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The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations 2019, made under sections 34 and 35 of the Children and Social Work Act 2017, make Relationships Education compulsory for all pupils receiving primary education and Relationships and Sex Education (RSE) compulsory for all pupils receiving secondary education.

Hurworth School believes that every young person is entitled to sex and relationship education as preparation for adult life. It is a key component to each pupil's personal, social, health and citizenship education and complements the statutory science education they receive. In planning our programme we aim to support parent/carers in helping their children to make the transition to adult life and we welcome discussion with them.

Our Relationships and Sexual Health curriculum aims to enable to students to embrace the challenges of creating a happy and successful adult life. We believe that pupils need knowledge that will enable them to make informed decisions about their wellbeing, health and relationships and to build their self-efficacy. We enable pupils to put this knowledge into practice as they develop the capacity to make sound decisions when facing risks, challenges and complex contexts. We support young people to develop resilience, to know how and when to ask for help, and to know where to access support.

Our curriculum is planned to cover the content set out in the guidance in the context of a broad and balanced curriculum. Core knowledge is broken down into units of manageable size and communicated clearly to pupils, in a carefully sequenced, age appropriate and evidence-based way. Lessons include opportunities and contexts for pupils to embed new knowledge so that it can be used confidently in real life situations. This enables us to promote the spiritual, moral, social, cultural, mental and physical development of pupils, at school and in society.

The sequencing and delivery of this curriculum is detailed in our PSCHE (including RSHE) Policy.

## **Parental rights to withdraw from RSHE**

Sections 34 and 35 of the Children and Social Work Act 2017 set out rights of parents/carers to withdraw pupils from sex education (but not Relationships or Health Education) and the process that head teachers should follow in considering a request from a parent.

If parents want their child to be excused from some or all of sex education lessons delivered as part of RSHE but which does not count as statutory content, they can request that their child is withdrawn. The head teacher should consider this request and discuss it with the parents, and grant it in all but exceptional circumstances, up until three school terms before the child turns 16. At this age, a child can choose to receive sex education if they would like to, and school must make arrangements for this to take place in one of those three terms (again, unless there are exceptional circumstances).

## **Inclusive Curriculum**

In teaching Relationships Education and RSE, schools should ensure that the needs of all pupils are appropriately met, and that all pupils understand the importance of equality and respect. Schools must ensure that they comply with the relevant provisions of the Equality Act 2010, (please see The Equality Act 2010 and schools: Departmental advice), under which sexual orientation and gender reassignment are amongst the protected characteristics.

The school takes every effort to ensure that the delivery of PSHCE and all aspects of personal development education are in full compliance with the Equality Act of 2010. Teaching should reflect the law, including the Equality Act 2010, as it applies to relationships and other issues (e.g. gender and gender realignment) covered within the curriculum, so that young people clearly understand what the law allows (and does not allow) and the wider legal implications of decisions they may make.

PSHCE lessons are designed to take into account the religious and faith backgrounds of pupils so that the topics that are included in the regulations are appropriately handled. It is recognised that there will be a range of opinions regarding RSE. The starting principle when teaching each of these must be that the applicable law should be taught in a factual way so that pupils are clear on their rights and responsibilities as citizens.

The nature of RSHE means that often teachers are asked to cover sensitive and controversial issues. These may have a political, social or personal impact and deal with questions of values and beliefs. It is important that teachers approach these topics with an unbiased view. Pupils are taught to recognise bias and to evaluate evidence and examples. Teachers strive to establish a classroom environment in which all pupils feel free to express reasonable points of view and contradict those held by their peers or by the class teacher without judgment or repercussions.

Staff should be alert to issues such as everyday sexism, misogyny, homophobia, transphobia and gender stereotypes and take positive action to build a culture where

these are not tolerated, and any occurrences are identified and tackled according to the school's safeguarding procedures.

PSHCE lessons need to be sensitive and age appropriate in approach and content. The school uses local and national data to determine the point at which we feel it is appropriate to teach our pupils about different types of relationships including LGBT+ relationships. Our curriculum is designed to be fully inclusive and all case studies, scenarios and discussion points introduce pupils (and allow them to respond to) to a range of different relationships.

## **Confidentiality**

The school follows Fraser guidance on confidentiality. The Fraser Guidelines were set out in the Department of Health Circular on Family Planning Services for Young People (March 1986) were reinforced in 2003 in line with the Sexual Offences Act 2003. (See appendix 1).

## **Related Policies**

This policy relates to many other school policies and in particular to our PSHCE Policy (including RSHE) Policy where full details of the intent, implementation and impact of our curriculum can be found.

We believe that SRE is not an isolated topic but is an implicit part of our whole school provision. All policies can be viewed in their entirety using the following link:

[www.hurworthschool.org.uk/policies](http://www.hurworthschool.org.uk/policies)

## **Appendix 1 Fraser Guidance - a summary The Law, Fraser Guidelines and Confidentiality**

### **The Law (Sexual Offences Act 2003)**

- The age of consent is 16 for everyone!
- The same laws apply to heterosexual & homosexual activity
- Offences can be committed by anyone over the age of 10
- Sexual activity with a child under 13 carries the highest penalties

### **Under 13s**

- Young people under the age of 13 cannot legally give their consent so sexual activity with a child under 13 is never acceptable.
- When young people under the age of 13 are identified as being **sexual active** child protection procedures must be followed.

- Young people should not be discouraged from attending services for fear of breaches of confidentiality/ referrals to Social Services.
- 1 or 2 condoms can be given for educational purposes if young person not sexually active
- A referral must be made if young person is sexually active. Non-referral is not an option. Confidentiality cannot be maintained.

### **General guidance**

- The Act states that a person is not guilty of aiding, abetting or counselling a sexual offence against a child where they are acting for the purpose of:
  - Protecting a child from pregnancy or STI's
  - Protecting the physical safety of a child
  - Promoting a child's emotional well-being by giving the advice
- In all cases the person must not be causing or encouraging the commission of an offence or a child's participation in it.
- This exception covers anyone who acts to protect a child, for example teachers, Connexions Personal Advisors and youth workers.
- The law is not intended to prosecute mutually agreed sexual activity between two young people of a similar age
- Young people, including those under 13, will continue to have the right to confidential **advice** on contraception, condoms, pregnancy and abortion.

### **Fraser Guidelines**

Workers may provide advice or treatment to young people under 16 on contraception, sexual and reproductive health provided that they have undergone an initial assessment. The assessment should demonstrate that the young person:

- Understands the information provided and is aware of the costs and consequences.
- Is likely to begin or continue having sex with or without contraceptive information.
- Cannot be persuaded to talk to his or her parents/guardians.
- The worker is satisfied that it is in the best interests of the young person to provide information/treatment without parental consent.
- Physical or mental health or both are likely to suffer unless he/she receives advice or treatment.

## **Confidentiality**

“The duty of confidentiality owed to a young person is as great as that owed to any adult. Regardless of whether or not the requested treatment/information is given confidentiality should still be respected, **unless** there are convincing reasons to the contrary.”

Confidentiality should be discussed with young people **before** any consultation has begun. Workers working with partner agencies (e.g. schools) should make themselves aware of the confidentiality policy of that organisation

### **When to breach confidentiality**

- Any risk of harm to the young person
- Evidence of exploitation or abuse
- Unable to satisfy Fraser competency
- Sexual activity under the age of 13

Confidentiality should only be breached in exceptional circumstances where the health, safety or welfare of the young person or others would otherwise be at grave risk. The decision whether to breach confidentiality depends on the degree of current or likely harm not solely on the age of the client. **Unless the client is under the age of 13.**

Breaching confidentiality does not automatically mean a child protection referral is being made (although it would if concerns involved current or potential harm, exploitation or abuse to the young person or anyone else). It may just mean a referral or involvement of another agency or professional (e.g. GP, sexual health outreach worker).