

Normand Croft Community School

An International Family of Learners

Ageed and adopted by:	Curriculum and Acheivement	
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1. Aims

The aims of relationships, health and sex education (RHSE) at our school are to:

- a. empower children to be safe and safeguarded
- b. provide a framework in which sensitive discussions can take place
- c. teach children to be kind, understanding and respectful of others even if they are perceived as different
- d. teach children that people have rights but there are also responsibilities that go with these
- e. teach children that there are laws to protect them and others from being hurt or abused and helps protect them from bullying
- f. help clarify (age-appropriately) questions that children may have about the world
- g. teach pupils the correct vocabulary to describe themselves and their bodies
- h. enable children to understand and respect their bodies, and be able to cope with the changes puberty brings, without fear or confusion
- i. help children develop positive and healthy relationships appropriate to their age, development etc. (respect for self and others)
- j. support children to have positive self-esteem and body image, and to understand the influences and pressures around them.

2. Statutory requirements

- a. As a maintained primary school we must provide relationships education to all pupils as per section 34 of the Children and Social work act 2017
- b. As a school we also provide sex education as part of our PSHE curriculum as well as the elements of sex education contained in the science curriculum.
- c. In teaching RHSE, we must have regard to <u>guidance</u> issued by the secretary of state as outlined in section 403 of the and from 2020 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_d ata/file/780768/Government Response to RSE Consultation.pdf
- d. At Normand Croft Community School, we teach RHSE as set out in this policy.

3. Policy development

This policy has been developed in consultation with staff, pupils and parents. The consultation and policy development process involved the following steps:

- a. review The SLT pulled together all relevant information including relevant national and local guidance
- b. staff consultation teaching staff were given the opportunity to contribute to the policy and make recommendations

- c. parent/stakeholder consultation parents were invited to attend meetings to give their views and as a result we have moved some of the sex education lessons to older year groups.
- d. pupil consultation
- e. the presentation to parents was shared with governors
- f. ratification once amendments were made, the policy was shared with governors and ratified.

4. What is Relationships, Health and Sex Education?

a. The Government's definition is this:

"It is lifelong learning about physical, moral and emotional development. It is about the understanding of the importance of marriage for family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality, and sexual health. It is not about the promotion of sexual activity – this would be inappropriate teaching." (Department for Education and Employment, SRE Guidance, 2000)

b. Currently, PSHE (Personal, Social, Health Education) remains a non-statutory subject, and section 2.5 of the National Curriculum framework document states that: 'All schools should make provision for personal, social, health and economic education (PSHE), drawing on good practice.'

5. Curriculum

- a. Teaching about safety and relationships as part of PSHE and HSRE contributes to our school's approach to safeguarding children.
- b. It helps children to recognise when they and others are at risk and equips them with the skills, strategies and language they need to take appropriate action.
- c. This is crucial to fulfilling statutory duties in relation to safeguarding pupils as well as to meeting Ofsted expectations.
- d. Ofsted expressed concern in its 2013 PSHE report that a lack of high-quality, ageappropriate RSE in over a third of schools left young people vulnerable to inappropriate sexual behaviours and exploitation.
- e. It is clear, therefore, that PSHEand RSHE plays a vital part in helping to meet school's responsibilities to safeguard their pupils, your children.
- f. Our curriculum is set out as per Appendix 1 but we may need to adapt it as and when necessary.
- g. We have developed the curriculum in consultation with parents, pupils and staff, taking into account the age, needs and feelings of pupils.
- h. If pupils ask questions outside the scope of this policy, teachers will respond in an appropriate manner so they are fully informed and do not seek answers online.
- i. For more information about our curriculum, see our curriculum map in Appendix 1.

6. Delivery of RSE

- a. The Jigsaw teaching materials and Christopher Winter Project (CWP) materials integrate PSHE, RHSE emotional literacy, social skills and spiritual development in a whole-school approach.
- b. The Jigsaw PSHE relationship and Christopher Winter RHSE education units of work aim to give children their entitlement to information about relationships, puberty and human reproduction, appropriate to their ages and stages of development.
- c. This work is treated in a matter-of-fact and sensitive manner to allay embarrassment and fear and helps children to cope with change, including puberty and to learn about families, friendships and healthy relationships.
- d. RHSE is taught within the personal, social, health and economic (PSHE) education curriculum. Biological aspects of RHSE are taught within the science curriculum, and other aspects are included in relationships education (RE).
- e. In Years Five and Six, pupils also receive stand-alone Relationships and Health education sessions delivered by a trained health professional.
- f. Relationships education focuses on teaching the fundamental building blocks and characteristics of positive relationships including:
- g. Some of the key aspects covered in the course of Key Stages 1 and 2 are:
 - i. Life cycles
 - ii. Growing from young to old
 - iii. Friendship and family life
 - iv. Family stereotypes
 - ٧. Assertiveness and self-respect
 - Safeguarding vi.
- Self and body image vii.
- viii. Attraction
 - Relationship skills e.g. conflict resolution ix.
 - Accepting change х.
 - xi. Looking ahead
- Moving/transition to secondary school xii.
- xiii. My changing body
- xiv. Puberty
- How babies are made XV.
- xvi. Becoming a teenager
- h. These areas of learning are taught within the context of family life taking care to ensure that there is no stigmatisation of children based on their home circumstances (families can include single parent families, LGBTQ + parents, families headed by grandparents, adoptive

parents, foster parents/carers amongst other structures) along with reflecting sensitively that some children may have a different structure of support around them (for example: looked after children or young carers).

7. What will my child actually be taught in Relationships and Health Education?

- a. We use lessons devised by Christopher Winter Project (CWP) which has enabled us to increase our focus on families, relationships, safeguarding/keeping children safe as well as additional units on Respect and Equality and FGM. These resources encourage children to develop the skills of listening, empathy, talking about feelings and relationships with families and friends.
- b. In Reception, we focus on families and friendships. From Year 1, children will learn the names of the body parts, the differences between males and females and the ways in which they will develop and grow. Importantly, they will also learn to recognise unsafe and risky situations and to ask for help.
- c. The curriculum continues to develop their knowledge and skills as they learn about the physical and emotional changes of puberty and about reproduction.
- d. In Year 6, we have added an extra lesson on internet safety and communication in relationships.
- e. If a question from a child arises and the teacher feels it would be inappropriate to answer, (for example, because of its mature or explicit nature), the child will be encouraged to ask his/her parents or carers at home, and the question will not be answered to the child or class if it is outside the remit of that year group's programme.
- f. All lessons are taught using simple, child-friendly language and pictures, which help children understand changes more effectively.
- g. Relationships and Health Education CWP Curriculum Overview:
 - i. Reception - Family & Friendship
 - ii. Year One – Growing and Caring for Ourselves (scientific vocabulary – (penis; vulva; vagina)
 - iii. Year Two – Differences: male and female animals; naming body parts (scientific vocabulary – penis; testicles; vulva; nipples)
 - Year Three Valuing Difference and Keeping Safe: body differences; personal space; iv. help and support
 - Year Four Growing Up: Changes; Healthy Relationships; What is puberty? ٧.
 - Year Five Puberty and the Reproductive System (separate boys and girls sessions) vi.

- vii. Year Six Puberty, Relationships and Reproduction; families, conception & pregnancy; online relationships
- h. The key concepts that children learn in PSHE and RHSE are inner strength, self-esteem and resilience. These are really important as they help keep children safe and it helps them make healthy decisions later in life.
- Accurate information is important but only part of the picture: help them now by building their inner resilience, so they become mindful children, mindful teenagers, and mindful adults.

8. Roles and responsibilities

The governing body

a. The governing body has delegated the approval of this policy to the curriculum and assessment committee and will hold the Head Teacher to account for its implementation.

The Head Teacher

b. The Head Teacher is responsible for ensuring that RSE is taught consistently across the school, and for managing requests to withdraw pupils from non-statutory/non-science components of RSE.

Staff

- c. Staff are responsible for:
- i. delivering RSE in a sensitive way
- ii. modelling positive attitudes to RSE
- iii. monitoring progress
- iv. responding to the needs of individual pupils
- v. responding appropriately to pupils whose parents wish them to be withdrawn from the non-statutory/non-science components of RHSE.
- d. Staff do not have the right to opt out of teaching RHSE. Staff who have concerns about teaching RHSE are encouraged to discuss this with the Deputy Head Teacher.

Pupils

a. Pupils are expected to engage fully in RHSE and, when discussing issues related to RHSE, demonstrate our shared values of unity, trust, responsibility and respect and treat others with sensitivity.

9. Parents' right to withdraw

- a. Up until September 2020, parents have the right to withdraw their children from the non-statutory/non-science components of relationships and sex education within RHSE.
- b. Requests for withdrawal should be put in writing using the form found in Appendix A of this policy and addressed to the Head Teacher. A copy of withdrawal requests will be placed in the pupil's educational record. The Head Teacher will discuss the request with parents and take appropriate action.

c. Alternative work will be given to pupils who are withdrawn from sex education.

10. Professional development

- a. Staff development on the delivery of RHSE is available and is included in our continuing professional development programme and is also available through individual coaching where requested.
- b. Visitors from outside the school, such as school nurses or sexual health professionals, may also provide support and training to staff teaching RHSE.

11. Monitoring arrangements

- a. The delivery and effectiveness of RHSE/PSHE curriculum is monitored by the Designated Safeguarding Leads and the Curriculum Lead for PSHE through:
 - i. talking to children, work scrutiny, learning walks, etc.
 - ii. our internal assessment systems by class teachers

Appendix A: Parent form: withdrawal from sex education within RHSE

TO BE COMPLETED BY PARENTS					
Name of child		Class			
Name of parent		Date			
Reason for withdrawing from sex education within relationships health and sex education					
Any other information you would like the school to consider					
Parent signature					

TO BE COMPLETED BY THE SCHOOL		
Agreed actions from discussion with parents	Include notes from discussions with parents and agreed actions taken.	