

Curriculum Policy Relationships and Sex Education and Health Education Policy

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1. Aims

Stephen Hawking Primary School is committed to putting safeguarding and well-being at the heart of everything we do and this includes teaching Relationships and Sex education (RSE) and Health Education to pupils.

The aims of Relationships and Sex Education (RSE) and Health Education at our school are:

- To teach RSE as outlined by the Department of Education and comply with the relevant provisions of the [Equality Act 2010](#) and the DfE guidance on [Relationships and Sex education \(RSE\) and Health Education](#)
- Provide a framework in which sensitive discussions can take place
- Support pupils to form trusting and meaningful relationships with others beyond their family and develop an awareness of different types of families and relationships
- Support pupils in very early developmental stages (pupils with Profound and Multiple Learning Difficulties) to develop an understanding of self
- Prepare pupils for puberty, and give them an understanding of sexual development and the importance of health and hygiene
- Help pupils develop feelings of self-respect, confidence and empathy
- Create a positive culture around issues of sexuality and relationships
- Teach pupils the correct vocabulary to describe themselves and their bodies

At Stephen Hawking School we support pupils to develop self-esteem, self-advocacy and respect for themselves and others.

2. Statutory requirements

As a maintained primary school for pupils with profound and multiple learning difficulties and complex medical needs we must provide relationships and health education to all pupils as per section 34 of the [Children and Social Work Act 2017](#).

However, we are not required to provide sex education but we do need to teach the elements of sex education contained in the science curriculum. As a school what we deliver to individual pupils will be determined by our assessment of pupils' developmental stages to access our pre-formal, semi-formal or formal curriculum. This enables us to deliver a curriculum that is meaningful to that child.

In teaching RSE and Health Education, we must have regard to [guidance](#) issued by the secretary of state as outlined in section 403 of the [Education Act 1996](#).

At Stephen Hawking School we teach RSE and Health Education as set out in this policy.

3. Policy development

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

1. Review – The Deputy Head and PSED and RSHE Education coordinator pulled together all relevant information including relevant national and local guidance
2. Staff and governor consultation – school staff were given the opportunity to look at the policy and make recommendations. The policy has been shared with the curriculum coordinators, who were invited to provide feedback. There was also consultation with teachers and governors.
3. Parent/carer consultation – parents were provided with information about the policy and surveyed on their views.
4. Ratification – once amendments were made, the policy was ratified by the Full Governing Body

4. Definition

RSE and Health Education are about the emotional, social, cultural and physical wellbeing of our pupils and involves learning about relationships, growing and changing, healthy lifestyles, diversity and personal identity. It involves a combination of sharing information, and exploring issues and values.

5. Curriculum

Stephen Hawking School curriculum follows three pathways (formal, semiformal and pre-formal) via topics. The teachers create personalised learning resources and may use resources that were developed by [Chailey Heritage Foundation](#) and NSPCC. All resources may be adapted as and when necessary depending on the year group, the ability of the pupils and level of understanding of our pupils within it, and also to address individual needs.

Parents are welcome to arrange a meeting with the RSE and Health Education coordinator and Deputy Head to discuss resources used in specific RSE lessons.

Our RSE and Health curriculum is set out as per the **PSED and RHE Curriculum Overview** and **the PSED and RHE Programme of Study: KS1 and KS2**, but we may need to adapt it as and when necessary.

6. Delivery of RSE

At Stephen Hawking School our RSE and Health Education aims to support the pupils in developing an understanding of;

- Themselves and others around them
- Their own bodies and changes that may occur
- Recognising that everyone is different
- Tolerance towards others
- Theirs and others' ability to make choices
- Being healthy and safe

Relationships and Health education is taught within the PSED and RHE lessons, and through other areas of the curriculum, such as Religious Education (RE), Assemblies or topic work. Biological aspects of RSE are taught within the science curriculum. Also, through routines and day-to-day interactions that are valuable learning opportunities for our pupils.

Relationships education focuses on teaching the fundamental building blocks and characteristics of positive relationships including:

Families and people who care for me

Caring friendships

Respectful relationships

Online relationships (please refer to our E-safety Policy)

Being safe

These areas of learning are taught within the context of family life, children from all types of family are valued at Stephen Hawking School. Families can include single parent families, LGBT parents, families headed by grandparents, adoptive parents, foster parents/carers.

For more information about our RSE and Health Education curriculum, see the **PSED and RHE Curriculum Overview** and **the PSED and RHE Programme of Study: KS1 and KS2**.

6.1 Inclusivity

We will teach about these topics in a manner that:

Considers how a diverse range of pupils will relate to them

Is sensitive to all pupils' experiences

During lessons, makes pupils feel:

- o Safe and supported
- o Able to engage with the key messages

We will also:

Make sure that pupils learn about these topics in an environment that's appropriate for them, for example in:

- o A whole-class setting
- o Small groups or targeted sessions
- o 1-to-1
- o Daily routines

6.2 Use of resources

We **will** consider whether any resources we plan to use:

- o Are aligned with the teaching requirements set out in the statutory RSE guidance
- o Are age-appropriate, given the age, developmental stage and background of our pupils
- o Are evidence-based and contain robust facts and statistics
- o Fit into our curriculum plan
- o Are from credible sources
- o Are compatible with effective teaching approaches
- o Are sensitive to pupils' experiences

7. Use of external organisations and materials

We will make sure that an agency and any materials used are appropriate and in line with our legal duties around political impartiality.

We **will**:

Make appropriate checks and engage with external agencies to make sure that their approach to teaching about RSE is balanced, and it and the resources they intend to use:

- o Are age-appropriate
- o Are in line with pupils' developmental stage
- o Comply with:
 - This policy
 - The [Teachers' Standards](#)
 - The [Equality Act 2010](#)
 - The [Human Rights Act 1998](#)
 - The [Education Act 1996](#)

8. Self-touch, masturbation and learning disabilities

It is normal for young children to touch their own genitals because it feels nice, because they are exploring their body or because they are doing it as self-soothing behaviour. However, masturbatory activity commonly increases during puberty when there is a rise in sexual hormones.

Masturbation is a common human behaviour and having a learning disability doesn't switch that behaviour off. There is no minimum legal age at which a person can masturbate on their own and in private. Masturbation is defined as the touching and stimulation of your own genitals for pleasure (Gadd, 2021).

However, intimate self-touch doesn't always have a sexual motivation. Staff, parents and carers and medical professionals have to check that there is not another underlying reason for the self-touch. Repeated inappropriate self-touch may be an indicator of any of the following: sensory needs, uncomfortable continence products, tight underwear or clothing, urinary tract infections, inadequate personal hygiene, pubic hair growth, thrush, threadworms, balanitis, tight foreskin, amongst others.

If there is an intent to masturbate for sexual stimulation, a response with clear boundaries needs to be given. Use a clear, assertive voice with clear hand gestures, and visual aids and symbols if needed. Give clear instructions of how or where the behaviour would be okay. It is reasonable to give exaggerated facial expressions, body language and social cues so that people with learning disabilities can learn that masturbation in public is not a socially acceptable behaviour.

Masturbating in a public space where the genitals and/or their masturbating can reasonably be seen and cause offence to others is considered illegal.

Well planned, relevant and accurate Relationships and Sex Education helps delay sexual activity, promote responsible behaviour and prevent harm (UNESCO, 2009).

A comprehensive PSED and RSHE curriculum contributes to reducing vulnerability, improved safeguard of children and to the reduction of inappropriate behaviours.

If pupils display sexual inappropriate behaviours in public, teachers will work in partnership with parents, with the support of Sasha Sullivan, deputy head and designated safeguarding lead, and Cristina Garcia, PSED and RSHE curriculum coordinator to safeguard the children. Intervention will be one-to-one, and meaningful to their learning characteristics, following the below good practice:

- Check that there are no underlying or undiagnosed health problems triggering the self-touch
- Say 'Stop touching your penis/vagina/private parts. Do not touch our private parts in the classroom. Touching your penis/vagina/private body parts is a private activity, done in a private space at home or 'Stop rubbing your vagina against the chair. Do not rub our vagina/private parts in the classroom. You can only do that in a private place at home.'
- Use distraction techniques to occupy their interest, offer them their most motivating activity e.g messy play, movement break, snack, drink, favourite toy, iPad, etc.
- Check whether the pupil has a private space at home, and if not, suggest they have one.
- Plan a sexual behaviour and sex education care plan that includes meaningful public and private body parts, public and private places, public and private behaviours, appropriate and inappropriate touch lessons

Sexual behaviour and Sex Education Care Plan

A sexual behaviour care plan focuses on a person's sexual rights and behaviour and sets out clear strategies for staff to follow while being a person-centred response to the individual's needs. A sexual behaviour care plan is usually developed when a child or young person with learning disabilities displays worrying, problematic or harmful behaviour to themselves and/or others. If a child is managing their own private sexual behaviour in a way that doesn't impact on other people, they will have no need for a sexual behaviour care plan.

A sexual behaviour care plan will contain the following key elements:

- Introduction to the child or young person
- Explanation of the behaviour

- What education and training the child or young person has received or is undergoing now, and what their levels of understanding are
- What rules there are about the behaviour
- What action to take if inappropriate sexual behaviour is displayed so that all the staff and family respond in a consistent and appropriate way.
- A risk-assessment section to flag up any safety issues for staff who are working with the child or young person.

9. Roles and responsibilities

9.1 The governing body

The governing body will approve the RSE and Health Education policy, and hold the Head Teacher to account for its implementation.

9.2 The Head Teacher

The Headteacher and Deputy Head Teacher are responsible for ensuring that RSE and Health Education is taught consistently across the school, ensuring staff receive appropriate training, and for managing requests to withdraw pupils from non-statutory components of Sex Education.

9.3 RSE and Health Education coordinator Teacher

The PSED and RSHE Curriculum coordinator teacher will support the Head with the review of the policy and curriculum.

9.4 Staff

Staff are responsible for:

Delivering RSE and Health Education in a sensitive way

Modelling positive attitudes to RSE and Health Education

Monitoring progress and responding to the needs of individual pupils through observation

Responding appropriately to pupils whose parents wish them to be withdrawn from components of Sex Education.

9.5 Pupils

Pupils are expected to engage fully in RSE and Health Education and, when discussing issues related to RSE and Health Education, treat others with respect and sensitivity.

10. Parents' right to withdraw

Requests for withdrawal from non-statutory components of the RSE curriculum should be put in writing and addressed to the Head Teacher. A copy of the withdrawal request will be placed on the student's educational record. The Heads of School will discuss the request with the parents and take appropriate action.

11. Training

Staff are trained on the delivery of RSE and Health Education and it is included in our continuing professional development calendar.

12. Monitoring arrangements

This policy will be reviewed by the RSE and Health Education coordinator Teacher and Head of School. At every review the policy will be approved by the governing body (Curriculum committee).

Ofsted is required to evaluate and report on the spiritual, moral, social and cultural development of students. After the visit they will make a judgement on personal development (including teaching of the protected characteristics) in section 5 Inspection and they will make a judgement on leadership and management. This now includes how effectively the school teaches the new RSE and Health Education curriculum, and includes evaluating and commenting on the school's RSE Policy and on staff development, training and delivery.