



Durham Johnston

RELATIONSHIPS & SEX EDUCATION AND HEALTH EDUCATION (RSHE)

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| 1 | SUMMARY | This policy clarifies the schools approach to sex and relationships education and health education (RSHE) for all staff, pupils, governors, parents and carers, external agencies and the wider community. | | | |
| 2 | RESPONSIBLE PERSON: | Headteacher, Assistant Headteacher with responsibility for Personal Development, P Kennedy and Pupil & Staff Wellbeing Committee | | | |
| 3 | APPLIES TO: | All | | | |
| 4 | GROUPS/ INDIVIDUALS WHO HAVE OVERSEEN THE DEVELOPMENT OF THIS POLICY: | Headteacher, Assistant Headteacher with responsibility for Personal Development, P Kennedy and Pupil & Staff Wellbeing Committee | | | |
| 5 | RATIFYING COMMITTEE(S) & DATE OF FINAL APPROVAL: | Governors Pupil & Staff Wellbeing Sub-Committee | | | |
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1. Introduction

Statutory Guidance

The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations 2019 made under sections 34 and 35 of the Children and Social Work Act 2017 make Relationships Education compulsory for all pupils receiving primary education and Relationships and Sex Education (RSE) compulsory for all pupils receiving secondary education. The regulations also make Health Education compulsory in schools:

This policy was developed in response to:

- Relationships Education, Relationships and Sex Education (RSE) and Health Education Guidance, DfE June 2019
- Keeping Children Safe in Education- Statutory Guidance, 2021 Update
- Behaviour & Discipline in Schools 2016
- Special Educational Needs and Disability code of practice: 0-25 years, 2017
- Alternative Provision 2013
- Transforming Children and Young People's Mental Health Provision, Green Paper, July 2018
- Preventing & Tackling Bullying 2017 & Cyberbullying Guidance for Schools
- Promoting Fundamental British Values 2014
- Children and Social Work Act, 2017
- National Citizens Service 2014
- Not Yet Good Enough: Personal, social health and economic education in schools, Ofsted 2013
- Life Lessons: PSHE and SRE in schools: Fifth Report, House of Commons Education Committee, 2015

This policy should be read in conjunction with:

- E-safety/Online Policy
- Anti-bullying/Behaviour Policy
- Safeguarding Policy (including child sexual exploitation and harmful sexualised behaviours)
- Equalities Policy

2. Policies statement

The policy is a working document that aims to:

- Clarify the legal requirements and responsibilities of the school.
- Clarify the schools approach to sex and relationships education (RSE) for all staff, pupils, governors, parents and carers, external agencies and the wider community.
- Provide a basis for evaluating the effectiveness of the school RSE programme
- Reinforce the role of the school in contributing to local and national strategies.

This policy applies to all staff, pupils, parents and carers, governors and outside agencies working within the school.

A copy of the policy can be found in/on:

- School website

This document will be disseminated to:

- Staff: electronically and in paper format, if required
- Governors: through school website and in paper format, if required
- Parents: through school website and in paper format, if required
- Pupils: through school website and in paper format, if required.

2. The engagement and consultation process has Involved:

- Student focus groups
- Consultation and engagement with parents / carers- Remote or in person
- Review of RSE curriculum content with staff, students and parents/carers
- Consultation with wider school community e.g. school nurse, Education Durham
- Consultation, agreement and implementation of policy by school governors
- Consultation with RSE Commission

3. Rationale

3.1 The needs of young people and the role of our school

To embrace the challenges of creating a happy and successful adult life, students need knowledge that will enable them to make informed decisions about their wellbeing, health and relationships and to build their self-efficacy. Students can also put this knowledge into practice as they develop the capacity to make sound decisions when facing risks, challenges and complex contexts. Everyone faces difficult situations in their lives. These subjects can support young people to develop resilience, to know how and when to ask for help, and to know where to access support.

High quality, evidence-based and age-appropriate teaching of these subjects can help prepare students for the opportunities, responsibilities and experiences of adult life. They can also enable schools to promote the spiritual, moral, social, cultural, mental and physical development of students, at school and in society. The duties on schools in this area are set out in legislation. (Relationships Education, Relationships and Sex Education (RSE) and Health Education, DfE 2019)

Given the increasing concerns around child sexual abuse and exploitation and the growing risks associated with growing up in a digital world, there is a particularly compelling case to act in relation to pupil safety.

As a great school gives students self-knowledge, so Johnston aims to produce self-reflective, confident and articulate young people at ease in the world. We work to make our community safe and welcoming, happy and supportive. We offer education to meet each student's needs. We share a common commitment to safeguard and promote the welfare of children and young people. Johnstonians have an ethic of hard work, public service and global citizenship. We want to be central to the life of Durham City.

Young people learn about sex and relationships from a very young age. Some of the

things they learn are incorrect, confusing and frightening. In a world where sex is used to advertise goods and services and celebrities lives become everyone's business, we should talk to young people to help them to make sense of it all.

Significant progress has been made in the improvement of sexual health and although rates of teenage pregnancy, abortion and sexually transmitted infection in the UK are still among the highest of all European countries, teenage pregnancies in women 15-17 has fallen to its lowest level since records began in 1969 (Office for National Statistics published 2013). The Government has developed a comprehensive strategy and RSE for pupils in both primary and secondary schools is seen, alongside other initiatives, as a key element. Our schools approach to RSE is in line with the Government's strategy and guidance given to schools in Relationships Education, Relationships and Sex Education (RSE) and Health Education, DfE 2019

Research has shown that young people who feel good about themselves, and are knowledgeable and confident about sex and relationships, are more likely to be more discerning in their relationships and sexual behaviours and to have fulfilling relationships.

Research also demonstrates that good, comprehensive sex and relationship education does not make young people more likely to enter into sexual activity. Indeed, it can help them learn the reasons for, and the benefits to be gained from, delaying such activity.

3.2 What is Relationships and Sex Education and Health Education (RSHE)?

Relationships and Sex Education (RSE)

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 essential skills and forming positive beliefs, values and attitudes.

RSE gives young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. RSE gives children and young people the essential skills to build positive, enjoyable and non-exploitative relationships.

Health Education - Physical Health and Wellbeing

Health education builds on the primary content to enable students to understand their changing bodies and their feelings to further the language they use to talk about their bodies, health and emotional norms. In addition to understanding variations in emotions and physical complaints and where health and wellbeing issues and concerns begin. Health education enables making the connections between physical and emotional changes, the impact on physical health and wellbeing, their capacity to learn and maintain their mental health and wellbeing.

Pupils with special educational needs (SEND) In special schools and for some SEND students in mainstream schools, there may be a need to tailor content and teaching to meet specific needs of pupils at different developmental stages. Schools should ensure their teaching is sensitive, age appropriate, developmentally appropriate and delivered with reference to the law.

3.3 Why is relationships and sex education and health education in schools important?

High quality RSHE helps create safe school communities in which pupils can grow, learn, and develop positive, healthy behaviour for life. It is essential for the following reasons:

- Children and young people have a right to good quality education, as set out in the United Nations Convention on the Rights of the Child.
- Children and young people want to be prepared for the physical and emotional changes they undergo at puberty, and young people want to learn about relationships. Older pupils frequently say that sex and relationships education was 'too little, too late and too biological'. Ofsted reinforced this in their 2013 *Not Yet Good Enough* report.
- RSE plays a vital part in meeting schools' safeguarding obligations. Ofsted is clear that schools must have a preventative programme that enables pupils to learn about safety and risks in relationships.
- Schools maintain a statutory obligation under the Children Act (2004) to promote their pupils' wellbeing, and under the Education Act (1996) to prepare children and young people for the challenges, opportunities and responsibilities of adult life. A comprehensive RSE programme can have a positive impact on pupils' health and wellbeing and their ability to achieve, and can play a crucial part in meeting these obligations.

4. Principles and Values

4.1 The RSHE programme at Durham Johnston School reflects the school ethos and demonstrates the following values:

- Respecting self
- Respecting others
- Responsibility for own actions
- Responsibility for others
- Recognising healthy/un-healthy relationships
- Resilience

In addition, Durham Johnston believes that RSHE should:

- Be an integral part of the lifelong learning process, beginning in early childhood and continue into adult life.
- Be an entitlement for all young people
- Encourage every student to contribute to make our community and 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. It includes acceptance of families in all their forms.
- Encourage students and teachers to share and listen to each other's views and the right to hold/ express views.
- We are aware of different approaches to sexual identity, without promotion of

a particular family make up. The important values are love, respect, kindness, generosity and care for each other.

- Generate an atmosphere where questions and discussion on sexual matters can take place without any stigma or embarrassment.
- Recognise that parents/carers are the key people in teaching their children about relationships, growing up, health and wellbeing and sex. We aim to work in partnership with parents, carers and students, 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

4.2 RSHE here at Durham Johnston has three main elements:

1. Attitudes and values
2. Personal and social skills
3. Knowledge and understanding

A fuller account of what exactly constitutes each of the above elements can be found in *Appendix 1*.

The overall aims of the Relationships & Sex Education and Health Education programme here at Durham Johnston are to provide balanced, factual information about human reproduction, together with consideration of the broader emotional, ethical, religious, and moral dimensions of sexual health. Our RSHE programme aims to prepare students for an adult life in which they can:

1. Dispel myths.
2. Explore a range of attitudes towards RSHE issues and reach their own informed views and choices for a healthier lifestyle.
3. They will develop positive values and a moral framework that will guide their decisions, judgments and behavior.
4. 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.
5. Develop respect and care for others.
6. Develop skills relevant to effective management of relationships and sexual situations. Examples include communication with and empathy towards others, risk assessment, assertiveness, conflict management, decision making, seeking help and helping others.
7. Understand the consequences of their actions and behave responsibly within sexual and pastoral relationships.
8. Avoid being exploited or exploiting others or being pressured into unwanted or unprotected sex including violence in teenage relationships and including online safety.
9. Communicate effectively by developing appropriate terminology/language for sex and relationship issues.
10. Develop awareness of their sexuality and understand human sexuality; gender identity, challenge sexism and prejudice, and promote equality and diversity.

11. Understand the arguments for delaying sexual activity and the reasons for having protected sex.
12. Have sufficient information and skills to protect themselves and, where they have one, their partner from exploitation, abuse and violence including uninvited/unwanted conceptions and sexually transmitted infections.
13. Be aware of sources of help and acquire the skills and confidence to access confidential health advice, support and treatment if necessary
14. Know how the law applies to sexual relationships, including consent and importance of 'delay'. Including the law in relation to sharing/owning sexual digital images whether consensual or not.

4.3 Content

The programme we follow at Durham Johnston School is based on national guidelines provided by the DfE and is sensitive to the age and experience of our pupils.

The RSHE events are delivered by external experts, using the results of pupil voice surveys carried out for each year group throughout the year.

It is delivered mainly through the Science curriculum and PSHE lessons/events, as well as informally through other subject areas and the ethos of the school. A table outlining how Science contributes to Relationships and Sex Education can be found in Appendix 2.

5. Delivery of the programme

The school acknowledges that high-quality, evidence-based and age-appropriate teaching can help pupils prepare for the opportunities, responsibilities and experiences of adult life as well as promoting the spiritual, moral, social, cultural, mental and physical development of pupils both at school and in society.

RSE will be set in the context of a wider whole-school approach to supporting pupils to be safe, happy and prepared for life beyond school. The curriculum on relationships and sex will complement and be supported by the school's wider ethos and approach on behaviour, inclusion, respect for equality and diversity, anti-bullying and safeguarding. RSE will sit within the context of the school's broader ethos and approach to developing pupils socially, morally, spiritually and culturally, and its pastoral care system.

The curriculum on health education will similarly complement, and be supported by, the school's education on healthy lifestyles through physical education, food technology, science and its sport, extra-curricular activity and school food.

Effective teaching will ensure that core knowledge is broken down into units of manageable size and communicated clearly to students, in a carefully sequenced way, within a planned programme of lessons. Teaching will include sufficient well-chosen opportunities and contexts for pupils to practise applying and embedding new knowledge so that it can be used skilfully and confidently in real life situations.

The Assistant Headteacher and their team will work closely with colleagues in related curriculum areas to ensure Relationships Education, RSE and Health Education programmes complement each other and do not duplicate, content covered in national curriculum subjects such as citizenship, science, computing and PE.

Pupils with special educational needs and disabilities (SEND)

Relationships Education, RSE and Health Education will be accessible for all pupils. High quality teaching is differentiated and personalised, this is the starting point to ensure accessibility for all pupils. Staff will also be mindful of the preparing for adulthood outcomes as set out in the SEND code of practice, when preparing these subjects for pupils with SEND. The school is aware that some pupils are more vulnerable to exploitation, bullying and other issues due to the nature of their SEND. Relationships Education can also be a priority for some pupils, for example some with Social, Emotional and Mental Health Needs or learning disabilities. For some students there may be a need to tailor content and teaching to meeting the specific needs of children at different development stages.

As well as a whole school approach to RSE (see *Appendix 4*); RSHE is also part of our National Curriculum Science Programme-see *Appendix 2*. Other aspects are delivered mainly via PSHE lessons/events and Citizenship lessons/events but may also occur in other subject areas, such as RE. RSHE is taught mainly via:

1. Year 7 PSHE lessons: relationships and healthy lifestyles units.
2. RSHE specific events: relationships, feelings STI's and contraception.
3. Half-termly, form-time themes, led by consultation with year leaders - each half term to have a different theme.
4. Collaboration with sixth form on 'change your mind' project - aim being that sixth form students (in groups) create and deliver resources to year groups further down the school around issues on mental health and wellbeing.
5. Small group work with targeted individuals in year 8 and year 9 around building positive relationships and battling toxic masculinity. In particular a focus on abusive relationships, and the influence of drugs/alcohol on relationships and STI transmission (also led by consultation with the school's pastoral team).
- Last week of school year is set aside as 'Enrichment Week' which enables students to access workshops designed to encourage every student to contribute to make our community and aims to support each individual as they grow and learn. Guest speakers include 'Show Racism The Red Card', 'If You Care Share', 'Ensemble' music event, 'Talk the Talk', 'Stand Against Violence' workshops, 'Stray Aid as well as animal and bug introduction workshops.
6. Key stage three Science (see *Appendix 2*)
7. Key stage four Science (see *Appendix 2*)
8. Informally through other lessons dealing with relationships. Sex and relationships issues and through the ethos of the school (cross-curricular mapping ongoing).

RSHE involves consideration of a number of sensitive issues about which different people may hold strong and varying views. The school's approach to RSHE will be balanced and take account of, and be sensitive to, different viewpoints but will not be based on personal bias. We shall endeavor to have an approach that is educational, rather than one based on propaganda.

PSHE is taught in the context of relationships using a variety of formal and informal strategies and opportunities. This helps all young people to develop their self-esteem

and emotional wellbeing, thus helping them to form and maintain worthwhile and satisfying relationships, which are based upon respect for themselves and for others.

6. Methodology and Resources

Teaching will be based on an understanding that a variety of interactive and participatory teaching methods will be used to ensure all pupils are fully involved.

7. Staff Training

Trained professionals who look at a range of issues with the pupils and raise awareness of topics identified by pupil voice survey deliver the RSE events at Durham Johnston. All of these staff are provided with support and detailed SOW to help them deliver effective Sex and Relationships Education and respond to situations with consistency and sensitivity, taking account of religious, social and cultural issues. Concerning sexting and the use of technology, staff receive e-safety training.

8. Inclusion

Information regarding inclusion and the access of RSHE for our students can be found in *Appendix 3*.

9. Partnership with Parents/Carers and the right to withdraw

The school acknowledge the key role that parents/carers play in the development of their children's understanding about relationships. Parents are the first educators of their children. They have the most significant influence in enabling their children to grow and mature and to form healthy relationships. Most of a pupil's informal relationships and sex education occurs within the family and the school's programme will complement and build on this. We will share responsibility for the education of pupils, with parents, who will be kept informed via sharing of the RSE policy, a letter outlining RSE events, and leaflets home/website links on the school website.

All Parents/Carers will be:

- Given every opportunity to understand the purpose and content of Relationships Education and RSE;
- Encouraged to participate in the development of Relationships Education and RSE;
- Able to discuss any concerns directly with the school.

Parents have the right to request that their child be withdrawn from some or all of sex education delivered as part of statutory RSE. The school,, before granting any such request, will require that a member of the school's pastoral team discuss the request with the parent and, as appropriate, with the child to ensure that their wishes are understood and to clarify the nature and purpose of the curriculum.

Following the discussions, except in exceptional circumstances, the school will respect the parents' request to withdraw their child, up to and until three terms before the child turns 16. After that point, if the child wishes to receive sex education rather than be withdrawn, the school should make arrangements to provide the child with sex education during one of those terms. The pastoral team member will ensure that where a pupil is excused from

sex education, the pupil will receive appropriate, purposeful education during the period of withdrawal. RSHE involves consideration of a number of sensitive issues about which different people may hold strong and varying views. The school's approach to RSHE will be balanced and take account of, and be sensitive to, different viewpoints but will not be based on personal bias. We shall endeavor to have an approach that is educational, rather than one based on propaganda. The PSHE and Citizenship RSE is taught in the context of relationships using a variety of formal and informal strategies and opportunities. This helps all young people to develop their self-esteem and emotional wellbeing, thus helping them to form and maintain worthwhile and satisfying relationships, which are based upon respect for themselves and for others. There is no right to withdraw from the national curriculum.

Working with External Agencies

The school is aware that working with external partners will enhance the delivery of RSE and will support us to bring in specialist knowledge and implement different ways of engaging with young people. Where the school chooses to use external agencies, we will check the credentials of the visiting organisation and any visitors linked to the agency. We will also ensure that the teaching delivered by the visitor fits with the planned programme and the published policy. We will work with external agencies to ensure that the content delivered is age-appropriate and accessible for all pupils. Any materials that are used as part of the delivery must be approved by the school in advance of the session. The school will ensure that the visitor is aware of aspects of confidentiality and understands how safeguarding reports should be dealt with in line with the school's Safeguarding Policy.

10. Confidentiality and Safeguarding

The school recognises that at the heart of RSE, the focus is on keeping children safe, and acknowledges the significant role that schools have in preventative education. In our school we will allow children an open forum to discuss potentially sensitive issues. Such discussions can lead to increased safeguarding reports. Children will be made aware of the processes to enable them to raise their concerns or make a report and how any report will be handled. This will also include processes when they have a concern about a peer or friend. In line with the document Keeping Children Safe in Education (KCSIE), all staff are aware of what to do if a child tells them that they are being abused or neglected. Staff are also aware of need to manage the requirement to maintain an appropriate level of confidentiality. This means only involving those that need to be involved, such as the Designated Safeguarding Lead and children's social care. A member of staff will never promise a child that they will not tell anyone about a report of abuse, as this is not in the best interests of the child. The involvement of the Designated Safeguarding Lead (or Deputy Designated Safeguarding Lead) will ensure that trusted, high quality local resources are engaged, links to the police and other agencies are utilised and the knowledge of the any particular local issues it may be appropriate to address in lessons

The school takes its role in the promotion of student welfare seriously. Staff endeavour to make themselves approachable and to provide caring and sensitive pastoral support for students in a number of ways. Staff may be approached for help on an individual basis and through the tutorial/ pastoral system. They offer a listening ear and, where appropriate, information and advice. The school nurse offers a health and support service to students. School staff cannot promise absolute confidentiality if approached by a student for help. Staff must make this clear to students. Child protection procedures must

be followed when any disclosures are made. Any actions will be based upon an assessment of:

- The seriousness of the situation and the degree of harm that the student may be experiencing.
- The students's age, maturity and competence to make their own decisions.

Where it is clear that a student would benefit from the involvement of a third party, staff should seek the consent of the student to do so. If appropriate, staff might inform the third party together with the student. Unless clearly inappropriate, students will always be encouraged to talk to their parent/carer.

Young people under the age of 13

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 child protection lead, Christine Slattery.

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 Social Care Direct identifying 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 appropriate 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 13's should be fully documented including detailed reasons why decisions were made not to share information.

Young people aged between the ages of 13 – 16

Sexual Activity with a young person in this age group is a criminal offence under the Sexual Offences Act 2003. The Act reinforces that whilst mutually agreed, non-exploitive sexual activity between teenagers does take place and that often no harm comes from it, the legal age of consent remains 16. This acknowledges that this group of young people is still vulnerable, even when they do not view themselves as such.

Consideration should be given in every case of sexual activity involving 13-15 as to whether a discussion with other agencies and whether a referral should be made to Safeguarding and Specialist Services. Cases of concern should be discussed with the nominated child protection lead and subsequently with other agencies as required.

When confidentiality needs to be preserved a discussion can still take place as long as it does not identify the child (directly or indirectly).

Where there is a reasonable cause to suspect that significant harm to a child has occurred/might occur, there should be a presumption that the case is reported to Safeguarding and Specialist Service.

All cases should be carefully documented including when a decision is taken not to share information.

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.

Frazer Guidelines - It is good practice for doctors and other health professionals to follow the criteria outlined by Lord Fraser in 1985, "The House of Lords" ruling commonly known as the Fraser Guidelines.

- The young person understands the health professional's advice.
- The health professional cannot persuade the young person to inform his or her parents or allow the doctor to inform the parents that he or she is seeking contraceptive treatment;
- The young person is very likely to begin or continue having intercourse with or without contraceptive treatment;
- Unless he or she receives contraceptive advice or treatment, the young person's physical or mental health or both are likely to suffer;
- The young person's best interests require the health professionals to give contraceptive advice, treatment or both without parental consent.

These procedures should be read in conjunction with the Durham LSCB protection procedures ([link](#)) with special reference to Sections 3 'Referral and Investigation' and Section 6.13 'Sexually Active Children under 18'

11. Monitoring and Evaluation

It is the responsibility of the PHSE Lead and the 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.

Ofsted is required to evaluate and report on spiritual, moral, social and cultural development of students. This includes evaluating and commenting on the school's sex and relationship education policy, and on support and staff development, training and delivery.

Appendices

Appendix 1 – Additional information

The three main elements:

Knowledge and understanding:

- learning and understanding physical, emotional and spiritual development at appropriate stages
- understanding human sexuality, identity, reproduction, sexual health, emotions and relationships
- learning about contraception, Sexually Transmitted Infections and the range of local and national sexual health advice, contraception and support services
- learning the reasons for delaying sexual activity, and the benefits to be gained from such delay
- the avoidance of an unintended pregnancy
- The impact of viewing harmful content through online and media
- The concepts of, and laws relating to, sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, forced marriage, honour-based violence and FGM, and how these can affect current and future relationships
- Know the key facts about puberty, the changes in the adolescent body (including physical and emotional) and menstrual wellbeing (Health Education)
- Know the main changes which take place in males and females, and the implications for emotional and physical health (Health Education)
- Learn where to go for help and advice and how to access local and national services

Attitudes and values:

- learning the importance of values, individual conscience and moral choices
- learning the value and valuing family life, stable and loving relationships, and marriage/civil partnerships
- learning about the nurture of children and successful parenting
- learning the value of and demonstrating respect, love and care
- exploring, considering and understanding moral dilemmas
- developing critical thinking as part of decision-making
- challenging myths, misconceptions and false assumptions about normal behaviour
- Learning the importance of rights, responsibilities and opportunities online, including the same expectations of behaviour apply in all contexts, including online.

Personal and social skills:

- learning to manage and managing emotions and relationships confidently and sensitively including online
- developing self-respect and empathy for others

- developing positive self-esteem and confidence
- making informed choices with an absence of prejudice
- developing an appreciation of the consequences of choices made
- managing conflict
- empower students with the skills to be able to avoid inappropriate pressures or advances (both as exploited or exploiter)
- How to report concerns of abuse, and the vocabulary and confidence to do so
- Explore societal norms and the use/misuse of alcohol and drugs and the impact on relationships
- Learning to actively communicate and recognise consent from others, including sexual consent, and how and when consent can be withdrawn. (In all contexts, including online)

| KEY STAGE 3 | Year 7 | Year 8 | Year 9 |
|--|---|---|--|
| 1d) that fertilisation in humans...is the fusion of a male and a female cell | <ul style="list-style-type: none"> • What is fertilisation? • Where does fertilisation happen? • How does fertilisation happen? • Why are sperm cells and egg cells good at their job? | | |
| 2f) about the physical and emotional changes that take place during adolescence. | <ul style="list-style-type: none"> • What is the menstrual cycle? • How do children grow? • How do children develop? (Physical and emotional) | <ul style="list-style-type: none"> • Why is food important? • What is a balanced diet? • Is a balanced diet the same for everyone? | |
| 2g) about the human reproductive system, including the menstrual cycle and fertilisation | <ul style="list-style-type: none"> • What do the reproductive organs do? • What happens during sexual intercourse? • What is infertility? • Why are sperm cells and egg cells good at their job? • What happens immediately after fertilisation? • Where do the instructions come from to make a new human being? • What is the menstrual cycle? • How many babies can be made at once? | | <ul style="list-style-type: none"> • What characteristics can be inherited? • How are characteristics inherited? • Why are children of the same parents not identical? • Why do identical twins look the same? |
| 2h) how the foetus develops in the uterus | <ul style="list-style-type: none"> • How are twins made? • What is pregnancy? • What is the placenta? • Why does the embryo need food and oxygen? • What happens during birth? • What happens if a baby is born early? • Why do human mothers make milk? • What do newborn babies need? | | <ul style="list-style-type: none"> • What characteristics can be inherited? • How are characteristics inherited? • Why are children of the same parents not identical? |

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| <p>2n) how the growth and reproduction of bacteria and the replication of viruses can affect health.</p> | | <ul style="list-style-type: none"> • What do microorganisms do? What do they look like? How are microbes grown to make food? • How are microbes grown in a laboratory? • What is infection? What causes infection? • How can microbes enter your body? • How can you avoid infection? • How do you stop disease spreading? • Who is involved in stopping disease spreading? • What stops microbes getting into your body? • What happens if microbes get into your body? • What else can make you ill? • How do scientists help us fight disease? • What are antibiotics? • Can antibiotics cure diseases caused by viruses? • What are the problems with antibiotics? • Who discovered antibiotics? • What effect have antibiotics had on disease? • What is immunity? • What is immunisation? • How have vaccinations | |
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| KEY STAGE 4 | Years 10 and 11 |
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| 2f) the way in which hormonal control occurs, including the effects of sex hormones. | <ul style="list-style-type: none"> • How is your body controlled? • What is the difference between your nervous system and your hormones? • How do you respond to changes in your surroundings? • How is the menstrual cycle controlled? • When is a woman most likely to conceive? • How can hormones be used to stop pregnancy? • How can hormones help to solve the problems of infertility? |
| 2g) some medical uses of hormones, including the control and promotion of fertility. | <ul style="list-style-type: none"> • How is the menstrual cycle controlled? • When is a woman most likely to conceive? • How can hormones be used to stop pregnancy? • How can hormones help to solve the problems of infertility? • The contraceptive question |
| 2l) the defence mechanisms of the body | <ul style="list-style-type: none"> • How is your body controlled? • What is the difference between your nervous system and your hormones? • How do you respond to changes in your surroundings? • What is a reflex? • Why are reflexes so important? • How are conditions inside your body controlled? • Why is it important to control your internal environment? |
| 3d) how sex is determined in humans. | <ul style="list-style-type: none"> • What happens to your chromosomes when your gametes are formed? • How does sexual reproduction give rise to variation? • How is sex determined in humans? • Can you predict what features a child might inherit? |

Appendix Three: Inclusion

'Mainstream schools and special schools have a duty to ensure that children with special educational needs and learning difficulties are properly included in relationships and sex education. Relationship and sex education should help all pupils understand their physical and emotional development and enable them to make positive decisions in their lives'.

DfE RSHE Guidance

Schools have a clear duty under the Equality Act 2010 to ensure that teaching is accessible to all children and young people, including those who are lesbian, gay, bisexual and transgender (LGBT). Inclusive RSE will foster good relations between pupils, tackle all types of prejudice – including homophobia, biphobia and transphobia – and promote understanding and respect, enabling schools to meet the requirements, and live the intended spirit, of the Equality Act 2010.

Too often, groups of young people say they feel excluded in RSE lessons. For example, lesbian, gay and bisexual pupils (who make up approximately 10% of any school population) often report that their RSE is solely about heterosexual relationships, or that non heterosexual identities were addressed negatively and that it fails to address sexual health issues linked to the range of sexual behaviours and activities that people encounter whatever their sexual orientation. Young people with physical or learning disabilities often report that RSE does not meet their needs, while boys tell us they feel excluded because RSE seems to be aimed more at girls – and they are often anxious about being shown up as being ignorant about sexual matters.

All children and young people – whatever their experience, background and identity – are entitled to quality sex and relationships education that helps them build confidence and a positive sense of self, and to stay healthy. All classes include pupils with different abilities and disabilities, experiences and backgrounds, gender and sexual identities. To encourage pupils to participate in lessons, teachers should ensure content, approach, and use of inclusive language reflects the diversity of the school community, and helps each and every pupil to feel valued and included in the classroom.

Teachers should never assume that all intimate relationships are between opposite sexes. All sexual health information should be inclusive and should include LGBT people in case studies, scenarios and role-plays. Students can explore topics from a different gender's point of view, and a variety of activities – including practical tasks, discussions, group activities and competitions – can provide something for everyone.

- Stonewall has produced a series of packs and information for schools. Details are available at: www.stonewall.org.uk

SRE for the 21st Century (supplementary advice from PSHE Association 2014)

Young people may have varying needs regarding RSHE depending on their circumstances and background. The school strongly believes that all students should have access to RSHE that is relevant to their particular needs.

To achieve this the school's approach to RSHE will take account of:

The needs of all students: Girls tend to have greater access to RSHE than boys, both through the media (particularly teenage magazines) and the home. We will consider the particular needs of boys, girls, as well as our trans students and those who identify as gender neutral and approaches that will actively engage them. We shall also be proactive in combating sexism and sexist bullying. Testicular cancer, as well as breast cancer is now included in the RSHE events.

One of the bigger issues we had last year was from Year 9 boys and their perception of women through the availability of pornography. This was dealt with by NWE during assemblies but should we target this topic early on rather than be reactionary? This has links to sexting and the sending of naked images, which have been problems in the past.

Ethnic and cultural diversity: Different ethnic and cultural groups may have different attitudes to RSHE. The school will promote respect for, and understanding of, the views of different ethnic and cultural groups. For some young people it is not culturally appropriate for them to be taught particular items in mixed groups. We will respond to parental requests and concerns regarding this.

The subject of Female Genital Mutilation (FGM) should be considered when writing the RSE policy. Normally associated with African and Middle Eastern cultures of which demographically we have a small percentage of students that may be affected by this illegal practice. Are we informing 'whole school' or targeted groups?

Varying home backgrounds: We recognise that our students may come from a variety of family situations and home backgrounds. We shall take care to ensure that there is no stigmatisation of children based on their home circumstances.

Sexual Orientation: On average, about 5% of our students will go on to define themselves as gay, lesbian or bi-sexual or pansexual or asexual. Students may also have LGB parents/carers, brothers or sisters, other family members and/or friends. All our students will meet and work with GLB people. Our pastoral support will take account of the needs of LGB students. We shall also actively tackle homophobic, bi-phobic and transphobic bullying.

We aim to deal sensitively with issues of sexual orientation, answer appropriate questions and offer support. Young people, whatever their developing sexual orientation, need to feel that RSHE is relevant to them.

Special educational needs: We shall take account of the fact that some students may have learning, emotional or behavioural difficulties or physical disabilities that result in particular RSHE needs.

Will we be including domestic violence in relationships as a topic?

Schools must be a safe place for all pupils, and efforts to address violence require a whole school approach. RSHE provides an ideal space to address sexual and relationship violence. Pupils should be encouraged to consider the importance of equality and respect within relationships, and to develop positive, non-violent behaviour. RSHE lays the foundations for developing empathy and understanding between girls and boys, young men and young women. It gives pupils the chance to challenge gender stereotypes and expectations, and to introduce positive, diverse perspectives on gender roles, hopes and aspirations. **RSE for the 21st Century (supplementary advice from PSHE Association 2014)**

Appendix 4: A whole school approach

A whole school approach will be adapted to RSHE that actively involves the whole school community. All groups who make up the school community have rights and responsibilities regarding RSHE. In particular:

- **The school's Leadership Group (LG)** will endeavour to support the provision and development of RSHE in line with this policy by providing leadership and adequate resourcing.
- **The designated PSHE/Citizenship co-coordinator**, will maintain an overview of RSHE provision and will evaluate this on an annual basis.
- **All teachers** are involved in the school's RSHE provision in one way or another. Some teach RSHE through the PSHE programme and some through science and other curriculum areas. All teachers play an important pastoral role by offering support to students. Any teacher can be approached by a student who experiences a difficulty regarding sex or relationships issues. Teachers will be consulted about the school's approach to SRE, aided in their work by provision of resources, background information, support and advice from experienced members of staff, and if requested, access to appropriate training.
- **Non-teaching staff** may be involved in a supportive role in some RSHE lessons or events and play an important, informal pastoral support role with students. They will have access to information about the RSHE programme and supported in their pastoral role.
- **Parents/carers** have a legal right to view this policy and to have information about the school's RSHE provision. They also have a legal right to withdraw their children from dedicated RSE lessons if they wish. The school will seek and take account of parent/carer views and endeavour to adopt a partnership approach with parents/carers.
- **The school nurse** can play a key role in supporting the school in RSHE in terms of both advice, input into lessons, provision of pastoral support for students and resources. The school will work in ongoing consultation and partnership with the school nurse.
- **Outside agencies and speakers** may be involved in inputting to RSHE lessons/events and as points of referral as support services for students. The school will only work with agencies and speakers who are appropriate to student needs. We shall work in partnership with them and jointly plan their work within the school. The school will also promote relevant helping agencies that students can access.
- **Students** have an entitlement to age and circumstance appropriate RSE and to pastoral support. They will be actively consulted about their RSE needs and their views will be central to developing the provision.