

Relationships Education, Relationships & Sex Education, and Physical Health & Mental Wellbeing Policy

**Review Date**

April 2024

Ratified

June 2024

Next Review Date

March 2026

Responsible Directorate

Education

Our Trust

*These four critical questions make it clear who we are and what we do.
We ask ourselves these questions to guide our work and our improvement.*

Why do we exist?

To **transform life chances** by achieving the highest possible standards and preparing all our students to lead successful lives.

How do we behave?

- **Hard work**
We are determined to see things through to the end and are resilient when faced with challenges.
- **Integrity**
We do the right thing because it is the right thing to do.
- **Teamwork**
We work together to help everyone succeed.

What do we do?

- We educate, safeguard and champion all our learners.
- We set high standards for ourselves and our learners.
- We build the powerful knowledge and cultural capital which stimulate social mobility and lifelong learning.

How will we succeed?

1. Aligned autonomy
2. Keeping it simple
3. Talent development

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1 | Introduction

- 1.1 Our Trust believes that in order to create a happy and successful adult life, children and young people need to have the self-confidence to make informed decisions about their wellbeing, health and relationships. Relationships Education and Relationships and Sex Education (RSE) is about giving children and young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. Health Education is giving pupils information to make well-informed, positive choices about their own health and wellbeing. Our Trust recognises that physical health and mental wellbeing are interlinked, so it is important that pupils understand that good physical health contributes to good mental wellbeing and vice versa.
- 1.2 Our Trust has a responsibility under the Equality Act (2010) to ensure the best for all pupils at our academies, irrespective of disability, educational needs, race, nationality, ethnic or national origin, sex, gender identity, pregnancy, maternity, religion or sexual orientation. As a result, Relationships Education, RSE and Health Education will be sensitive to the different needs of individual pupils and may need to adapt and change over time to reflect the needs of the particular cohort. The Trust may also take positive action, where it can be shown that it is proportionate, to deal with particular disadvantages affecting one group because of a protected characteristic.
- 1.3 Our Trust is aware of the need to be mindful of and respectful to a wide variety of faith and cultural beliefs across its academies, and will make every attempt to be appropriately sensitive. Equally, it is essential that children and young people have access to the learning they need to stay safe, healthy and understand their rights as individuals. Our Trust believes that our pupils deserve the right to honest, clear, impartial scientific and factual information to help better form their own beliefs and values, free from bias, judgement or subjective personal beliefs of those who teach them.
- 1.4 All teaching will be sensitive and age appropriate in approach and content. At the point at which the Trust considers it appropriate to teach pupils about lesbian, gay, bisexual, and transgender (LGBT) issues, the Trust will ensure that this content is fully integrated into programmes of study for this area of the curriculum rather than delivered as a stand-alone unit or lesson. The Trust will encourage wider pupil awareness of LGBT.
- 1.5 This policy has been developed in consultation with parents, pupils, and staff from all academies within the Trust to ensure that it meets the needs of the whole Trust community. The review of the policy will include:
- Annual parent consultation to inform them of any changes. Parents are asked for their feedback.
 - Staff, pupil, and Local Governing Boards will be asked to provide feedback through stakeholder voice opportunities.
 - Ratification - once any required amendments are made the policy is shared with the Trust Board to be ratified.

2 | Aims and Objectives

- 2.1 Through the delivery of high-quality, evidence-based, and age-appropriate Relationships Education, RSE and Health Education, the Trust aims to help prepare pupils for the onset of puberty, give them an understanding of sexual development and the importance of health and hygiene, create a positive culture in relation to sexuality and relationships, and to ensure pupils know how and when to ask for help and where to access support. By the end of their education, the Trust hopes pupils will have developed resilience and feelings of self-respect, confidence and empathy in preparation for the responsibilities and experiences of adult life.
- 2.2 Relationships Education, RSE and Health Education are intended to help pupils to:
- Build healthy, respectful relationships focusing on family and friends
 - Understand how to be healthy and be aware of potential risk areas (such as drugs and alcohol)
 - Learn about intimate relationships and sex
 - Learn about mental wellbeing
 - Develop key personal attributes, such as kindness, integrity, generosity, and honesty.

3 | Definitions

- 3.1 Relationships Education at the primary phase is about teaching the fundamental building blocks and characteristics of positive relationships, with particular reference to friendships, family relationships, relationships with other children and with adults, and who can support them. It includes how to take turns, how to treat each other with kindness, consideration and respect, the importance of honesty and truthfulness, permission seeking and giving, and the concept of personal privacy, establishing personal space and boundaries.
- 3.2 RSE is lifelong learning about physical, sexual, moral, and emotional development. It is about teaching sex, sexuality and sexual health in a way that gives pupils the confidence to make sound decisions when facing risks and other challenges. It includes teaching about friendship, the importance of caring, stable and mutually supportive relationships with other people, and how to control and understand feelings that come with being in a relationship.
- 3.3 RSE **does not encourage early sexual experimentation**. It teaches children and young people to understand human sexuality and to respect themselves and others, to build self-esteem and understand the reasons for delaying sexual activity so that they can develop safe, fulfilling, and healthy sexual relationships, at the appropriate time.

- 3.4 RSE will outline that there are different types of committed, stable relationships, the characteristics and legal status of other types of long-term relationships, the importance of marriage as a relationship choice and why it must be freely entered into, how relationships might contribute to human happiness and the their importance for raising children, as well as highlighting the roles and responsibilities of parents with respect to raising children, characteristics of successful parenting and how to judge when relationships have become unsafe as well as how to seek help or advice and report concerns about others.

4 | Roles and Responsibilities

- 4.1 All members of the Trust community are expected to follow this policy. Roles, responsibilities, and expectations of each section of the Trust and academy community are set out in detail below.
- 4.2 **Board of Trustees:** Trustees will monitor and evaluate the impact of the policy by reviewing pupils' progress in achieving the expected educational outcomes. They will hold the Chief Executive Officer and Principals to account for the implementation of the policy.
- 4.3 **The Chief Executive Officer (CEO):** The CEO will ensure that Relationships Education, RSE and Health Education is taught consistently across the academies within the Trust and will report back to the Board of Trustees on educational outcomes. They will ensure that senior staff receive regular professional development training in how to deliver Relationships Education, RSE and Health Education.
- 4.4 **Local Governing Boards:** Local governors in each academy will review and monitor the application and implementation of this policy by receiving regular feedback from the academy Principal on educational outcomes. Local governors will scrutinise relevant data, review any issues that might arise, and act as a point of challenge for decisions taken by the Principal. The Local Governing Board will annually feedback its findings to the Board of Trustees.
- 4.5 **Principals:** Each academy Principal, with support from their respective Senior Leadership Team, will ensure that staff are supported and up to date with policy changes. They will ensure that Relationships Education, RSE and Health Education is well led, effectively managed, and well planned across various subjects (to avoid unnecessary duplication of topics) and that the quality of provision is subject to regular and effective self-evaluation. The Principal will ensure that teaching is age-appropriate, delivered in ways that are accessible to all pupils with SEND and that the subjects are resourced, staffed and timetabled appropriately. They will ensure that teaching delivered by any external organisation is age-appropriate and accessible for pupils and will liaise with parents regarding any concerns or opinions regarding Relationships Education, RSE and Health Education provision and will manage parental requests for withdrawal of pupils from non-statutory, non-science components of Relationships Education, RSE and Health Education.

- 4.6 **Staff:** Teachers of Relationships Education, RSE and Health Education will ensure that they are up to date with school policy and curriculum requirements regarding sex education and will attend and engage in professional development training. Teachers will encourage pupils to communicate concerns regarding their social, personal and emotional development in confidence, listen to their needs and support them seriously. If a pupil comes to a member of staff with an issue that that member of staff feels they are not able to deal with alone, they will take this concern to their line-manager.
- 4.7 **Parents:** The Trust hopes to build a positive and supporting relationship with parents through mutual understanding, cooperation and trust. Parents are expected to share the responsibility of sex education and support their children's personal, social and emotional development. The Trust hopes parents will create an open home environment where pupils can engage, discuss and continue to learn about matters that have been raised through school. Parents are also encouraged to seek additional support in this from the academy their child attends where they feel it is needed.
- 4.8 **Pupils:** Pupils are expected to take Relationships Education, RSE and Health Education seriously. Pupils are expected to listen, be considerate of other pupils' feelings and beliefs, comply with class-set confidentiality rules and support one another with issues that arise during class. Pupils who fail to follow these standards of behaviour will be dealt with under the Trust's Behaviour Policy.

5 | Delivery

- 5.1 Relationships Education, RSE and Health Education will be delivered in a non-judgmental, factual way allowing scope for children and young people to ask questions in a safe environment. Teachers will tailor the delivery of Relationships Education, RSE and Health Education to meet the specific needs of the pupils in that class, and to be responsive to their behaviour and development. Classes will explore different attitudes, values and social labels, and develop skills that will enable our pupils to make informed decisions regarding sex and relationships as well as being able to differentiate between fact, opinion and belief and an understanding of the law on various topics. Pupils will be taught the anatomically correct names for body parts, but slang or everyday terms used in certain social circles will be discussed; this will surround discussion about what is and isn't acceptable language to use.
- 5.2 Staff will ensure that all resources used in the delivery of Relationships Education, RSE and Health Education are appropriate for the age and needs of their pupils. Examples of these resources are included in the Annexes of this policy.
- 5.3 **Primary Academies:** In our primary academies Relationships Education will be delivered in science, computing and Personal, Social, Health and Economic Education (PSHEE). Children of the same age may be developmentally at different stages, leading to differing types of questions or behaviours.

Staff will use teaching methods that take account of these differences and the potential for discussion on a one-to-one basis or in small groups.

- 5.4 **Secondary Academies:** In our secondary academies RSE will be delivered in science, religious education, computing and Personal, Social, Health and Economic Education (PSHEE) and will build on the foundation of Relationships Education delivered in primary school.

6 | Relationships Education and RSE: Curriculum and Outcomes

- 6.1 By the end of their primary education the Trust expects pupils to know the information set out at Appendix 1. The Trust recognises that primary-age pupils may ask their teachers or other adults questions pertaining to sex or sexuality which go beyond the designed curriculum for Relationships Education. Teaching methods will take account of the potential different types of questions and behaviours likely to arise and staff will assess which types of teaching methods would be most appropriate (for example, a full class setting, one-to-one discussions or in small groups).
- 6.2 By the end of their secondary education, the Trust expects pupils to know the information set out at Appendix 2.

7 | Health Education: Physical Health and Mental Wellbeing

- 7.1 The Trust wishes to promote pupils' health and well-being by encouraging self-control, their ability to self-regulate and strategies for doing so. This will enable pupils to become confident in their ability to achieve well and persevere even when they encounter setbacks or when their goals are distant, and to respond calmly and rationally to setbacks and challenges. The Trust believes that an integrated, whole-school approach to the teaching and promotion of health and wellbeing will have a positive impact on behaviour and attainment. Health Education will be delivered in science, computing, Physical Education (PE) and Personal, Social, Health and Economic Education (PSHEE).
- 7.2 By the end of their primary education, the Trust expects pupils to know the information set out at Appendix 3.

- 7.3 By the end of their secondary education, the Trust expects pupils to know the information set out at Appendix 4.

8 | Pupils with Special Educational Needs and/or Disabilities

- 8.1 The Trust will endeavour to ensure that Relationships Education, RSE, and Health Education is accessible for all pupils. We are aware that some pupils are more vulnerable to exploitation, bullying and other issues due to the nature of their SEND. Relationships Education, RSE and Health Education may be particularly important for such pupils, for example those with Social, Emotional and Mental Health needs or learning disabilities. Teaching will be sensitive, age-appropriate, developmentally appropriate, differentiated and personalised to meet the specific needs of pupils at different developmental stages.
- 8.2 Staff will make reasonable adjustments to alleviate disadvantage faced by pupils with disabilities and will be mindful of the SEND Code of Practice and the Trust's SEND Policy when planning for these subjects. Staff will use a variety of different strategies to ensure that all pupils have access to the same information.

9 | Right to Request Withdrawal from Sex Education

- 9.1 The Trust hopes that parents will feel comfortable with, and understand the importance of, the education provided to their children as described in this policy.
- 9.2 Parents of children in primary academies have the right to withdraw their child from sex education and should state this in writing and send it to the PSHE Lead at their child's academy. Parents of children in secondary academies have the right to request that their child be withdrawn from some or all of the sex education aspects of RSE.
- 9.3 Before withdrawing or making a request, the Trust strongly urges parents to carefully consider their decision as sex education is a vital part of the school curriculum and supports child development. Parents cannot withdraw their child from Relationships Education or Health Education or the elements on human growth and reproduction which fall under the Science curriculum.

- 9.4 Any parent wishing to withdraw their child from sex education in a secondary academy should put their request in writing and send it to the PHSE Lead at their child's academy who will arrange a meeting to discuss their concerns. Once those discussions have taken place, except in exceptional circumstances, the school will respect the parents' request to withdraw the 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 will make arrangements to provide the child with sex education during one of those terms.
- 9.5 If a pupil is excused from sex education the respective academy will ensure that the pupil receives appropriate, purposeful education during the period of withdrawal.

10 | Confidentiality and Child Protection

- 10.1 The Trust hopes to provide a safe and supportive school community where pupils feel comfortable seeking help and guidance on anything that may be concerning them about life either at school or at home. All teachers will receive training around confidentiality and should ensure that pupils understand that they cannot offer unconditional confidentiality. If a child protection issue is disclosed to a member of staff, that member of staff should follow the Trust's Child Protection and Safeguarding procedures.
- 10.2 If a staff member is approached by a pupil under 16 who is having, or is contemplating having sexual intercourse, the teacher should:
- Ensure that the pupil is accessing all the contraceptive and sexual health advice available and understands the risks of being sexually active.
 - Encourage the pupil to talk to their parent or carer. Pupils may feel that they are more comfortable bringing these issues to a teacher they trust, but it is important that children and their parents have open and trusting relationships when it comes to sexual health and the academy will encourage this as much as possible. Decide whether there is a child protection issue. This may be the case if the teacher is concerned that there is coercion or abuse involved. If a member of staff is informed that a pupil is having, or is contemplating having sexual intercourse, this will be dealt with under child protection procedures.
 - Report the matter to the DSL (Emma Owner) or the DDSL (Alicia Rickards) who will be able to make an assessment of the circumstances based on wider contextual information about the child.
- 10.3 Pupils with special educational needs may be more vulnerable to exploitation and less able to protect themselves from harmful influences. If staff are concerned that this is the case, they should seek support from the Designated Safeguarding Lead to decide what is in the best interest of the child.

11 | Equal Opportunities

- 11.1 Relationships Education, RSE, and Health Education will be delivered equally to both genders, normally in mixed classes. There are, however, certain topics that may be delivered in single sex groupings e.g. menstruation and personal hygiene.
- 11.2 The Trust has a commitment to ensure that Relationships Education, RSE and Health Education is relevant to all pupils and is taught in a way that is age and stage appropriate. Pupils are encouraged to openly and freely discuss diversity of personal, social and sexual preferences. Prejudiced views will be challenged, and equality promoted. Any bullying that relates to sexual behaviour or perceived sexual orientation will be dealt with swiftly and seriously in accordance with the Trust's Behaviour Policy.

12 | Complaints

- 12.1 If parents have any concerns or complaints over the application or implementation of this policy they should raise their concerns with a staff member or the Principal in accordance with the Trust's Complaints Procedure.

Appendix 1- Relationships Education Primary Stage Curriculum and Outcomes

Relationships and health education Curriculum Map			
Year group	Term	Topic/Theme	Resources
Early Years	Spring 2	Healthy me: Exercising bodies, Physical activity, Healthy food, Sleep, Keeping clean, Safety	Jigsaw - Changing me Vocabulary: Eye, Foot, Eyebrow, Forehead, Ear, Mouth, Arm, Leg, Chest, Knee, Nose, Tongue, Finger, Toe, Stomach, Hand, Baby, Grown-up, Adult, Change, Worry, Excited, Memories, Healthy, Grow.
	Summer 1	Relationships: Family life, Friendships, Breaking friendships, Falling out, Dealing with bullying, Being a good friend	
	Summer 2	Changing me: Naming external bodies e.g eyes, Respecting my body, Growing up, Growth and change, Fun and fears Celebrations	
Year 1	Spring 2	Healthy me: Keeping myself healthy, Healthier lifestyle choices, Keeping clean, Being safe, Medicine safety-safety with household items, Road safety, Linking health and happiness	Jigsaw - Changing me Vocabulary: Changes, Life cycles, Baby, Adult, Growing up, Mature, Male, Female, Vagina, Penis, Testicles, Vulva, Anus, Learn, New, Grow, Feelings, Anxious, Worried, Excited, Coping.
	Summer 1	Relationships: Belonging to a family, Making friends/being a good friend, Physical contact preferences, People who help us, Qualities as a friend and person, Self-acknowledgement, Being a good friend to myself, Celebrating special relationships	
	Summer 2	Changing me: Life cycles – animal and human, Changes in me, Changes since being a baby, Differences between female and male bodies (correct terminology)- Linking growing and learning, Coping with change Transition	

Year 2	Spring 2	Healthy me: Motivation, Healthier choices, Relaxation, Healthy eating and nutrition, Healthier snacks and sharing food	Jigsaw - Changing me Vocabulary: Control, Life cycle, Adult, Fully grown, Old, Young, Respect, Appearance, Physical, Toddler, Child, Teenager, Independent, Freedom, Responsibilities, Male, Female, Vagina, Penis, Testicles, Vulva, Anus, Public, Private, Touch, Texture, Like, Dislike, Acceptable, Unacceptable, Comfortable, Uncomfortable, Excited, Nervous, Anxious, Happy.
	Summer 1	Relationships: Different types of family, Physical contact, boundaries, Friendship and conflict, Secrets, Trust and appreciation, Expressing appreciation for special relationships	
	Summer 2	Changing me: Life cycles in nature, Growing from young to old, Increasing independence, Differences in female and male bodies (correct terminology), Assertiveness, Preparing for transition	

Year 3	Spring 2	Healthy me: Exercise, Fitness challenges, Food labelling and healthy swaps, Attitudes towards drugs, Keeping safe and why it's important online and off line scenarios, Respect for myself and others, Healthy and safe choices	Jigsaw - Changing me Vocabulary: Birth, Animals, Babies, Mother, Uterus, Womb, Nutrients, Survive, Love, Affection, Care, Cope, Puberty, Male, Female, Testicles, Sperm, Penis, Ovaries, Egg, Ovum / ova, Breasts, Womb / uterus, Vagina, Stereotypes, Task, Roles, Challenge.
	Summer 1	Relationships: Family roles and responsibilities, Friendship and negotiation, Keeping safe online and who to go to for help, Being a global citizen, Being aware of how my choices affect others, Awareness of how other children have different lives, Expressing appreciation for family and friends	
	Summer 2	Changing me: How babies grow, Understanding a baby's needs, Outside body changes, Inside body changes, Family stereotypes, Challenging my ideas, Preparing for transition	

Year 4	Spring 2	Healthy me: Healthier friendships, Group dynamics, Smoking, Alcohol, Assertiveness, Peer pressure, Celebrating inner strength	Jigsaw - Changing me Vocabulary: Personal, Unique, Characteristics, Parents, Sperm, Gene, Egg / ovum, Penis, Testicles, Vagina / vulva, Womb / uterus, Ovaries, Making love, Having sex, Sexual intercourse, Fertilise, Conception, Puberty, Menstruation, Tampons, Hormones, Fallopian tube, Periods, Menstrual cycle, Period pants/pads, Seasons, Control, Emotions, Acceptance.
	Summer 1	Relationships: Jealousy, Love and loss, Memories of loved ones, Getting on and Falling Out, Girlfriends and boyfriends, Showing appreciation to people and animals	
	Summer 2	Changing me: Being unique, Having a baby, Girls and puberty, Confidence in change, Accepting change, Preparing for transition, Environmental change	
Year 5	Spring 2	Healthy me: Smoking, including vaping, Alcohol, Alcohol and anti-social behaviour, Emergency aid, Body image, Relationships with food, Healthy choices, Motivation and behaviour	Jigsaw - Changing me vocabulary: Body-image, Self-image, Personality, Perception, Self-esteem, Affirmation, Comparison, Uterus, Womb, Oestrogen, Fallopian Tube, Cervix, Vagina, Vulva, Penis, Testicles, Adam's Apple, Scrotum, Genitals, Broader, Sperm, Semen, Erection, Ejaculation, Urethra, Wet dream, Growth spurt, Larynx, Facial hair, Pubic hair, Hormones, Testosterone, Circumcised, Uncircumcised, Foreskin, Epididymis, Ovaries, Egg (Ovum), Period, Fertilised, Unfertilised, Conception, Having sex, Sexual intercourse, Making love, Embryo, Umbilical cord, IVF, Fertility treatment, Foetus, Contraception, Pregnancy, Menstruation, Sanitary
	Summer 1	Relationships: Self-recognition and self-worth, Building self-esteem, Safer online communities, Rights and responsibilities online, Online gaming and gambling, Reducing screen time, Dangers of online grooming, SMARRT internet safety rules	
	Summer 2	Changing me: Self- and body image Influence of online and media on body image Puberty for girls Puberty for boys Conception (including IVF) Growing responsibility Coping with change Preparing for transition	
Year 6	Spring 2	Healthy me: Taking personal responsibility How substances affect the body Exploitation, including 'county lines' and gang culture Emotional and mental health Managing stress	Jigsaw - Changing me Vocabulary: Body-image, Self-image, Characteristics, Looks, Personality, Perception, Real-self, Assertive, Comparison, Negative body-talk, Mental health, Uterus, Womb,
	Summer 1	Relationships:	

	Summer 2	Mental health Identifying mental health worries and sources of support Love and loss Managing feelings Power and control Assertiveness Technology safety Take responsibility with technology use Changing me: Self-image Body image Puberty and feelings Conception to birth Reflections about change Physical attraction Respect and consent Boyfriends/girlfriends Sexting Transition	Oestrogen, Fallopian Tube, Cervix, Develops, Breasts, Vagina, Vulva, Hips, Penis, Testicles, Adam's Apple, Scrotum, Genitals, Sperm, Semen, Erection, Ejaculation, Urethra, Wet dream, Growth spurt, Larynx, Facial hair, Pubic hair, Hormones, Scrotum, Testosterone, Circumcised, Uncircumcised, Foreskin, Epididymis, Ovaries, Egg (Ovum), Period, Fertilised, Unfertilised, Conception, Having sex, Sexual intercourse, Making love, Embryo, Umbilical cord, IVF, Foetus, Contraception, Pregnancy, Midwife, Labour, Menstruation, Products, Tampon, Pad, Towel, Liner, Hygiene,
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Relationships Education

Families and people who care for me	• That families are important for children growing up because they can give love, security and stability. • The characteristics of healthy family life, commitment to each other, including in times of difficulty, protection and care for children and other family members, the importance of spending time together and sharing each other's lives. • That others' families, either in school or in the wider world, sometimes look different from their family, but that they should respect those differences and know that other children's families are also characterised by love and care. • That stable, caring relationships, which may be of different types, are at the heart of happy families, and are important for children's security as they grow up. • That marriage represents a formal and legally recognised commitment of two people to each other which is intended to be lifelong. • How to recognise if family relationships are making them feel unhappy or unsafe, and how to seek help or advice from others if needed.
Caring friendships	• How important friendships are in making us feel happy and secure, and how people choose and make friends. • The characteristics of friendships, including mutual respect, truthfulness, trustworthiness, loyalty, kindness, generosity, trust, sharing interests and experiences and support with problems and difficulties. • That healthy friendships are positive and welcoming towards others, and do not make others feel lonely or excluded. • That most friendships have ups and downs, and that these can often be worked through so that the friendship is repaired or even strengthened, and that resorting to violence is never right. • How to recognise who to trust and who not to trust, how to judge when a friendship is making them feel unhappy or uncomfortable, managing conflict, how to manage these situations and how to seek help or advice from others if needed.
Respectful relationships	• The importance of respecting others, even when they are very different from them (for example, physically, in character, personality or backgrounds), or make different choices or have different preferences or beliefs. • Practical steps they can take in a range of different contexts to improve or support respectful relationships. • The conventions of courtesy and manners. • The importance of self-respect and how this links to their own happiness.

	• That in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including those in positions of authority. • About different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders (primarily reporting bullying to an adult) and how to get help. • What a stereotype is, and how stereotypes can be unfair, negative or destructive. • The importance of permission-seeking and giving in relationships with friends, peers and adults.
Online relationships	• That people sometimes behave differently online, including by pretending to be someone they are not. • That the same principles apply to online relationships as to face-to-face relationships, including the importance of respect for others online including when we are anonymous. • The rules and principles for keeping safe online, how to recognise risks, harmful content and contact, and how to report them. • How to critically consider their online friendships and sources of information including awareness of the risks associated with people they have never met. • How information and data is shared and used online.
Sex education	At Iceni Primary Academy, our Sex Education programme spirals throughout pupils' time with us from EYFS to Year 6; content is revisited each year as part of the National Curriculum for Science progression of knowledge and our Jigsaw scheme. Our programme visits related concepts to Sex Education Healthy Me, Relationships and Changing Me. At the end of Year 4 the PSHE lead discusses puberty with the children using Jigsaw resourcing; at the start of Year 5 (and as a revisit for Year 6) children go into more depth about puberty. For these sessions, parents will be contacted via an initial letter to let them know that the puberty sessions will be happening and are given links to the resources being used. After the sessions, the class teacher emails the whole class's parents/carers before the end of the school day to let parents know how the teaching and learning went and what questions the children asked. For one session only, the girls and boys are separated so that we can talk the girls through management of their periods in school. • For the main Sex Education input, we make sure that children have been revisiting the information and vocabulary leading up to the main session throughout their time at our Academy. Children are already

familiar with the 'safe space' that we create for the learning environment and how they are able to ask questions using the 'Ask it Basket' as they arise; in addition, they are used to a consistent scientific vocabulary that has been built up over time and they are familiar with using the terms themselves. The fact that there is a specific Sex Education lesson is not a sudden shock in our Academy – it has been worked up to gradually.

- Prior to the main Sex Education input, the Oak Class teacher writes a letter to parents/carers, again detailing the content of the lesson, the vocabulary that will be learnt and links to the resources to be used. Parents/carers are invited in (in addition to the Parent Forums where the entire curriculum is demonstrated and discussed) to look at the video, pose any questions they wish to and they can voice any concerns they have. This part of the process empowers both the teachers and the parents/carers as well as the following email the class teacher sends before the end of the school day to let parents/carers know how the session has gone, what questions were asked and what to expect if there were any questions where the class teacher referred the child to their parents/carers.

Sex Education

The National Curriculum for Science covers:

- Naming the main external parts of the human body
- The human body as it grows from birth to old age (including puberty)
- Processes of reproduction and growth in animals
- Reproduction in some plants

Resources

Statutory guidance Relationships and sex education (RSE) and health education:

<https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education>

Promotional material Relationships, sex and health education: guides for parents:

<https://www.gov.uk/government/publications/relationships-sex-and-health-education-guides-for-schools>

Appendix 3- Health Education Primary Stage Curriculum and Outcomes

Mental wellbeing	• That mental wellbeing is a normal part of daily life, in the same way as physical health. • That there is a normal range of emotions (e.g. happiness, sadness, anger, fear, surprise, nervousness) and scale of emotions that all humans experience in relation to different experiences and situations. • How to recognise and talk about their emotions, including having a varied vocabulary of words to use when talking about their own and others' feelings. • How to judge whether what they are feeling and how they are behaving is appropriate and proportionate. • The benefits of physical exercise, time outdoors, community participation, voluntary and service-based activity on mental wellbeing and happiness. • Simple self-care techniques, including the importance of rest, time spent with friends and family and the benefits of hobbies and interests. • Isolation and loneliness can affect children and that it is very important for children to discuss their feelings with an adult and seek support. • That bullying (including cyberbullying) has a negative and often lasting impact on mental wellbeing. • Where and how to seek support (including recognising the triggers for seeking support), including whom in school they should speak to if they are worried about their own or someone else's mental wellbeing or ability to control their emotions (including issues arising online). • It is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough.
Internet safety and harms	• That for most people the internet is an integral part of life and has many benefits. • About the benefits of rationing time spent online, the risks of excessive time spent on electronic devices and the impact of positive and negative content online on their own and others' mental and physical wellbeing. • How to consider the effect of their online actions on others and know how to recognise and display respectful behaviour online and the importance of keeping personal information private. • Why social media, some computer games and online gaming, for example, are age restricted.

	• That the internet can also be a negative place where online abuse, trolling, bullying and harassment can take place, which can have a negative impact on mental health. • How to be a discerning consumer of information online including understanding that information, including that from search engines, is ranked, selected and targeted. • Where and how to report concerns and get support with issues online.
Physical health and fitness	• The characteristics and mental and physical benefits of an active lifestyle. • The importance of building regular exercise into daily and weekly routines and how to achieve this e.g., walking or cycling to school, a daily active mile or other forms of regular, vigorous exercise. • The risks associated with an inactive lifestyle (including obesity). • How and when to seek support including which adults to speak to in school if they are worried about their health.
Healthy eating	• What constitutes a healthy diet (including understanding calories and other nutritional content). • The principles of planning and preparing a range of healthy meals. • The characteristics of a poor diet and risks associated with unhealthy eating (including, for example, obesity and tooth decay) and other behaviours (e.g. the impact of alcohol on diet or health).
Drugs, alcohol and tobacco	• The facts about legal and illegal harmful substances and associated risks, including smoking, alcohol use and drug-taking.
Health and prevention	• How to recognise early signs of physical illness, such as weight loss, or unexplained changes to the body. • About safe and unsafe exposure to the sun, and how to reduce the risk of sun damage, including skin cancer. • The importance of sufficient good quality sleep for good health and that a lack of sleep can affect weight, mood and ability to learn. • About dental health and the benefits of good oral hygiene and dental flossing, including regular check-ups at the dentist. • About personal hygiene and germs including bacteria, viruses, how they are spread and treated, and the importance of handwashing. • The facts and science relating to allergies, immunisation and vaccination.

Basic first aid	• How to make a clear and efficient call to emergency services if necessary. • Concepts of basic first-aid, for example dealing with common injuries, including head injuries.
Changing adolescent body	• Key facts about puberty and the changing adolescent body, particularly from age 9 through to age 11, including physical and emotional changes. • About menstrual wellbeing including the key facts about the menstrual cycle.

Appendix 5 – Teaching Strategies including for Students with SEND

The main strategy we use to help pupils with SEND understand the content of our PSHE sessions is to sit with them as per our live marking 1-1 strategy for any subject and any child and ask them what their understanding of recent (or further back in the past) objectives have been. We then annotate these learning objectives with the child's understanding and their own words.

In conjunction with parents of children with additional needs, we also offer a home-school PSHE book that is filled in after the individual lessons in order that parents are able to discuss the content of the lessons with their child at home, check their own child's understanding and see the progress being made in school.

Teaching strategies for all children include:

- Establishing a Jigsaw Class Charter for children to feel that what they learn about and want to talk about is part of being in a safe space
- Utilising an Ask it Basket where children can ask any questions, including asking anonymously if they don't want other children to know they have asked that particular thing
- Using our Paddling, Swimming and Scuba learning objective boxes to demonstrate progression in understanding