel more confident, or have a firmer sense of their own beliefs and opinions than they did before a particular series of lessons. Such personal reflection in RSHE/PSHE education lessons is essential, so ensuring pupils have time and space within the lessons to reflect on this, either privately or through discussion, is a vital part of the assessment process.

The learning we wish to assess will relate to our school RSHE/PSHE curriculum aims, values and outcomes (p3-6) for instance; pupils' attributes and skills (such as resilience, negotiation, self-awareness, risk management and interpersonal skills), as well as the knowledge and understanding related to the context (for example bullying, consent, mental and emotional health).

The following planned activities/pedagogy (not exhaustive) may provide class teachers an insight into their pupils' starting (baseline) or ending (end of lesson/unit) point:

Questioning, discussion, brainstorming, role-play and other drama techniques, storyboards/scenario scripts, mind map and spider diagrams, working walls, quiz, continuum/washing line, comfort curves/confidence rating, drawing, explaining, card sorting etc.

Additional ideas to challenge pupils to demonstrate and articulate their understanding could include; journal writing, presentations, producing resources and materials to teach younger pupils e.g. Y3 healthy eating and teeth science topic - Y5/6 group activity with younger pupils linked to Healthy lifestyles and messages to 'our younger self'. Cross curricular links to skills and knowledge (e.g. designing a computer game in coding to promote healthy eating).

11. Blended and online learning (school lockdown / bubble closures)

We pride ourselves on providing 'appropriate' PSHE/RSHE curriculum learning during such 'home schooling' necessary arrangements. Remote learning has developed over the pandemic outbreak and includes; Class teachers sign posting parents to resources and areas of learning e.g. Purple mash. Class teacher's plan learning linked to appropriate priorities of learning (i.e wellbeing).

We are developing a whole school systematic approach to virtual learning within our school contingency plans to continue a subject curriculum continues, whilst also supporting families.

We understand that **some** RSHE content is not appropriate to be taught distantly. We regularly consult staff to prioritising content appropriate to distant learning and pupil safety during these times, recognising gaps in learning. At school re-opening we prioritise learning and ensure for instance- preparation for secondary transition.

12. Inclusion

Ethnic, Cultural and Religious Groups

We intend our policy to be sensitive to the needs of different ethnic, cultural and religious groups. We encourage parents /carers to discuss any concerns with the Head teacher.

Pupils with Special Needs

We will ensure that all pupils receive relationships education and relationships and sex education, and we will offer provision appropriate to the needs of all our pupils, taking specialist advice where necessary.

Gender, Identity and Sexual Orientation

We have ensured that teaching about gender, identity and sexual orientation is fully integrated into our programme of study. We aim to deal sensitively and honestly with regard of sexual orientation and gender identity, answer appropriate questions and offer support. Pupils, whatever their developing gender identity and sexuality need to feel that relationship education is relevant to them.

13. Working with parents/carers and the wider community

Here at Durham Gilesgate Primary School we believe the role of parents in the development of their children's understanding about relationships is vital. Parents/carers are the first educators of their children. Therefore, we will ensure that we work closely with parents/carers to ensure they are aware what is taught and when. This policy and information on what will be taught and when will be freely available on our schools' website for parent/carers to access.

In the current climate we may need to be creative in the methods we choose to engage and consult with our parents. Examples we have and continue to use are; online surveys, 'Teams' meeting or Q & A webinars.

14. Right to be excused from Sex Education

Many schools choose to cover some additional content on sex education which is tailored to the age and the physical and emotional maturity of their pupils. Our policy and medium-term planning makes it clear what will be taught and when. Normally we would not plan to go beyond the teaching of the science curriculum, teaching about puberty and changing bodies. As stated on page 5:-

• learning about reproduction, human sexuality, gender identity, personal health, emotions and relationships. (Science curriculum, puberty and changing bodies)

We can offer parents support in talking to their children and believe that by informing parents of the content we can help empower parents to continue discussions at home and strengthen parental engagement.

Parents have the right to withdraw their children from some or all of the sex education that <u>goes beyond the national curriculum for science</u>. (They cannot withdraw from the statutory science curriculum) Similarly, there is no right to withdraw from Relationships Education or Health Education. Alternative arrangements and purposeful education would need to be made in such cases. Parents are be encouraged to discuss their concerns and / or decisions with the Head Teacher at the earliest opportunity. The head teacher/RSHE lead will document the process and outcome. Parents/carers are welcome to review any RSHE resources the school uses and encouraged to ask questions to gain clarity when needed.

15. Safeguarding reports of abuse and confidentiality

It should be made clear to pupils that all adults in school cannot guarantee absolute confidentiality. This is made clear when forming our class/group agreements about discussing sensative issues.

A child under 13 is not legally capable of consenting to sexual activity. Any offence under The Sexual Offences Act 2003 involving a child under 13 is very serious and should be taken to indicate a risk of significant harm to the child. Cases involving under 13's should always be discussed with the nominated designated safeguarding lead. (Mr. Turner)

Under the Sexual Offences Act, penetrative sex with a child under the age of 13 is classed as rape. Therefore, in all cases where the sexually active young person is under 13, a referral should be made to First Contact, naming the young person, and the sexual partner if known. Following this, a Strategy Meeting or discussion will be held. The meeting will involve a Team Manager, Social Worker, Police, Health Worker, Education and Welfare and other relevant agencies, to discuss next steps.

Where the allegation concerns penetrative sex, or other intimate sexual activity occurs, there would always be reasonable cause to suspect that a child, whether girl or boy, is suffering or likely to suffer significant harm. All cases involving under 13s should be fully documented and reported.

Health professionals in school are bound by their codes of conduct but have a duty to share information with relevant others, if they believe that a child is suffering abuse.

These procedures should be read in conjunction with the Durham Safeguarding Children's Partnership procedures (link) with special reference to Sections 3 'Referral and Investigation' and Section 6.13 'Sexually Active Children under 18' – 'Young People under the age of 13'

Please see our school Safeguarding Policy and Procedure (September 2021)

16. Monitoring and Evaluation of RSHE

It is the responsibility of the Head Teacher/ Leadership Team to oversee and organise the monitoring and evaluation of PSHE, in the context of the overall school plans for monitoring the quality of teaching and learning. The PSHE programme will be treated as a subject and will be involved in a yearly monitoring and evaluation exercise led by the Leadership Team.

The Governing body is responsible for overseeing, reviewing, and organising the revision of the sex and relationship education policy and curriculum.

Ofsted is required to evaluate and report personal development, behaviour and welfare as well as spiritual, moral, social and cultural development (SMSC) of pupils. This may include evaluating and commenting on the school's relationship and sex education policy, curriculum, staff development, and quality of provision.