RELATIONSHIP SEX EDUCATION (RSE) POLICY

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RELATIONSHIP SEX EDUCATION (RSE) POLICY

1. POLICY STATEMENT

- Mackenzie Thorpe Centre takes its responsibility to provide relevant, effective, and responsible Relationship Sex Education (RSE) and Health Education to all of its learners through a whole school approach. We understand the importance of educating learners about sex, relationships, and their health, to equip them to make responsible and well-informed decisions in their lives.
- Our curriculum is accessible to all and will inspire happy, confident, independent learners who are prepared for the responsibilities and experiences of adulthood. It aims to help learners understand how they are developing personally and socially and tackles many of the moral, social and cultural issues that are part of growing up in the wider society. The school would like to emphasise that by providing comprehensive relationship, sex and health education we are not encouraging learners to become sexually active at a young age. The intent of this policy is to ensure that the right provision is in place so that learners may have all the background knowledge they need to make informed decisions and responsible choices as they grow up.
- Through the provision outlined in this policy we also aim to raise learners' self-esteem and confidence, trying to develop communication and assertiveness skills that can help them stay true to their values if challenged by others, their peers or what they see in the media. We hope to teach learners to be accepting of the different beliefs, cultures, religions, sexual orientations, physical and mental abilities, backgrounds and values of those around them. We want our learners to lead a healthy and safe lifestyle, teach them to care for and respect their bodies and provide them with all the right tools that will enable them to seek information or support, should they need it, both during their school years and after.
- We have an obligation to provide learners with high-quality, evidence and age-appropriate teaching within these subjects. This policy outlines how the school's RSE and health education curriculum will be organised and delivered, to ensure it meets the needs of all learners.
- Parents are given the opportunity to discuss this policy at parents' evenings, governance, teachers and non-teaching staff are invited to discuss the policy during planned training sessions. The policy is reviewed and ratified by our trustees annually.

2. LEGAL FRAMEWORK

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- DfE (2018) 'Keeping children safe in education'
- DfE (2019) 'Relationships Education, Relationships and Sex Education (RSE) and Health Education'
- DfE (2015) 'National curriculum in England: science programmes of study'
- The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations2019
- Children and Social Work Act 2017

3. ROLES AND RESPONISIBILITIES

The trustees are responsible for:

- Ensuring all learners make progress in achieving the expected educational outcomes.
- Ensuring the RSE and health education curriculum is well-led, effectively managed and well-planned.
- Evaluating the quality of provision through regular and effective self-evaluation.
- Ensuring that teaching is delivered in ways that are accessible to all learners with SEND.
- Providing clear information to parents on the subject content and the right to request that their child is withdrawn.
- Ensuring RSE and health education is resourced, staffed and timetabled in a way that ensures the school canfulfil its legal obligations.

The Principal is responsible for:

- The overall implementation of this policy.
- Ensuring all staff are suitably trained to deliver the subjects.
- Ensuring parents are fully informed of this policy.
- Reviewing all requests to withdraw learners from non-statutory elements of the RSE and health education curriculum.
- Discussing withdrawal requests with parents, and the pupil if appropriate, to ensure their wishes are understood and to clarify the nature and purpose of the curriculum, including the benefits of receiving the education.
- Ensuring withdrawn learners receive appropriate, purposeful education during the period of withdrawal.
- Encouraging parents to be involved in consultations regarding the school's RSE and health education curriculum.
- Reviewing this policy on an annual basis.
- Reporting to the governing board on the effectiveness of this policy and the curriculum.

The Designated Safeguarding Lead (DSL) is responsible for:

- Offering advice and consultation for safeguarding-related subjects in the RSE and health education curriculum.
- Promoting knowledge and awareness of safeguarding issues amongst staff.
- Being an appropriate point of contact for staff who have concerns about the welfare of a pupil that have arisenthrough the teaching of RSE and health education.

The RSE and health education subject leader is responsible for:

- Overseeing the delivery of RSE and health education and review of this policy annually. This policy is developed in consultation with school parents, learners and staff to ensure that it meets the needs of the whole school community.

- Working closely with colleagues in related curriculum areas to ensure the RSE and health education curriculum compliments, and does not duplicate, the content covered in other curriculum subjects.
- Ensuring the curriculum is age-appropriate and ability appropriate and of high quality.
- Reviewing changes to the RSE and health education curriculum and advising on their implementation.
- Monitoring the learning and teaching of RSE and health education, providing support to staff where necessary.
- Ensuring the continuity and progression between each year group.
- Helping to develop colleagues' expertise in the subject.
- Ensuring teachers are provided with adequate resources to support teaching of the curriculum.
- Leading staff meetings and ensuring all members of staff involved in the curriculum have received the appropriate training.
- Organising, providing and monitoring CPD opportunities in the subject.
- Ensuring the correct standards are met for recording and assessing pupil performance.
- Monitoring and evaluating the effectiveness of the subjects and providing reports for teaching and learning.
- Ensuring that all staff are up to date with policy changes, and familiar with school policy and guidance relatingto RSE and Health Education.
- Provide support to staff members who feel uncomfortable or ill-equipped to deal with the delivery of sex education to learners.
- Ensuring all learners make progress in achieving the expected outcomes.
- Ensuring the RSE and health education curriculum is well-led, effectively managed and well-planned.
- Ensuring that the knowledge and information regarding RSE and health education to which all learners areentitled is provided in a comprehensive way.
- Supporting parental involvement in the development of the RSE and health education curriculum.
- Ensuring that their personal beliefs and attitudes will not prevent them from providing a balanced RSE in school.
- Provide clear information to parents and carers on the subject content and the right to request that their childis withdrawn.
- Ensuring RSE and health education is resourced.

All staff will:

- Act in accordance with, and promoting, this policy. Any areas that they feel are not covered or inadequately provided for should be reported back to the subject lead for PSHE.
- Delivering RSE and health education in a manner that is sensitive, of high quality and appropriate for each group.
- Ensuring they do not express personal views or beliefs when delivering the curriculum.
- Planning lessons effectively, ensuring a range of appropriate teaching methods and resources are used to cover the content.
- Modelling positive attitudes to RSE and health education.

- Liaising with the RSE and health education subject leader on key topics, resources and support for individual learners.
- Monitoring pupil progress in RSE and health education.
- Reporting any concerns regarding the teaching of RSE or health education to the RSE and health education subject leader or a member of the SLT.
- Reporting any safeguarding concerns or disclosures that learners may make as a result of the subject content tothe DSL.
- Responding appropriately to learners whose parents have requested to withdraw them from the non-statutory components of RSE, by providing them with alternative education opportunities.
- Attend and engage in professional development training around RSE provision.
- Encourage learners to communicate concerns regarding their social, personal and emotional development in confidence, listen to their needs and support them seriously. If a student comes to a member of staff with an issue that that member of staff feels they are not able to deal with alone, they should take this concern to their manager. No one else should be informed at this stage, and a breach of confidentiality may fall under staff misconduct and disciplinary procedures.
- Provide regular feedback to their managers on their experience of teaching RSE and student response.
- Ensure that their personal beliefs and attitudes will not prevent them from providing balanced RSE in school.
- Effectively differentiate their lessons to suit all learners in their class, across the whole range of abilities, including those learners with special educational needs.

Learners:

- Learners are expected to attend RSE and health education lessons that are in their school timetable and take them seriously. Although they are not assessed through examination, these classes are still a very important part of the curriculum and a tool to aid personal development and the school expects learners to recognise this.
- Learners should support one another with issues that arise through RSHE. Listening in class, being considerate of other people's feelings and beliefs, and complying with confidentiality rules that are set in class are key to effective provision.
- Should share any concerns they have in school related to RSE or otherwise. Conversations of this nature between staff and learners will be held in confidence; however, staff may take concerns to their manager if there is a child protection concern, or they feel ill-equipped to deal with the issue at hand.

- Will provide feedback on the school's RSE and health education provision and expect them to take this responsibility seriously. Opinions on provision and comments will be reviewed by senior managers and taken into consideration when the curriculum is prepared for the following year's learners. In this way, the school hopes to provide learners with the education they need on topics they want to learn about.

Parents

- The school expects parents to share the responsibility of relationship, sex and health education and support their children's personal, social, and emotional development. We encourage parents to create an open home environment where learners can engage, discuss, and continue to learn about matters that have been raised through school PSHE. Parents are also encouraged to seek additional support in this from the school where they feel it is needed.

4. IMPLEMENTATION AND CURRICULUM

- It is important that we implement our RSE and health education policy and SOW consistently throughout the school and provide effective provision throughout classrooms. We encourage teachers to provide lessons that are specific to the needs of the learners in that class, and responsive to their behaviour and development.
- Through this aspect of our curriculum we aim to explore different attitudes, values and social labels, and develop skills that will enable our learners to make informed decisions regarding relationship, sex and health. Itis important that learners know the difference between fact, opinion and belief.

5. DEFINITIONS

- **"relationships and sex education"** is defined as teaching learners about developing healthy, nurturing relationships of all kinds, and helping them to understand human sexuality and to respect themselves and others.
- **"health education"** is defined as teaching learners about how they can make good decisions about their own health and wellbeing, and how physical health and mental wellbeing are interlinked.

6. DELIVERY OF THE CURRICULUM

- The RSE and health education curriculum and SOW will be developed in consultation with SLT, teachers, learners and parents, and in accordance with DfE recommendations. We will gather the views of teachers, learners and parents in the following ways: questionnaires, meetings, letters and training sessions
- The majority of the RSE and health education curriculum will be delivered through PSHE education and life skills SOW.
- The curriculum has been developed in line with the DfE's 'Relationships Education, Relationships and Sex Education (RSE) and Health Education' guidance.
- The school will consider the context and views of the wider local community when developing the curriculum to ensure it is reflective of issues in the local area.
- The school will consider the religious background of all learners when planning teaching, to ensure all topics included are appropriately handled.
- The RSE and health education curriculum is informed by topical issues in the school and wider community, to ensure it is tailored to learners' needs, for example, if there was a local prevalence of specific sexually transmitted infections, our curriculum would be tailored to address this issue.
- Through effective organisation and delivery of the subject, we will ensure that: core knowledge is sectioned into units of a manageable size. The required content is communicated to learners clearly, in a carefully sequenced way, within a planned scheme of work. Teaching includes sufficient and well-chosen opportunities and contexts for learners to embed new knowledge so that it can be used confidently in real-life situations.
- RSE and health education complement several national curriculum subjects. Where appropriate, the school looks for opportunities to make links between the subjects and integrate teaching.
- The RSE and health education curriculum will be delivered by appropriately trained members of staff.
- The curriculum will proactively address issues in a timely way in line with current evidence on pupil's physical, emotional and sexual development.

- RSE and health education will be delivered in a non-judgemental, age-appropriate, factual and inclusive way that allows learners to ask questions in a safe environment.
- Teaching of the curriculum reflects requirements set out in law, particularly in the Equality Act 2010, so that learners understand what the law does and does not allow, and the wider legal implications of the decisions they make.
- The school will integrate LGBTQ+ content into the RSE curriculum — this content will be taught as part of the overall curriculum, rather than a standalone topic or lesson. LGBTQ+ content will be approached in a sensitive, age-appropriate and factual way that allows learners to explore the features of stable and healthy same-sex relationships.
- Throughout every year group, appropriate diagrams, videos, books, games, discussion and practical activities will be used to assist learning.
- Learners will be prevented from accessing inappropriate materials on the internet when using such to assist withtheir learning. The prevention measures taken to ensure this are outlined in the school's E-safety Policy.
- Teachers will establish what is appropriate for one-to-one and whole class settings, and alter their teaching of the programmes accordingly.
- Teachers will ensure that learners' views are listened to and will encourage them to ask questions and engage in discussion. Teachers will answer questions sensitively and honestly.
- Teachers will focus heavily on the importance of marriage and healthy relationships when teaching RSE, though sensitivity will always be given as to not stigmatise learners on the basis of their home circumstances.
- Teachers will ensure lesson plans focus on challenging perceived views of learners based on protected characteristics, through exploration of, and developing mutual respect for, those different to themselves.
- In teaching the curriculum, teachers will be aware that learners may raise topics such as self-harm and suicide. When talking about these topics in lessons, teachers will be aware of the risks of encouraging these behaviours and will avoid any resources or material that appear as instructive rather than preventative.
- At all points of delivery of the curriculum, parents will be consulted, and their views will be valued. What will betaught and how, will be planned in conjunction with parents.

7. CURRICULUM LINKS

- The school seeks opportunities to draw links between RSE and health education and other curriculum subjects wherever possible to enhance learners' learning.
- RSE and health education will be linked to the following subjects:
  - **PSHE** – learners learn about respect and difference, values and characteristics of individuals. They cover thethree strands of relationships, living in the wider world and health and wellbeing.
  - **Science** – learners are taught about the main external parts of the body and changes to the human body as it grows, including puberty.
  - **ICT and computing** – learners are taught about how they can keep themselves safe online and the different risks that they may face online as they get older.
  - **PE** – learners can develop competence to excel in a broad range of physical activities, are physically active for sustained periods of time, engage in competitive sport and lead healthy, active lives.
  - **Health and well-being –** learners are taught the importance of a healthy diet for their own health and wellbeing as well as opportunities through hobbies and interests and voluntary work to support and develop theirown mental health and wellbeing.

8. WORKING WITH EXTERNAL AGENCIES

- Working with external agencies can enhance our delivery of RSE and health education and brings in specialist knowledge and different ways of engaging learners.
- External experts may be invited to assist from time-to-time with the delivery of the RSE and health education curriculum but will be expected to comply with the provisions of this policy.
- The school will check the visitor/visiting organisation's credentials of all external agencies.
- The school will ensure the teaching delivered by the external experts fits with the planned curriculum and provisions of this policy.
- The school will discuss with the visitor the details of how they intend to deliver their sessions and ensure the content is age-appropriate and accessible for all learners.
- The school will request copies of the materials and lesson plans the visitor will use, to ensure it meets the full range of learners' needs.
- The school and the visitor will agree on how confidentiality will work in any lesson and that the visitor understands how safeguarding reports must be dealt with in line with the school's safeguarding policy.
- The school will use visitors to enhance teaching by an appropriate member of the teaching staff, not to replace teaching by those staff.

9. TERMINOLOGY

- Learners 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.

10. DEALING WITH DIFFICULT QUESTIONS

- Staff training will include sessions on how to deal with difficult questions. There may still be times when staff are faced with a difficult question in class that they feel uncomfortable or ill equipped to answer. In this case, they may wish to put the question to one side and seek advice from the subject lead for PSHE.
- Ground rules in class are essential when discussing sensitive subject matter. Some strategies staff may use to support this might be:
  - An anonymous question box; this will enable learners to feel more comfortable to ask questions without being identified
  - Making the classroom a cone of silence; this means that whatever is discussed in the classroom stays in the classroom and should not be brought up at any other time. We hope this will give learners the sense that they are in a safe zone to speak freely about sex and relationships.

11. LEARNERS SPECIAL EDUCATIONAL NEEDS

- The school works hard to ensure that all aspects of the school curriculum are inclusive and support the needs of learners of all ranges of abilities. Staff should differentiate lessons to ensure that all members of the class can access the information fully, and this is no different when it comes to RSE and health education.

- The school will use a variety of different strategies to ensure that all learners have access to the same information. Some of these include:
  - interactive teaching methods e.g. contraceptive card game
  - use of expert guest speakers
  - practical activities
  - using DVDs or video
  - group and paired activities.

12. ASSESSMENT

- The school has the same high expectations of the quality of learners' work in RSE and health education as for other curriculum areas. Lessons are planned to provide a suitable challenge to learners of all abilities. Assessments progress tracking is used to monitor progress and also identify where learners require extra support or interventions. This is reported in line with the school's assessment procedures.

13. WITHDRAWAL FROM RSE

- The school aims to keep parents informed about all aspects of the RSE and health education curriculum and urges parents to read this policy. Parents can request access to resources and information being used in class, and the school will do everything it can to ensure that parents are comfortable with the education provided to their children in school. It is, however, a statutory right of parents or carers to request that their child is withdrawn from some or all sex education delivered as part of statutory RSE. This excludes the right to withdraw their child from the relationships or health elements of the programmes and human growth and reproduction which fall under the National Curriculum science.
- Any parent wishing to withdraw their child from some or all sex education delivered as part of statutory RSE will need to be made in writing and should contact the Principal, who will arrange a meeting to discuss their concerns. RSE is a vital part of the school curriculum and supports child development and we strongly urge parents to carefully consider their decision before withdrawing their child from this aspect of school life. However, it is acknowledged that the final decision on the issue is for the parent to take. Following discussions with parents, the school will respect the parents' request to withdraw their child up to and until three terms before the child turns 16. After this point, if the child wishes to receive RSE rather than be withdrawn, the school will make arrangements to provide the child with RSE. Learners who are withdrawn from RSE will receive appropriate, purposeful education during the full period of withdrawal.

14. COMPLAINTS

- Parents or carers who have complaints or concerns regarding the RSE and health education curriculum should contact the school and follow the school's complaint policy.

15. EQUAL OPPORTUNTIES

- RSE and health education provides a good background for talking openly and freely about the 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. This is the case for bullying of any kind and the procedures regarding this are outlined in the school's behaviour policy.

- The school will comply with the relevant requirements of the Equality Act 2010 and will ensure the curriculum does not discriminate against learners because of their:
  - Age
  - Sex
  - Race
  - Disability
  - Religion or belief
  - Gender reassignment
  - Pregnancy or maternity
  - Marriage or civil partnership
  - Sexual orientation
- The school will consider the backgrounds, gender, age range and needs of its learners and determine whether it isnecessary to put in place additional support for learners with the above protected characteristics.
- The school understands that learners with SEND are entitled to learn about RSE and health education, and the curriculum will be designed to be inclusive of all learners.
- The school is aware that some learners are more vulnerable to exploitation, bullying and other issues due to the natureof their SEND — teachers will understand that they may need to liaise with SLT teaching and learning lead and be more explicit and adapt their planning or work to appropriately deliver the curriculum to learners with SEND.
- Where there is a need to tailor content and teaching to meet the needs of learners at different developmental stages, the school will ensure the teaching remains sensitive, age-appropriate, developmentally appropriate and is delivered with reference to the law.
- The school will take steps to foster healthy and respectful peer-to-peer communication and behaviour between boys and girls and provide an environment which challenges perceived limits on learners based on their gender or any other characteristic.
- The school will be actively aware of everyday issues such as sexism, misogyny, homophobia, and gender stereotypes and take positive action to build a culture within which these are not tolerated. Any occurrences of such issues will be identified and tackled promptly.

16. SAFEGUARDING AND CONFIDENTIALITY

- We provide a safe and supportive school community where learners feel comfortable seeking help and guidance on anything that may be concerning them about life either at school or at home. Training around confidentiality will be provided to all teachers.
- All learners will be taught about keeping themselves safe, including online, as part of a broad and balanced curriculum.
- To meet DfE's best practice advice, the DSL will be involved in the formulation of safeguarding-related areas of the curriculum, as the knowledge and resources may help to address safeguarding issues more appropriately and effectively.
- When teaching issues that are particularly sensitive for learners of all ages, e.g., self-harm or suicide, teachers willbe made aware of the risks of inadvertently encouraging, or providing instructions to, learners. Teaching of these subjects will always prioritise preventing harm to learners as a central goal.

- Confidentiality within the classroom will be an important component of RSE and health education, and teachers will be expected to respect the confidentiality of their learners as far as is possible, in compliance with the school's Pupil Confidentiality Policy.
- Teachers will, however, understand that some aspects of RSE may lead to a pupil raising a safeguarding concern, e.g., disclosing that they are being abused, and that if a disclosure is made, the DSL will be alerted immediately. Learners will be made aware of how to raise their concerns or make a report, and how their report will be handledthis includes the process for when they have a concern about a peer.
- It may be the case that discussion around what is acceptable and not acceptable in relationships may lead to the disclosure of a child protection issue. If this is the case, the school's **child protection and safeguarding procedure** should be followed.
- Personal information about learners who have approached a teacher for discussion should only be shared on a need to know basis with the safeguarding team and PSHE lead. All information will be recorded on student dairies.
- If there is a child protection concern, the information must *only be shared with that staff member's manager* as is outlined in the school child protection and safeguarding procedure. Staff members that breach the right to a child's privacy by disclosing or sharing confidential information with no reason to do so will be dealt with under the school's **staff discipline, conduct and grievance procedures**.
- 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. This would be referred to the safeguarding team for information.
- Encourage the pupil to talk to their parents or carer. Learners 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 school 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 under 13 is having, or is contemplating having sexual intercourse, this will be dealt with under child protection procedures.
- Learners 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 SLT to decide what is in the best interest of the child.

17. ADVICE AND TREATMENT

- Staff who are approached by learners with a concern about having contracted or possibly contracted a sexually transmitted disease should refer them immediately to Senior Management. Providing advice on contraception and practising safe sex is a key part of the school's RSE and health education provision. We also encourage parents to engage their child in open discussion about practising safe sex.
- There is no reason for staff to expect to be made aware of a pupil or colleague's HIV or hepatitis status, and no person will be discriminated against because of this if there is a disclosure of this type of information.
- The school's **first aid policy** covers protection for all school members against infection from blood-borne viruses.

18. MONITORING, REVIEW AND EVALUATION

- The leadership team will be responsible for monitoring the quality of teaching and learning within the subject. They will conduct regular assessments through learning walks, lesson observations and work scrutiny.
- The educational and personal needs of our learners develop in line with varying societal pressures and economic change. Our aim is to provide RSE and health education that is relevant and tailored to meet the needs of our learners, depending on their age and stage of personal development. For this reason, we review the RSE and health education yearly and will inform parents of any revisions to the school policy or curriculum.
- We aim to monitor the effectiveness of our RSE and health education provision through:
  - feedback from learners.
  - feedback from parents.
  - feedback from staff; and
  - classroom observations.

19. STAFF TRAINING

- Training will be provided to members of staff on a termly basis to ensure they are up to date with the RSE and health education curriculum. Training will also be scheduled around any updated guidance on the curriculum and any new developments, e.g., “sexting”, which may need to be addressed in relation to the curriculum.
- Professional development training in how to deliver RSE and health education; this includes sessions on confidentiality, setting ground rules, handling controversial issues, responding to awkward questions and an introduction to the rationale of why teaching RSE and health education is so important. There are certain members of the school leadership team, such as DSL, who will hold more responsibility for ensuring that the school’s RSE and health education provision is relevant to our learners and effective, but this is generally a responsibility for all staff members and the school expects staff to voice opinions and share expertise in this area.
- Appropriately trained staff will be able to give learners information on where and how to obtain confidential advice, counselling and treatment, as well as guidance on emergency contraception and their effectiveness.

20. SUPPORT AVAILABLE

- We hope that learners will feel safe in the school environment to talk to any member of staff in confidence about any areas of concern regarding their personal, social and emotional development, including matters raised by or relating toRSE and health education.
- We promote the school ethos as one of inclusion and acceptance throughout all areas of school activity and hope that learners respond to this by feeling comfortable to ask questions and continue their learning both in and outside of the classroom.
- It is important that teaching staff feel comfortable to teach RSE and health education and answer questions from learners. If the teacher does not feel confident leading RSE and Health education discussions then that is likely to be reflected by the learners, and their learning will be compromised.

21. LINKS WITH OTHER POLICIES

- Anti-Bullying Policy
- Equality and Diversity
- E-Safety and Online Policy
- Keeping Children Safe in Education
- Mental Health Policy
- Safeguarding and Child Protection Policy