



Title of Policy: Sex and Relationship Education Policy

Member of leadership team with lead responsibility for oversight and update of policy	HOW
Approved at SLT	November 2015
Approved at Governing Body	February 2016
Policy review cycle	Bi-annually
Policy review date	February 2018

The Board of Directors of CAT have formally agreed to adopt WCC/WES policies in Warwickshire schools. LGBs are asked to acknowledge this when reviewing and consenting to these policies. Policies can be interpreted fairly notwithstanding minor wording anomalies which might occur. LGBs are Guardians of Standards in schools, operating within the framework of the CAT Scheme of Delegation, for which guidance has been issued, so LGBs are responsible for agreeing a range of other school policies provided to them by school management.

Sex and Relationship Education Policy

Introduction

At The Polesworth School it is our belief that effective sex and relationship education (SRE) is crucial in supporting young people through their physical, emotional and moral development, enabling them to make informed life choices confidently and helping them to respect both themselves and others as they move through life. We also believe that parents are the key people in educating their children about sex and relationships and as such, see our role as working in partnership with parents and students to fulfil that responsibility.

What Is Sex and Relationship Education?

The government defines SRE as 'lifelong learning about physical, moral and emotional development. It is about the understanding of the importance of marriage for family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality and sexual health. It is not about the promotion of sexual orientation or sexual activity - this would be inappropriate teaching.' (DfE Guidance 0116/2000)

Based upon the above definition, The Polesworth School seeks to ensure that SRE:

- enables our students to better understand the nature of human relationships;
- enables our students to see the importance of stable, loving relationships for the bringing up of children;
- prepares students for the changes that occur to their bodies, minds and emotions as a consequence of growth from childhood to adulthood.

In addition, The Polesworth School believes that SRE should:

- be an integral part of the lifelong learning process, beginning in early childhood and continuing into adult life;
- be an entitlement for all young people;

- be set within a wider school context and should support family commitment and love, respect and affection, knowledge and openness. N.B. 'Family' is a broad concept and includes a variety of types of family structure, which accepts different approaches other than merely the nuclear family.
- encourage students and teachers to share and respect each other's views. We are aware of different approaches to sexual orientation, without promotion of any particular family structure. The important values are love, respect and care for each other.
- generate an atmosphere where questions and discussion on sexual matters can take place without any stigma or embarrassment;
- recognise that the wider community has much to offer and we aim to work in partnership with health professionals, social workers, peer educators and other mentors or advisers.

Sex and Relationship Education in The Polesworth School has three main elements, all of which are important for a balanced SRE programme:

Attitudes and Values

- learning the importance of values and individual conscience and moral choices;
- learning the value of family life, marriage and stable and loving relationships;
- learning about the nurture of children;
- learning the value of respect, love and care;
- exploring, considering and understanding moral dilemmas;
- developing critical thinking as part of decision-making;
- challenging myths, misconceptions and false assumptions about normal behaviour.

Personal and Social Skills

- learning to manage emotions and relationships confidently and sensitively;
- developing self-respect and empathy for others;
- learning to make choices based on an understanding of difference and with an absence of prejudice;
- developing an appreciation of the consequences of choices made;
- managing conflict;
- empowering students with the skills to be able to recognise and avoid exploitation and abuse.

Knowledge and Understanding

- learning and understanding physical development at appropriate stages;
- understanding human sexuality, reproduction, sexual health, emotions and relationships;
- learning about contraception and the range of local and national sexual health advice, contraception and support services;
- learning the reasons for delaying sexual activity, and the benefits to be gained from such delay;
- the avoidance of unplanned pregnancy.

Aims

At The Polesworth School, our aim is to provide balanced factual information about human reproduction while also considering the broader emotional, ethical, religious, and moral dimensions of sexual health. Our SRE programme aims to prepare students for an adult life in which they can:

- develop positive values and a moral framework that will guide their decisions, judgements and behaviour; have the confidence and self-esteem to value themselves and others and respect for individual conscience and the skills to judge what kind of relationship they want.
- understand the consequences of their actions and behave responsibly within sexual and non-sexual relationships.
- avoid being exploited or exploiting others or being pressured into unwanted or unprotected sex, including an understanding of the meaning of consent.
- communicate effectively by developing appropriate terminology for sex and relationship issues.
- develop awareness of their sexuality and understand human sexuality; challenge sexism and prejudice and promote equality and diversity
- understand the arguments for delaying sexual activity.
- understand the reasons for having protected sex.
- have sufficient information and skills to protect themselves and, where they have one, their partner from uninvited/unwanted conceptions and sexually transmitted infections including HIV.
- be aware of sources of help and acquire the skills and confidence to access confidential health advice, support and treatment if necessary

- know how the law applies to sexual relationships.

The SRE programme

The content of the schools programme is based on the National Curriculum Science Order and the non-statutory guidance for PSHE/Ct contained in the National Curriculum Handbook for Teachers. In line with this guidance, the school recognises that SRE must be taught at both Key Stages and indeed, SRE appears in each Year's PSHE programme. The school's prospectus clearly states that SRE will be part of the PSHE programme. Parents wishing to see the SRE programme and the materials used and/or the PSHE scheme of work may do so by contacting their child's Head of House. Parents will also be informed when SRE is going to be delivered in school to their child via 'Polesworth Matters' or text message, with an invitation to support the work being done in school by discussing issues at home.

The delivery of SRE

The effective delivery of SRE in schools is recognised as a key factor in reducing teenage pregnancies and improving sexual health (DfE 2006) and it is our intention that SRE is delivered professionally and with sensitivity at all times, irrespective of gender, disability or sexual orientation.

All teachers are responsible for teaching about and modelling good relationships within school. Much of the general work in school is based on good relationships and in this regard SRE is supported by the school's Behaviour Management Policy. It is the responsibility of the Science department's staff to deliver the National Curriculum Science Order according to the Scheme of Work. Where specific sex education occurs, which is outside or beyond the National Curriculum Science Order, the school has a team of teachers trained specifically to deliver SRE within the secondary context. SRE is delivered as part of the school's PSHE programme, via Enhanced Learning Days and sometimes through the School of Character programme.

Methods of teaching and resourcing

In the delivery of SRE teachers will use a variety of teaching methods and resources. The following are recognised methods for the effective delivery of SRE:

- Discussion
- Drama and role play
- Research and presentation.

Teachers will also use other teaching methods to enable students to learn about SRE which are age appropriate, taking into account the developmental needs of individual students. Parents are welcome to discuss with teachers their approach to SRE and the methods of teaching and learning to be used.

The school uses a wide variety of resources, including videos. Resources used by the school are produced for schools by educational publishers and are intended for students in the light of best current research into SRE.

Monitoring and evaluating SRE

SRE will be monitored by the Head of School of Character who holds responsibility for the delivery of PSHE. The Head of School of Character is responsible for:

- Ensuring that SRE occurs in the school's curriculum according to the schemes of work for PSHE;
- Monitoring the use of teaching and learning styles;
- Monitoring the use of teaching materials;
- Evaluating the effectiveness of the school's programme.

Dealing with sensitive issues

Teachers need to be sure that they are aware of issues that may arise out of teaching and learning about SRE. The following are protocols for discussion-based lessons with students:

- no one (teacher or student) will have to answer a personal question;
- no one will be forced to take part in a discussion;
- only the correct names for body parts will be used;
- meanings of words will be explained in a sensible and factual way; and
- teachers may use their discretion in responding to questions and may say that the appropriate person to answer that question is the parent.

Where a member of staff is concerned that a child protection issue is arising it is his/her responsibility to follow the school's Child Protection and Safeguarding Policy in this matter.

Visitors contributing to SRE

From time to time as part of a planned module of work, the school will invite in local experts on issues relating to SRE as well as using health and other professionals associated

with the school. All school associate health and other professional and visitors will be asked to conform to the following:

- visitors contributing to SRE will do so at the invitation of the school and will be qualified to make an appropriate contribution.
- visitors must agree with the aims of the school in delivering its policy on SRE;
- when in class visitors will be supervised by a member of staff, who will be present at all times;
- visitors will follow the school's Child Protection procedures if a disclosure occurs within the classroom setting;
- visitors will know and understand where their contribution fits into the school's programme for SRE and PSHE.

Services to Young People provided by the school

The school facilitates various services for its young people which are provided by health and other professionals attached to the school. The school nurse provides a drop-in sexual health clinic for students. The school also provides a counsellor from the Youth Service during school time and after school.

The above services are advertised throughout the school and parents may also contact these services by making an appointment with the school nurse or counsellor. It is clear from Government guidelines that when not in a classroom context these professionals are covered by their own professional codes of conduct:

Health professionals

7.16.1 Outside the teaching situation, health professionals such as school nurses can:

- give one-to-one advice or information to a student on a health-related matter including contraception; and
- exercise their own professional judgement as to whether a young person has the maturity to consent to medical treatment including contraceptive treatment.

(The criteria for making such a decision are based on the 'Fraser guidelines' and can be found in guidance issued jointly by the Health Education Authority, the British Medical Association, Brook Advisory Centres and others. Any competent young person, regardless of age, can independently seek medical advice and give valid consent to treatment).
(Circular 0116/2000)

Confidentiality

In cases where a teacher learns from a student under the age of 16 that they are having, or contemplating having, sexual intercourse the teacher should:

- encourage the student to talk to their parent or carer;
- encourage the student to contact the school nurse or counsellor to access contraceptive and other services in the locality of the school.

Teachers will only have to report such disclosures where child protection issues are involved.

When the teacher who receives the information believes there is a child protection issue to be addressed, they should refer the case to the Designated Safeguarding Lead (DSL). They should also make clear to the student that they cannot guarantee confidentiality. The teacher should ensure that the student understands that if confidentiality has to be broken they will be informed first.

Health professionals are bound by their professional codes of conduct to maintain confidentiality. The school nurse will be bound by the NMC code of conduct and the school's counsellor by BAC codes of conduct. The school expects that health professionals employed by the school will maintain their professional status and registration.

Parental right to withdrawal from SRE

As stated above parents have the right to withdraw their students from SRE that falls outside the National Curriculum Science Order. They do so in writing to the Head of School. When the Head of School receives such a letter she will invite the parents to a meeting, at which the Head of School will explain clearly what the school's policy is and seek to accommodate the wishes and/or concerns of the parents. If that is not possible the student will be withdrawn from SRE and placed in another class where suitable work and supervision will be provided. Parents will be given the DfE support pack for parents who withdraw their children for SRE as presented in the school's basic curriculum. The right to withdrawal will be made clear in the school's prospectus. A copy of this policy will be made available to all parents who request it at the cost of photocopying or it will be e-mailed to them.

APPENDIX

What the Law Says

Consent to medical treatment and The Fraser Guidelines

Adults, defined as people over the age of 18, are usually regarded as competent to decide their own treatment. The Family Law Reform Act 1969 also gives the right to consent to treatment to anyone aged 16 to 18.

Young people under the age of 16 can consent to medical treatment if they have sufficient maturity and judgement to enable them fully to understand what is proposed. This was clarified in England and Wales by the House of Lords in the 1985 Gillick case.

Although it is an offence to have sex with someone under the age of 16 it is lawful for doctors to provide contraceptive advice and treatment without parental consent providing certain criteria are met. The criteria for making such a decision are based on the 'Fraser guidelines' and can be found in guidance issued by the NSPCC, the British Medical Association, Brook Advisory Centres and others. Any competent young person, regardless of age, can independently seek medical advice and give valid consent to treatment). (Circular 0116/2000)

The Fraser Guidelines

In 1985, Lord Fraser said in judgment of the Gillick case, that a professional can give contraceptive advice or treatment to a person under 16 without parental consent providing the professional is satisfied that:

- the young person will understand the professional's advice;
- the young person cannot be persuaded to tell his or her parents or allow the doctor to tell them they are seeking contraceptive advice.
- the young person is likely to begin, or to continue having, sexual intercourse with or without contraceptive treatment;
- the young person's physical or mental health, or both, are likely to suffer unless she or he receives contraceptive advice or treatment;
- the young person's best interests require them to receive contraceptive advice or treatment with or without parental consent.