# RHE policy (Relationship and Health Education)



Reviewed: September 2023

Article 19

#### Introduction and definitions

This policy covers the teaching of Relationships, Health and Sex Education in our school. You may also hear it referred to as Relationships and Sex Education, but as we wish to be clear about all aspects of this curriculum we have decided to call it Relationship and Health Education. For convenience, in this document we will call the subject RHE.

We define **Relationships education** as teaching children about positive relationships, with a focus on friendships, family relationships, and relationships with other children and with adults.

Children will be taught about what a relationship is, what friendship is, what family means and who the people are who can support them. Building on early education, children will be taught how to take turns, how to treat each other with kindness, how to show consideration and respect, the importance of honesty and truthfulness, permission seeking and giving, and the concept of personal privacy. Learning will reflect the fact that families can take many forms, and will be sensitive to the varied backgrounds that children may come from and the lifestyles they may have (for instance if they are in foster care or are young carers). Teachers will take care that children are not stigmatised due to their home circumstances.

Children will also learn about the differences between appropriate and inappropriate or unsafe contact, whether this is physical or online. This is a foundation for later learning about consent, which will take place at secondary school. Children will learn about positive emotional wellbeing, as well as how to recognise when they are at risk or abuse and exploitation. We will ensure that children know how to seek help if they feel they need to.

Respect is taught in a way that young children will understand, in terms of learning about boundaries with regards to sharing space, toys, books and so on.

Relationships education will reflect the way that many children spend time online. They will learn about how to recognise unsafe behaviours online, such as the sharing of images or responding to contact from other people.

**Health education** aims to teach children to understand physical and emotional wellbeing so they can make good decisions about their health. It will allow them to recognise what is normal for them and when to seek help. Children will learn how physical and emotional health are linked and can affect each other.

Children will learn about ways to develop their self-control and their abilities to make decisions. They will be taught about ways to respond positively to setbacks or challenges. They will also be helped to overcome prejudice and stigma around health issues, especially those connected with mental health.

Children will learn about menstruation, and girls will be helped to prepare for the beginning of their periods.

**Sex education** at primary school teaches children basic scientific facts about how humans and other animals grow and reproduce taught within the Science Curriculum.

#### 1 Why have we written this policy?

Although schools have been teaching this for many years, it is only since the Children and Social Work Act of 2017 that there has been a legal requirement for RHE to be delivered. This means that we need to update our approach and to review the content of our lessons.

#### 2 Why is RHE being taught?

The curriculum for this topic was last updated in 2000 (and revised in 2020). Since then, there have been huge changes in society and technology which mean there is a need to update the way we teach our children to negotiate the world in which they are growing up.

Relationships education aims to equip children with the skills and knowledge they need in order to form happy, healthy relationships throughout their lives. Children will learn about friendships and families, how to stay safe online and in the real world, and how to seek help when they need to.

Health education helps children to make informed decisions about their health and wellbeing, to recognise when they or others may have problems, and to know where and how to get help.

All lessons will be delivered in an age-appropriate way, using carefully selected resources and lesson plans.

#### 3 How will we decide if a topic or activity is age-appropriate?

We will use the tool at Appendix 2 when selecting a topic or resource to check that it is age-appropriate.

It may be necessary to deliver a topic earlier than planned in response to children's needs – for example, if there is a need to respond to local or national events that are causing concern, or if children are reaching puberty early. We will inform parents in these cases before the lessons are delivered.

#### 4 Who is responsible for overseeing this subject in our school?

J Handley (Deputy Head teacher)

R Ramakrishnan (RHE lead)

#### 5 Who will deliver RHE?

RHE will be delivered by class teachers. We believe that this is the most effective mechanism because:

- Teachers are likely to have a good knowledge of the class and their backgrounds, and can therefore tailor the lessons to best meet the children's needs
- Delivery by teachers means that the themes of RHE can be reinforced across all parts of the curriculum, thus ensuring that children receive constant and consistent messages
- Teachers can quickly identify children who need more help with an aspect of the subject, or who may be vulnerable and need additional support

We may sometimes invite external agencies to deliver specific lessons or activities. Parents and carers will be informed when this is planned and given all necessary information about the proposed sessions.

#### 6 What will be taught?

Relationships Education is designed to teach children the skills they will need throughout life in
order to build happy, healthy and safe relationships. It aims to help them develop tolerance of
other people, and to understand the importance of respect and kindness.

See Appendix 1 for a list of the topics that we will teach in Relationships Education. The list is taken from the Government guidance on what schools are expected to teach in this part of the curriculum.

 Health education - Health education covers the way our physical and mental wellbeing are interconnected. The learning objectives that will be covered in health education are listed in Appendix 1.

 Sex education - Sex, puberty and reproduction are delivered through the science curriculum, which builds understanding from year one onwards. Not every year group will study topics related to sex and reproduction.

See Appendix 1 for the topics that are covered in the National Curriculum for science.

At our school, sex education is delivered in single sex groups in Year 5 and mixed gender groups in Year 6. Class teachers will teach as much of this as possible. If required, teachers will seek support from the RHE lead when delivering this subject as it may be a new topic for teachers. Training will take place for all new class teachers and ECTs and continued CPD will be available for all other Year 5 and 6 teachers. All decisions regarding the teaching of Sex education will be discussed in conjunction with SLT.

Those objectives that are not taught through Sex Education will be taught in RHE lessons.

Spring term-In year 4 girls will be given some basic practicalities for accessing products if they require them during menstruation (ask for the red box in HQ, sanitary bins in the toilets).

Autumn term-In Year 5 all children will be taught about puberty and the biological aspects of menstruation. Year 5 girls will be given (through RHE lessons) the practicalities of accessing resources in the office, sanitary bins, swimming, products that can be used, emotional responses, dealing with accidents.

Autumn Term- In Year 6 both sexes will be taught about menstruation. Girls will also be taught (through RHE lessons), access to the red box, sanitary bins, different sustainable products that are available as well as more traditional resources, swimming, emotional responses, dealing with awkward questions, accidents.

At the beginning of this unit of work, staff will invite parents in to school to view resources and talk about any questions or concerns that they have. A member of SLT will be available when required and class teachers can pass matters on to SLT when discussing a child being removed from these lessons (see point 9)

#### 7 Schemes of Work and lesson plans

All our school schemes of work covering these topics will be available on our school website. These will give full details of lessons and the resources being used to deliver each subject. We use the Jigsaw SOW to cover all RHE lessons as well as adding in a variety of other resources including:

Pantosaurus for all pupils (NSPCC Autumn term)

First Aid training for all pupils (Autumn term)

Road Safety for all pupils (Stars TfL)

Junior Citizenship day Year 6 (TfL)

Crossfire workshop Year 5 and 6 (Fire Brigade)

#### 8 Who will monitor the delivery of RHE, and how will learning in RHE be evaluated?

RHE will be monitored by the SLT in conjunction with the RHE lead. There will be yearly evaluation and review of SOW and contents/topics through staff meetings, pupil engagement and discussions with the parent working party.

#### 9 Right to withdraw children from lessons

There is no right to withdraw from Relationships education, or from sex education that is delivered as part of the National Curriculum. Nor is there any right to withdraw from Health education. This is because the topics covered, such as respect, safety and friendships are important if children are to grow up into happy and healthy adults.

Parents do have the right to withdraw their child from sex education that is delivered outside of the National Curriculum.

Parents who do wish to withdraw their child from sex education that is being delivered outside the national curriculum should contact the Headteacher to discuss the matter. This will allow them to talk through their concerns and to ask any questions they may have. It will also allow the Headteacher to explain the curriculum and the benefits that their child will gain from taking part in the lessons. A record will be made of the meeting, but such requests will be granted and children provided with alternative learning whilst sex education is being delivered.

#### 10 Review and consultation

This policy will be regularly. It will be reviewed by the governing body and the headteacher, in consultation with parents and staff. This will be done through a parent working party and consultation with staff.

#### Appendix 1

# Relationships, Sex and Health Education - learning objectives

#### 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.

#### Staying safe

- what sorts of boundaries are appropriate in friendships with peers and others (including in a digital context).
- about the concept of privacy and the implications of it for both children and adults; including that it is not always right to keep secrets if they relate to being safe.
- that each person's body belongs to them, and the differences between appropriate and inappropriate or unsafe physical, and other, contact.
- how to respond safely and appropriately to adults they may encounter (in all contexts, including online) whom they do not know.
- how to recognise and report feelings of being unsafe or feeling bad about any adult.

#### Sex education

The national curriculum requires schools to teach the following topics:

- Year 1 the names of parts of the body, and which part is associated with which sense
- Year 2 how animals, including humans, have babies which grow into adults; and the importance of exercise for humans, eating the right amounts of different types of food, and hygiene
- Year 5 the differences in the life cycles of a mammal, an amphibian, an insect and a bird; the life process of reproduction in some plants and animals; and the changes as humans develop to old age
- Year 6 that living things produce offspring of the same kind, but normally offspring vary and are not identical to their parents

Non-statutory guidance from the government states that older pupils (year 5 onwards) should find out about different types of reproduction, including sexual and asexual reproduction in plants, and sexual reproduction in animals. They should also be able to draw a timeline to indicate stages in the growth and development of humans, and learn about the changes experienced in puberty.

#### **Health education**

#### 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 servicebased 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 with the right support

#### 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 knowhow 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

- 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 wellbeing

- 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 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 2 - Age appropriate checklist for SRE

This checklist should be used when deciding on when to deliver a particular topic or activity as part of RHE in our school. It can also be used when choosing resources.

Consider:	Yes	Comment
GREEN – almost certainly age-appropriate, but consult SLT	if unsure	
The topic/activity uses language and images that the children will understand		
The topic/activity matches the children's physical and emotional development (NB: this may not always match their chronological age)		
The topic/activity complements other aspects of the curriculum being followed by the children		
The topic/activity matches the learning objectives for the lesson and scheme of work		
The topic/activity is being delivered to prepare children for a physical or social change they are expected to experience within the next 6 months (eg puberty or transition to secondary school)		
AMPER AND A LINE OF THE OUT OUT OF THE OUT OUT OF THE O		
AMBER – may need discussion with SLT or parents before	teaching i	Degins
The topic/activity is being taught earlier than planned as there is a need to respond to questions from the children (NB be aware that questions may indicate a need for a safeguarding investigation)		
The topic/activity is being taught earlier than planned as there is a need to respond to local or national events that the children are aware of, or as a response to bullying, homophobia etc.		
The topic/activity is designed for older children but is being taught to a younger group because they are reaching puberty early or have shown other indications that they need understanding of the issue		
The topic/activity is designed for younger children but is being taught to an older group because the children need additional support in understanding this subject		
DED do not proceed without permission from SLT and ass	ocont from	parente
RED – do not proceed without permission from SLT and cor	ISENT HOII	i parents
The topic/activity includes images or descriptions of sexual acts, pornography, crime etc. (In secondary schools this may be relevant to the lesson but SLT and parents should still be informed)		

The topic/activity normalises unhealthy or harmful behaviours and attitudes without offering balanced information about risks and protective measures	
The topic/activity stigmatises or is hostile towards a particular group	
The topic/activity raises attitudes such as racism, sexism or homophobia without explaining that these are unacceptable or considering ways to counter these ideas	
The topic/activity gives inaccurate, unsafe or biased information	

#### Appendix relating to Drug Education (Alcohol and Tobacco and volatile substance)

The school's stance toward drugs, health and the needs of the pupils: Drug use and misuse have become increasingly common in our society. The school recognises the need to prepare and equip young people for life in a drug using society. The school needs to be ready and able to deal with the broad range of drug related situations and incidents which may occur in the lives of our pupils and others involved in the life of the school. It is vital that the school sends a clear message to the whole school community that the possession, use, or supply of illegal drugs is unacceptable. However, if an incident involving drugs should occur the first concern is always the health and safety of the school community and meeting the pastoral needs of the pupils. Therefore, administering first aid and summoning help in the case of medical emergencies will always take priority with any issues.

Where and to whom the policy applies: The boundaries of the school include everything inside the school gates. Incidents that occur off the school site i.e. on a school visit or in a school vehicle should be handled in the same way as in school.

**Staff with Key responsibilities:** The management of drug issues including the overseeing of planning and coordinating drug education is mainly down to the Head teacher and deputy although day to day planning of drugs education will be taken on by the RHE co-ordinator.

#### Aim of Drug, Alcohol and Tobacco Education:

The aim of drug education is to provide pupils with opportunities to develop their knowledge, skills, attitudes, and understanding about drugs and appreciate the benefits of a healthy lifestyle, relating this to their own and others' actions.

To increase pupils' knowledge and understanding and clarify misconceptions about:

- The short-term and long-term effects and risks of drugs.
- The rules and laws relating to drugs.
- The impact of drugs on individuals, families, and communities.
- The prevalence and acceptability of drug use among peers.
- The complex moral, social, emotional, and political issues surrounding drugs.

To develop pupils' social and emotional skills so they can make informed choices and keep themselves safe and healthy including:

- · Assessing, avoiding and managing risk.
- Communicating effectively.
- Resisting pressures.
- Finding information help and advice.
- Devising problem solving and coping strategies.
- Developing self-awareness and self-esteem.

# Drug education programme:

We regard drugs education as a whole-school issue, and we believe that opportunities to teach about the importance of living a healthy lifestyle occur throughout the curriculum. Each class teacher answers questions about drugs sensitively and appropriately, as they occur. In lessons, we encourage children to discuss issues that are important to them, and we help children to be aware of the dangers of the misuse of drugs. For example, if a child raises the issue of smoking, the teacher takes time to discuss its harmful effects with the whole class. In science lessons we teach children what a drug is, and how drugs are used in medicine. We also teach them the difference between legal and illegal drugs.

Drugs education is an important part of our school's RHE curriculum. The main teaching about drugs takes place in Year 6, where the children are taught about illegal drugs, and the dangers involved to those who take them. In teaching this course we follow the guidelines provided by the LEA, and we receive advice and support from the Local Health Authority. The resources and materials that we use

in these lessons are from the Islington SOW. Lessons that focus on drug education form part of a sequence of lessons that are designed to promote in children a healthy lifestyle.

The children's class teacher teaches them drug education in normal lesson time. Sometimes the class teacher seeks support from the school nurse or another health professional. The teaching style that we use encourages children to ask questions and reflect on the dangers to health of drug misuse. Children explore issues, such as why people take drugs, and how they can avoid putting themselves in danger in the future. We give children the opportunity to talk in groups or to the whole class. We encourage them to listen to the views of others, and we ask them to explore why drugs are such a problem for society.

Management of drugs at school: All issues relating to drugs on school premises are to be dealt with by the head teacher.

#### Drug related incidents in school

Each incident will be considered on its own merits and the following priorities will be considered:

- 1. The immediate health and safety of all members of the school community
- 2. Supportive responses to any individuals or groups within the school who need them, as highlighted by the incident.
- 3. Consider transgressions of school rules and assess the need for punitive responses.
- 4. Review drugs policy if current protocols were found to be inadequate.

#### Intoxicated Parents/Carers

#### **Intoxicated Pupils**

In the unlikely event of a pupil being intoxicated by drugs, alcohol or volatile substances on the school premises the welfare of the pupil is our principle concern. This means that administering first aid and summoning the emergency services will be the first priority should there be need to do so. In cases of unconsciousness an ambulance should always be called and the pupil moved into the recovery position. Parents should also be notified immediately.

Intoxication or possession of drugs in school is seen as indicative of possible serious issues requiring specialist intervention or child protection proceedings, and the school will always investigate this and respond accordingly. Staff will seek advice in cases where there is uncertainty. The pupil's welfare will always be the overriding priority.

### Discovery of drugs or paraphernalia including needles

For syringes/needles which constitute a hazard to health and safety when found on school grounds: the item must not be touched or moved; all children should be removed completely from the vicinity and the syringe/needle should be cordoned off as well as you are able (e.g. placing a bucket over the item). A member of staff should guard the item to prevent anybody coming into contact with it. Staff should not under any circumstances attempt to dispose of the item themselves. It will then be arranged for the caretaker to remove the item and place it in a 'sharps' box. If such drug paraphernalia is repeatedly found on school grounds the police should be informed so that they may attempt to discourage drugs-users from trespassing on school grounds when the school is closed.

# Involving parents

If there is a drug incident involving their children parents/carers will always be involved as a matter of priority – provided this is in the best interests of the child. Parents will be informed about any instances involving members of their family if the head teacher deems it appropriate and it is in the best interest

of the child. No other member of staff will approach those concerned unless senior management have discussed it through.

#### Involving the police

The police will always need to be involved in any incidents involving illegal drugs. They will take responsibility for disposal of such substances. The police will not normally need to be involved in incidents involving legal drugs, but the school may wish to inform Croydon Trading Standards about the inappropriate sale or supply of tobacco, alcohol or volatile substances to pupils in the local area.

#### Definitions:

DRUG USE: The consumption of any drug. All drug use, including use of medicines, has the potential to cause harm.

DRUG MISUSE: Drug taking through which harm may occur, whether through intoxication, breach of school rules or the law, or the possibility of future health problems.

DRUG ABUSE: Drug taking which harms health or functioning. It may be part of a wider spectrum of problematic or harmful behaviour.'

The well-being of the child or other individuals will be paramount. Sanctions are at the discretion of the head teacher and will be decided upon depending on the seriousness of the incident and the involvement of the child/ren. Permanent exclusion is always the last course of action in school. The school police liaison officer will be contacted to discuss any incidents that might occur.

If the head teacher is not available a member of senior management would take on the responsibility.

The procedure for dealing with parents or carers who are under the influence of drugs is to make sure the head teacher knows who will deal with it in an appropriate manner by making sure that the adult is removed from the premises if it is safe to do so.

Parents will be informed about any instances involving members of their family if the head teacher deems it appropriate and it is in the best interest of the child. No other member of staff will approach those concerned unless senior management have discussed it through.

**Authorised Drugs- Medicines and any other drugs sanctioned for legitimate use.** Pupils will bring in medication to the office and given to the secretary where it will be kept securely. Paracetamol or any medicine prescribed over the counter will not be dispensed unless a written letter from the parent has been given. The same policy applies off site, however, the staff accompanying the trip must ensure that they have all necessary medication from the office before departure. Any medication that is administered must be recorded down.

**Alcohol:** The possession and use of alcohol on school premises during the working day is prohibited for all members of the school community. The head teacher must be consulted and permission obtained before staff arrange any functions at which alcohol may be consumed. The PA has special dispensation to arrange functions where alcohol will be served, although guidance must first be taken from the Head teacher. Alcohol must not be consumed where pupils are present.

**Tobacco:** The school always operates a no smoking policy throughout the whole building and the surrounding grounds and school vehicles.

# Appendix relating to EHWB (Emotional Health and Well-Being)

After an audit was implemented it became apparent that Howard could offer a wider range of provision so alongside the Inclusion manager steps are being taken to improve what is already on offer at the school.

Mental Health First Aiders:

S Pollington

E Ancel

# **Provision already offered at Howard Primary School:**

To pupils

Zones of Regulation assemblies

Zone of regulation 'Check in'-in class

Lego Therapy

School Council

JTA

**Bully Busters** 

**Eco-Warriors** 

**Curriculum Council** 

Yoga

Mindfulness activities

# To staff/Parents

Workshops run by outside agencies and in-house training