

# Relationships and Health Education (RHE) Policy

Signed by: Date:

Committee with oversight for this policy	Curriculum Committee
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#### 1. Rationale

The following policy refers to Relationships and Health Education (RHE) at Woodlands Academy. We define Relationships and Health Education (RHE)as learning about caring friendships, families and people who care for me, respectful relationships, online relationships, being safe, growing up and puberty.

The main objectives of RHE are the following:

#### 1. To build healthy relationships

- -Teach children the importance of respectful and kind relationships with family, friends, and peers.
- -Develop communication skills, including how to resolve conflicts peacefully and how to ask for help when necessary.
- -Focus on the value of empathy, respect and fairness in all interactions.
- -Recognise what makes a healthy positive relationship.

#### 2. To encourage healthy lifestyles.

- -Understand the importance of healthy eating, regular exercise, and good hygiene practices.
- -Recognise the importance of sleep and maintaining a balanced lifestyle.
- -Promote awareness of the risks of substance misuse (e.g., smoking, vaping, alcohol, drugs) in an age-appropriate way.

#### 3. Develop Understanding of Puberty and Growing Up:

- Begin introducing age-appropriate information about puberty, including physical changes and emotional developments.
- -Explain the differences between boys and girls and the stages of human growth and development in a way that is respectful and sensitive.

#### 4. Safeguarding and Online Safety:

- -Teach children about the importance of personal safety, including how to recognise unsafe situations and how to ask for help.
- -Discuss online safety and responsible digital behaviour, including respecting others online and understanding the risks of sharing personal information.

#### 5. Respect for Diversity:

- Promote inclusivity, celebrating diversity in families, cultures, and communities.
- Foster an environment of respect, acceptance, and kindness of everyone in society.

Aspects of Relationships and Health Education (RHE) are taught as an integral part of the school's PSHE provision following the Ealing Scheme of Work from Reception to Year 6. In this way, children are able to develop their ideas, knowledge and skills gradually and age appropriately. These lessons enable them to make informed decisions and protect themselves against harmful and exploitative situations, either now or in the future, therefore making it an important tool to safeguard children. These lessons contribute to the foundation of PSHE and Spiritual, Moral, Social and Cultural (SMSC) development and offer a valuable vehicle for promoting equality between individuals and groups. It involves an exploration of human and social diversity, and a fostering of self worth, whilst recognising, accepting and respecting differences.

#### Relationships and Growing Up Education and Ofsted:

The 2019 Ofsted framework states that pupils should be able to recognise online and offline risks to their well-being – for example, risks from criminal and sexual exploitation, domestic abuse, female genital mutilation (FGM), substance misuse, gang activity, radicalisation and extremism – and making them aware of the support available to them. It also states that schools should ensure they are developing pupils' age-appropriate understanding of healthy relationships through appropriate relationship and sex education.

The 2019 Ofsted framework also states: 'From September 2019, schools are able to follow a new relationships and sex education and health education curriculum. From September 2020, they will be required by law to follow it. Primary-age children must be taught about positive relationships and respect for others, and how these are linked to promoting good mental health and well-being. In addition, sex education will become mandatory at secondary level (from Year 7 upwards). If a school is failing to meet its obligations, inspectors will consider this when reaching the personal development judgement.

#### Moral and Values Framework:

The Relationships and Growing Up Education Policy will be sensitive towards the established morals and values framework of all the major world religions and philosophies. In its implementation, it will draw from the practical experiences of those who represent the various religious and philosophical groups within the local community while promoting tolerance and respect of all people.

# 2. Statutory requirements

The statutory requirements for Relationships and Health Education (RHE) in primary schools focus on teaching children essential skills and knowledge to support their personal development, wellbeing and healthy relationships. The curriculum aims to promote healthy relationships, personal safety, and mental and physical wellbeing for students in an inclusive and age-appropriate way.

Schools are required to comply with relevant requirements of the Equality Act 2010. Further guidance is available for schools in The Equality Act 2010 and school's advice. The DfE guidance states that schools should pay particular attention to the Public sector equality duty (PSED) Under the provisions of the Equality Act, schools must not unlawfully discriminate against pupils because of their age, sex, race, disability, religion or belief, gender reassignment, pregnancy or maternity, marriage or civil partnership, or sexual orientation (collectively known as the protected characteristics). Schools must also make reasonable adjustments to alleviate disadvantage and be mindful of the SEND Code of Practice when planning for these subjects.

As a primary school, we must provide Relationships and Health Education (RHE) to all pupils as per section 34 of the Children and Social work act 2017. We are not required to provide sex

education, but we do need to teach the elements of sex education contained in the Science Curriculum. Parents can withdraw from sex education lessons (see section 9). In teaching Relationships and Health Education (RHE) we are required by our funding agreements to have regard to guidance issued by the secretary of state as outlined in section 403 of the Education Act 1996. At Woodlands Academy we teach Relationships and Health Education (RHE) as set out in this policy.

# 3. Intent: Aim and objectives

The aim of this policy is to enable the effective planning, delivery and assessment of Relationships and Health Education (RHE). The aims of RHE at our school is to:

- Develop confidence in talking, listening and thinking about feelings and relationships
- Teach pupils the correct vocabulary to describe themselves and their bodies
- Be prepared for puberty and understand the basic changes that happen during puberty
- Understand how to keep their bodies healthy and clean
- Understand how to keep themselves and their bodies safe
- Help pupils develop feeling of self-respect, confidence and empathy
- Help pupils recognise healthy friendships and relationships in person and online
- Provide a framework in which sensitive discussions can take place
- Foster respect for the views of other people

Relationships and Health Education (RHE) is closely linked to our school value of Respect. Pupils are taught to show respect towards others in the relationships they have with others. This includes peer relationships both face to face and online and their family relationships. They should respect themselves and their own bodies so it is important they are aware of physical and emotional changes they will experience as they grow up.

# 4. Implementation: Content, Delivery and Training

#### Content:

- Relationships and Health Education (RHE) is taught within the Personal, Social, Health and Economic (PSHE) education curriculum.
- Our school uses the Ealing PSHE scheme of work to deliver PSHE and Relationships and Health Education (RHE). Biological aspects of RHE are taught within the Science curriculum. A breakdown of what is covered in Science, Health Education and Relationships Education can be found in Appendix 1.
- The main aspects of Relationships and Health Education are covered in the Summer Term as part of PSHE (see Appendix 2), however many aspects of keeping safe, good and bad touch, healthy friendships, online safety, peer pressure, saying no, the PANTS rule, families and people who care for me are taught throughout the school year to ensure a consistent spiralling approach to keeping safe. The PANTS Rule is displayed in all classrooms and on our online learning platform Google Classroom to remind children how to keep themselves safe.

Here's a summary of the key areas:

#### 1. Relationships Education

- Families and People Who Care for Me: Teaching about family diversity and the roles of family members.
- Caring Friendships: Focusing on healthy friendships, empathy, and conflict resolution.
- Respectful Relationships: Promoting respect, kindness, understanding, and teaching about bullying, consent, and personal boundaries.
- Online Relationships: Educating students on online safety, cyberbullying, and respectful digital communication.
- Being Safe: Covering personal safety, safeguarding, and knowing when to seek help.

#### 2. Health Education

- Mental Wellbeing: Teaching emotional regulation, resilience, and mental health awareness.
- Internet Safety: Focusing on staying safe online and understanding risks.
- Physical Health: Promoting exercise, hygiene, healthy eating, and overall physical wellbeing.
- Healthy Eating: Educating on nutrition and making healthier food choices.
- Drugs, Alcohol, and Tobacco: Providing age-appropriate information on the risks of substances.
- Basic First Aid: Teaching fundamental first aid skills.
- Puberty (Key Stage 2): Covering physical and emotional changes during puberty in an age-appropriate manner.
- The above points are covered in an age appropriate way from EYFS to Year 6 (see Appendix 2 for more detail). These areas of learning are taught within the context of family life taking care to ensure that there is no stigmatisation of children based on their home circumstances (families can include single parent families, families headed by grandparents, adoptive parents, foster parents/carers amongst other structures) along with reflecting sensitively that some children may have a different structure of support around them (for example: looked after children or young carers).
- The changing adolescent body (puberty) is covered in Years 4, 5 and 6. It is covered at
  this age to ensure children are prepared for the emotional and physical changes that will
  happen during puberty. Puberty is part of the statutory Health Education curriculum (see
  Appendix 1).

- Appendix 2 outlines the learning objectives for Relationships and Health Education (RHE) and Appendix 3 outlines the vocabulary our school uses during these lessons.
- As part of the PSHE curriculum our school delivers lessons on Female Genital Mutilation (FGM) to pupils from Year 3 to Year 6. Woodlands took part in the FGM project delivered by Ealing. These lessons are designed to raise pupils' awareness of appropriate and inappropriate touch, including FGM. For more information on the content of these lessons, please speak to the Headteacher, Ms Hasker or Assistant Headteacher/DSL/PSHE and Wellbeing Lead, Ms Moxom. The lesson resources will be available to look through at the parent coffee morning workshops/ online if appropriate. Parents have the right to withdraw from these lessons (see section 9).

#### Delivery:

- Relationships and Health Education (RHE) will be delivered by a member of school staff, usually the child's class teacher. If an external visitor is delivering all or aspects of the lessons, parents will be informed.
- Relationships and Health Education (RHE)is usually delivered in mixed gender groups other than when it is deemed more appropriate for topics to be covered in single sex groups (Years 4, 5 and 6 for the lessons on puberty and Yr 6 reproduction lesson)
- Relationships and Health Education (RHE) will be assessed as part of the wider PSHE curriculum.
- Staff are aware that views around RHE related issues are varied. However, while
  personal views are respected, all RHE issues are taught without bias. Topics are
  presented using a variety of views and beliefs so that pupils are able to form their own,
  informed opinions but also respect others that may have a different opinion.
- Both formal and informal RHE questions arising from pupils are answered according to the age and maturity of the pupil(s) concerned. Questions do not have to be answered directly and can be addressed individually later. This is done with confidentiality, often using post it notes throughout or at the end of the session.
- The school believes that individual teachers must use their skill and discretion in this
  area and refer to the Child Protection Lead if they are concerned. The following are
  protocols teachers follow for discussion ('Ground Rules')
- No one (teacher or pupil) will have to answer a personal question
- No one will be forced to take part in a discussion
- Only correct/agreed names for body parts will be used
- Meanings of words will be explained in a sensible and factual way, using the correct scientific vocabulary.
- The use of a question box may help to avoid any embarrassment of asking questions
- Teachers may use their discretion in responding to questions and may say (for example): 'The appropriate person to answer that question is your parent' or 'The topic will be covered at a later stage in your Relationships, Growing Up and Health Education'
- As is the case with all PSHE lessons, we start the lesson with the ROCK ground rules (Respect, Openness, Confidentiality and Kindness). It is explained to children that the most important thing is to keep them safe, so there might be situations where we cannot keep confidentiality of what a child has shared, either verbally or written if we think they

- are not safe. This is the case for all children and the school works in partnership with carers and other professionals including social workers by following our safeguarding procedures for child protection as necessary. Children who are looked after will receive additional information from the school from a member of the safeguarding team. Please refer to our safeguarding policy for more information.
- Ms Moxom, Assistant Headteacher/ DSL/PSHE and Wellbeing Lead, is the member of staff who monitors the implementation of Relationships and Health Education; this monitoring is done through lesson observations, pupil voice sessions and staff feedback.
   Ms Moxom also supports the teachers in the delivery of lessons on puberty for Year 4 -6 as required. Relationships and Health Education (RHE) is assessed and evaluated by using the Ealing PSHE scheme of work.

#### Training:

- Staff are trained on the delivery of Relationships and Health Education (RHE) as part of their induction and it is included in our continuing professional development calendar.
- The Headteacher may also invite visitors from outside the school, such as school nurses
  or the Ealing Health Improvement Team, to provide support and training to staff teaching
  RHE.

# 5. Impact- What are the desired outcomes?

- We continuously assess the implementation and impact of our RHE curriculum in order to achieve the highest outcomes possible across all year groups and ensure we provide the support that is necessary for all children to have a good understanding of the complexities of relationships and a secure knowledge and skills to make informed choices in their lives.
- With our Relationships and Health Education curriculum, we believe we can enhance children's education and help them to become confident individuals who have positive body awareness, an in-depth knowledge of how to keep themselves safe and healthy.
- Impact of these lessons will be evident through pupil voice and attitudes/ behaviour shown by our pupils. They will, through respect, tolerance and understanding, forge and maintain positive relationships with a diverse range of family and friendship groups.

# 6. Policy development

This policy has been developed by engaging with staff, pupils and parents. The steps taken to review the policy are as follows. The Department for Education and Ofsted have clearly outlined aspects of Relationships Education that are statutory in all primary schools, therefore some recommendations or comments made during this process may not be reflected in the final policy as our school has to ensure we are meeting statutory guidelines.

**1. Review** –members of the Relationships and Growing Up Education working party looked through the existing Relationships and Growing Up Education policy as well as local and national guidance for Relationships Education. The working party then reviewed the Relationships and Growing Up Education policy reflecting any advice and changes at local and

national level. The name was changed to Relationships and Health Education (RHE), in line with the updated PSHE Ealing scheme of work.

- **2. Staff consultation** All staff were consulted through discussion in INSET. Their feedback informed the policy development and also informed additional support needed to enhance the delivery of RHE, e.g team teaching delivery, split grouping for puberty lessons..
- **3. Parent consultation-** Parents are given the opportunity to give feedback before teaching begins every year. The resources from the Ealing scheme of work will be available to look through and parents will have the opportunity to look at and discuss resources with Ms Moxom and Ms Hasker at a parent coffee drop-in meeting. The draft policy was shared on our school website and a letter was sent out to invite parents to our workshop to give any feedback or ask any questions. Parents will be consulted further should there be the need for any further changes as a result of government guidance.
- **4. Pupil consultation** We consulted with pupils via the 2023 Health Related Behaviour Survey. The results of this survey were then used to inform the policy and inform the delivery of RHE in our school.
- **5. Governor consultation** All governors were sent the draft policy in advance of the governor meeting and were then invited to comment on the policy and make suggestions/amendments.
- **6. Ratification** once amendments were made, the policy was shared with governors and ratified. This policy will be reviewed every two Years. This policy will be next reviewed in March 2026.

# 7. Equal Opportunities

- Woodlands Academy believes that Relationships and Health Education (RHE) should meet the needs of all pupils. Our school is committed to the provision to all pupils and the differing needs of boys and girls. All staff are expected to give every pupil the chance to experience, participate and achieve the understanding of Relationships and Health Education.
- Equal time and provision will be allocated for all groups but there may be occasions
  where children with special educational needs (SEN) or pupils with English as an
  Additional Language (EAL) needs are given extra support, in line with existing school
  arrangements.
- The planning and organising of teaching strategies will be consistently reviewed e.g. through lesson observations to ensure that no pupil is disadvantaged.
- **Boys and girls** from Year 4 to Year 6 will be taught separately on certain topics related specifically to puberty changes. This is to ensure that children feel comfortable accessing content of the curriculum.
- The specific needs of individual/ groups of children is taken into consideration by the timing of the programme with suitable age-appropriate content being taught.
- Children with **Special Educational Needs (SEN)** will be supported to access the content of the curriculum at a level appropriate to their needs.
- The school will work in partnership with parents prior to learning so they are aware of the content. A range of teaching strategies will be used to enable children to understand the content they are being taught.

# 8. Child protection

- There may be rare occasions when a teacher is directly approached by a primary aged child who makes a disclosure related to their learning. With respect to child abuse and protection procedures, staff will follow the school's Child Protection policy.
- The designated member of staff to be contacted is Ms Moxom, Assistant Headteacher/ Designated Safeguarding Lead. Deputy designates are Ms Hasker, Headteacher and Mrs Sherborne, EYFS Lead. If we have any concerns about a child's wellbeing or safety, then it must be reported to the Designated Safeguarding Lead and procedures in the Child protection safeguarding policy will be followed. This includes contacting parents as necessary. Staff will also be referred to the: DfE's 2024 document on 'Keeping children safe in education'- statutory guidance for schools and colleges.

# 9. Partnership with Parents

The school views parents as partners in the delivery of Parents will be informed about the Relationships and Health Education (RHE) programme at the start of the Summer term as part of information provided on what their children will be learning. The school will liaise with parents through:

- Workshops to share the content of the lessons
- School website to share the policy
- Letter (Appendix 4)
- The school encourages parents to discuss Relationships and Health Education (RHE) with the Headteacher, Assistant Headteacher/PSHE and Wellbeing Lead or the child's class teacher and are invited to view materials in advance of the lessons. The content is also available on our school website under the Relationships and Health Education section.

#### Right to withdraw

- Parents do not have the right to withdraw their children from statutory Relationships and Health Education lessons (see outline of Relationships and Health education in Appendix 1). Parents also cannot withdraw their children from the statutory National Science Curriculum (see Appendix 1)
- Parents have the right to withdraw their children from the non-statutory components of sex education within Relationships and Health Education (see Appendix 1). However, the only non-statutory component is in the Year 6 curriculum Lesson 4 on How the body changes for reproduction.
- Parents have the right to withdraw their children from the FGM lessons (see Appendix
  1). Woodlands was part of the FGM project run by the Ealing Health Imporovement
  Team and Hoda Ali when the project first started in Ealing. The FGM lesson content will
  be available to look at in the parent drop in session.
- Requests for withdrawal from these lessons should be put in writing and addressed to the headteacher. In the event of a child being withdrawn from a lesson,

- that child must stay in school and will be assigned to another class until that specific lesson is over.
- If a child is withdrawn from the lessons, the school cannot guarantee that your child will not hear about the content of lessons from other pupils e.g. on the playground, walking home from school. It is important that children receive accurate information in a safe environment where they can ask questions. Children may seek the information out elsewhere e.g. friends, siblings, the internet. These sources of information are often incorrect and unreliable and can expose children to information which is not appropriate for their age.

# 10. Roles and responsibilities

**The Governing Board** will approve the Relationships and Health Education policy and hold the headteacher to account for its implementation.

**The Headteacher and Assistant Headteacher** is responsible for ensuring that Relationships and Health Education is taught consistently across the school, and for managing requests to withdraw pupils from non-statutory components of Relationships and Health Education (see Appendix 1).

**Staff** are responsible for:

- Delivering Relationships and Health Education (RHE) in a sensitive way
- Modelling positive attitudes to Relationships and Health Education
- Monitoring progress
- Responding to the needs of individual pupils

Staff do not have the right to opt out of teaching Relationships and Health Education. Staff who have concerns about teaching Relationships and Health Education (RHE)are encouraged to discuss this with the headteacher. All teaching staff will deliver RHE lessons as part of the PSHE curriculum. Ms Moxom is responsible for leading PSHE and RHE in this school. Pupils are expected to engage fully in these lessons and when discussing issues related to Relationships and Health Education, treat others with respect and sensitivity.

#### Dissemination

We will ensure the following:

- a copy of the RHE policy is disseminated to all staff members and governors
- training is provided to staff on the policy content
- there are copies of the RHE policy available from the school office (and the school website) for parents to access on request.

**APPENDIX 1:** Curriculum coverage – science, relationships education and health education

Relationships Education	Sex Education	Science	Health education		
Statutory	Non statutory (Year 6 only)	Statutory	Statutory		
Families and people who care for	<ul> <li>questions pertaining to sex</li> </ul>	Key Stage 1:	Mental wellbeing		
me	or sexuality which go	o identify, name, draw and	<ul> <li>that mental wellbeing is a</li> </ul>		
<ul> <li>that families are important for children growing up because they can give love, security and</li> </ul>	beyond what is set out for Relationships Education.  o questions pertaining to sex	label the basic parts of the human body and say which part of the body is	normal part of daily life, in the same way as physical health.		
stability.	or sexuality which go	associated with each	o that there is a normal range		
<ul> <li>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.</li> <li>that others' families, either in school or in the wider world,</li> </ul>	beyond what is set out for Relationships Education.  Sexual reproduction in humans	sense.  o notice that animals, including humans, have offspring which grow into adults  Key Stage 2:  o describe the changes as humans develop to old age o recognise that living things	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		
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		produce offspring of the same kind, but normally offspring vary and are not identical to their parents	vocabulary of words to use when talking about their own and others' feelings.  o how to judge whether what they are feeling and how they are behaving is appropriate and proportionate.  o the benefits of physical		
security as they grow up.			<b>exercise</b> , time outdoors, community participation,		

			T	
0	that marriage represents a formal			voluntary and service-based
	and legally recognised			activity on mental wellbeing
	commitment of two people to			and happiness.
	each other which is intended to be			simple self-care techniques,
	lifelong.			including the importance of
0	how to recognise if family			rest, time spent with friends
	relationships are making them feel			and family and the benefits
	unhappy or unsafe, and how to			of hobbies and interests.
	seek help or advice from others if			isolation and loneliness can
	needed.			affect children and that it is
				very important for children
				to discuss their feelings with
				an adult and seek support.
				that <b>bullying</b> (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).
			o	it is common for people to
				experience mental ill health.
				For many people who do,
				the problems can be
				resolved if the right support
L		<u> </u>	I	resolved if the right support

Г	
	is made available, especially
	if accessed early enough.
Caring friendships	Internet safety and harms
<ul> <li>how important friendships are in</li> </ul>	o that for most people the
making us feel happy and secure,	internet is an integral part of
and how people choose and make	life and has <b>many benefits</b> .
friends.	o about the benefits of
<ul> <li>the characteristics of friendships,</li> </ul>	rationing time spent online,
including mutual respect,	the <b>risks</b> of <b>excessive</b> time
truthfulness, trustworthiness,	spent on electronic devices
loyalty, kindness, generosity, trust,	and the <b>impact of positive</b>
sharing interests and experiences	and negative content online
and support with problems and	on their own and others'
difficulties.	mental and physical
<ul> <li>that healthy friendships are</li> </ul>	wellbeing.
positive and welcoming towards	o how to consider the effect of
others, and do not make others	their online actions on
feel lonely or excluded.	others and know how to
<ul> <li>that most friendships have ups and</li> </ul>	recognise and <b>display</b>
downs, and that these can often be	respectful behaviour online
worked through so that the	and the importance of
friendship is repaired or even	keeping personal
strengthened, and that resorting to	information private.
violence is never right.	<ul> <li>why social media, some</li> </ul>
o how to recognise who to trust and	computer games and online
who not to trust, how to judge	gaming, for example, <b>are age</b>
when a friendship is making them	restricted.
feel unhappy or uncomfortable,	o that the internet can also be
managing conflict, how to manage	a <b>negative place</b> where
these situations and how to seek	online <b>abuse</b> , <b>trolling</b> ,
help or advice from others, if	bullying and harassment can
needed.	take place, which can have a
	negative impact on mental
	health.

	o how to be a <b>discerning</b>	
	consumer of information	on
	online including	
	understanding that	
	information, including the	hat
	from search engines, is	
	ranked, selected and	
	targeted.	
	<ul> <li>where and how to repo</li> </ul>	ort
	concerns and get suppo	ort
	with issues online.	
Respectful relationships	Physical health and fitner	SS
<ul> <li>the importance of respecting</li> </ul>	<ul> <li>the characteristics and</li> </ul>	
others, even when they are very	mental and physical	
different from them (for example,	benefits of an active	
physically, in character, personality	lifestyle.	
or backgrounds), or make different	o the importance of <b>build</b>	ling
choices or have different	regular exercise into da	ily
preferences or beliefs.	and weekly routines an	nd
<ul> <li>practical steps they can take in a</li> </ul>	how to achieve this; for	
range of different contexts to	example walking or cycl	ling
improve or support respectful	to school, a daily active	mile
relationships.	or other forms of regula	ar,
o the conventions of courtesy and	vigorous exercise.	
manners.	<ul> <li>the risks associated wit</li> </ul>	h an
o the importance of self-respect and	inactive lifestyle (includ	ding
how this links to their own	obesity).	J
happiness.	o how and when to seek	
<b>o</b> that in school and in wider society	support including which	า
they can expect to be treated with	adults to speak to in sch	
respect by others, and that in turn	if they are worried abou	
they <b>should show due respect to</b>	their health.	
others, including those in positions		
of authority		

0	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.		
0	what a <b>stereotype is</b> , and how		
	stereotypes can be unfair, negative		
	or destructive.		
О	the importance of		
	permission-seeking and giving in		
	relationships with friends, peers		
	and adults.		
Onlin	e relationships		Healthy eating
0	that people sometimes <b>behave</b>		<ul> <li>what constitutes a healthy</li> </ul>
	differently online, including by		diet (including
	pretending to be someone they are		understanding calories and
	not.		other nutritional content).
0	that the same principles apply to		<ul> <li>the principles of planning</li> </ul>
	online relationships as to		and preparing a range of
	face-to-face relationships,		healthy meals.
	including the importance of respect		<ul><li>o the characteristics of a poor</li></ul>
	for others online including when		diet and risks associated
	we are anonymous.		with unhealthy eating
0	the rules and principles for <b>keeping</b>		(including, for example,
	safe online, how to recognise risks,		obesity and tooth decay)
	harmful content and contact, and		and other behaviours (e.g.
	how to report them.		the impact of alcohol on diet
0	how to <b>critically consider</b> their		or health).
	online friendships and sources of		
	information including awareness of		
	the risks associated with people		
	they have never met.		

0 k	how information and data is		how information and data is
S	shared and used online.		shared and used online.
Being	safe	Drugs, alcohol and tobacco	safe
0 V	what sorts of <b>boundaries</b> are	<ul> <li>the facts about legal and</li> </ul>	what sorts of <b>boundaries</b> are
ā	appropriate in friendships with	illegal harmful substances	appropriate in friendships with
ŗ	peers and others (including in a	and associated risks,	peers and others (including in a
		including <b>smoking</b> , <b>vaping</b> ,	digital context).
<b>o</b> a	about the concept of <b>privacy</b> and	alcohol use and drug-taking	about the concept of <b>privacy</b> and
t	the implications of it for both		the implications of it for both
C	children and adults; including <b>that</b>		children and adults; including <b>that</b>
i	it is not always right to keep		it is not always right to keep
s	secrets if they relate to being safe.		secrets if they relate to being safe.
0 t	that each person's body belongs to		that each person's body belongs to
t	them, and the differences between		them, and the differences between
ā	appropriate and inappropriate or		appropriate and inappropriate or
ι	unsafe physical, and other,		unsafe physical, and other,
C	contact.		contact.
0 k	how to respond safely and		how to respond <b>safely and</b>
ā	appropriately to adults they may		appropriately to adults they may
$\epsilon$	encounter (in all contexts, including		encounter (in all contexts, including
C	online) whom they do not know.		online) whom they do not know.
0 <b>h</b>	how to recognise and report		how to recognise and report
f	feelings of being unsafe or feeling		feelings of being unsafe or feeling
k	bad about any adult.		bad about any adult.
0 k	how to <b>ask for advice</b> or help for		how to <b>ask for advice</b> or help for
t	themselves or others, and to keep		themselves or others, and to keep
t	trying until they are heard.		trying until they are heard.
o h	how to <b>report concerns</b> or abuse,		how to <b>report concerns</b> or abuse,
ā	and the vocabulary and confidence		and the vocabulary and confidence
r	needed to do so.		needed to do so.
0 V	where to get advice e.g. family,		where to get advice e.g. family,
S	school and/or other sources.		school and/or other sources.
		<ul> <li>Health and prevention</li> </ul>	

Г	
	o how to recognise <b>early sig</b>
	of physical illness, such as
	weight loss, or unexplained
	changes to the body.
	o about <b>safe and unsafe</b>
	exposure to the sun, and
	how to reduce the risk of
	sun damage, including skir
	cancer.
	o the importance of sufficier
	good quality sleep for goo
	health and that a lack of
	sleep can affect weight,
	mood and ability to learn.
	o about <b>dental health</b> and th
	benefits of good oral
	hygiene and dental flossing
	including regular check-up
	at the dentist.
	o about personal hygiene ar
	germs including bacteria,
	viruses, how they are sprea
	and treated, and the
	importance of handwashin
	o the facts and science relati
	to allergies, immunisation
	and vaccination.
	Basic first aid
	o how to make a clear and
	efficient call to emergency
	services if necessary.
	o concepts of basic <b>first-aid</b> ,
	for example dealing with

common injuries, including
head injuries.
Changing adolescent body
o key facts about <b>puberty and</b>
the changing adolescent
<b>body</b> , particularly from age 9
through to age 11, including
physical and emotional
changes.
o about menstrual wellbeing
including the key facts about
the <b>menstrual cycle</b> .

# APPENDIX 2: Relationships, Growing up, Health Education learning questions (taken from the wider Ealing PSHE scheme of work)

	Reception	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Termly	How can I keep	What is	How does	How do I keep	What changes	What can I	How is my body
Learning	myself safe?	personal	being safe	my body safe?	happen as I	expect during	preparing for
Question		safety?	make me feel?		grow up?	puberty?	adulthood?
Lesson 1	What is the	What is	What happens	What are	What is a		What choices are
	PANTs rule?	hygiene?	when I sleep?	allergies? How	healthy brain?		there around
		How does it		can they be	Managing		substances as I
		keep us		managed?	thoughts and		grow up?
		healthy?			feelings		Medicines,
		(Soaper Heroes)				Drugs	Smoking, Alcohol, Vaping, Drugs
Lesson 2	What is a good	How do I	How can being	How do I	What is the life	What are	What is mental
Lesson 2	or bad touch?	keep safe at	online affect	manage other	cycle? How do		illness and
	or bud todom:	home?	my health?	types of health	we change?		addiction?
			,	issues? Asthma.	on an an a		
				Diabetes, Glasses			
			<b>10</b>	and Hearing Aids			1.00
Lesson 3	How can I keep	How do I	What things do	What body	What physical		Why does the
	myself safe with	keep safe		parts belong to	changes		body change
	my friends?	outdoors?	time for?	me?	happen as we grow up?	happen in puberty?	during puberty?
Lesson 4	How can I keep	What are	How do	How do I keep	What is the	What	How does our
Lesson 4	myself safe	different	different types	my body	menstrual		body change for
	around	types of	of touch make	private?	cycle?		reproduction?
	medicines?	touch? Kind	me feel?	(PANTS)	-, -, -,		(S.E)
		and Unkind,				puberty?	,
		Safe and					
		Unsafe					
Lesson 5	How can I keep	Who keeps	What's the	FGM- What is a	FGM- What is	FGM- What is	FGM- How is
	safe on the	me safe?	difference	rite of passage?	gender		beauty portrayed
	road?		between risks,		equality?	between	around the world?
			unsafe events			religion and	
			and			culture?	
Lesson 5			emergencies?	How do different	What is gondar	M/hat hannens	How do we stay
(Alternati				cultures	equality?		healthy as we
ve to				celebrate		adolescence?	age? (Dementia)
FGM)				growing up?	Campaign	What choices	ago: (Domonia)
,				5 · 5 · F	1. 3.	do we have as	
						become young	
						adults?	

# Relationships, Growing up, Health Education learning questions (taken from the wider Ealing PSHE scheme of work)

Termly Overvi	Termly Overview- Summer 2: Relationships and Health Education						
	Reception	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Termly Learning Question	Who is important to me?	What do we have in common?	How do I recognise risk?	Who is there to help me when I think there's a risk?	What can I do about risks?	How do we respond to change, risk and harm?	How do relationships change as we grow up?
Lesson 1	What is the same and different about families?	a family?	What does my family do for me?	How can families be different?	What makes a family unique? Understanding family history, culture and values	families change?	How do we show love, care and commitment to others? Marriage and Long Term Relationships
Lesson 2	How does my family make me feel?	What is the same and different about all of us?	What is the difference between a secret and surprise?	How do we manage pressure from friends? 'doing dares'	What is the difference between a positive risk and a dangerous behaviour?	How is an online relationship different to real life?	What pressures may we face online in our relationships as we grow up?
Lesson 3	How do we keep ourselves and our families safe?	How can I treat others kindly?	How do I keep myself safe in familiar and unfamiliar places?	Who keeps me safe in different places?	What risks are there when I am in different places?	How to identify risks in different places and how do I respond?	How can I help others in an emergency?
Lesson 4	What does the word stereotype mean?	What happens if people are treated unkindly?	How do I help someone in need? (Basic First Aid)	How do I contact the emergency services?	How do I react when someone is hurt?	How can I save a life?	What will I take away from PSHE?
Lesson 5	What will I take away from PSHE?	What will I take away from PSHE?	What will I take away from PSHE?	What will I take away from PSHE?	What will I take away from PSHE?	What will I take away from PSHE?	What advice would I give to the Year 6's?

# **APPENDIX 3: Key vocabulary covered in lessons**

Below is a list of vocabulary from Relationships Education lessons. Vocabulary from each year group is carried forward to the next year group (e.g. year 3 vocabulary will be revisited in year 4).

# **Health Education- Key Words and Definitions:**

Year	Lesson Topic	Key words	Definition or Explanation
3	Body Parts	Growth Life Cycle - Babies/ infants - Toddlers	We use the phrase adolescence rather teenage years as it covers 11 to 18 rather than 13 to 19. Changes that happen during puberty start during late childhood and adolescence.
		- Children - Adolescence - Adulthood - Elderhood	Girls and boys both have nipples, as girls get older their chest will change so they are able to feed their own children if they had a baby.  Boys, men and males have a penis. This is where wee comes out of the body from.
		Body Parts - Head - Brain - Chest - Nipples - Vagina/ Vulva - Penis	Girls, women and females have a vagina. The other scientific word is vulva. Next to a girls vagina is a small hole where wee comes out of.
3	Keeping the body private	Private parts of the body - Nipples - Vagina/ - Vulva - Penis - Mouth  PANTS Rules (NSPCC website)  Trusted Adults  Body Language	NSPCC PANTS rules to keep body parts private- taught from Reception  P- Privates are Private A- Always remember your body belongs to you  N- No means no T- Talk about secrets S- Speak up  Adults at home, at school, professionals like Drs or the police who keep you safe.  Some people use their bodies to show no means no. Facial expressions and body language are important ways to communicate.  Rules we have about our personal space, what we do and don't feel comfortable with. Examples hugging, high 5s, handshakes.
		Boundaries (Boundary Song on youtube)	

Year	Lesson Topic	Key words	Definition or Explanation
4	Life Cyle	Growth Life Cycle - Babies/ infants - Toddlers - Children - Adolescence - Adulthood - Elderhood	We use the phrase adolescence rather teenage years as it covers 11 to 18 rather than 13 to 19. Changes that happen during puberty start during late childhood and adolescence.  Adolescence is the bridge between childhood and adulthood. It helps prepare for things that only happen in adulthood.  As we go through the life cycle, we are able to understand, learn and do more things. Some things we cannot learn about or do before adolescence or adulthood because we aren't ready to understand or be able to do them physically yet.
4	Physical Changes during puberty	Puberty  Hormones  Body Parts - Chest - Breasts - Areola - Pubic Hair - Penis - Testicles - Vagina/ Vulva - Ovaries - Egg - Sperm - Cervix - Egg - Fallopian Tube	Puberty is the process that happens during adolescence of changing, growing and maturing from a child to an adult. For girl's puberty may start anywhere between 8 to 11 years old and for boys around 11-12 years old.  Hormones are chemical messages that our brains make. It is the different hormones that girls and boys have that tell their body to start changing and in different ways.  New Terminology includes explaining the internal organs of females so children can understand what the menstrual cycle is.  Whilst less common, there are children who start their period during year 4 and onwards, so teaching this at this point is preparation for one change that will happen during puberty.
4	Menstrual Cyle	Menstrual Cycle Period Reproductive System Ovulation	A period is a small part of the month (usually 3-7 days) when a girl loses a small amount of blood from her vagina.  Her body doesn't need this blood and tissue so it leaves her body.  The days of the month when a girl is bleeding is part of a longer monthly cycle called the menstrual cycle.  Girls have two ovaries which is where her eggs are.  The ovaries are attached to the fallopian tubes, these carry the eggs when they are released from the ovary  When the egg is released, it is called ovulation

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		The fallopian tube is connected to the uterus. The uterus is where the blood comes from during a period.
		The blood that isn't needed in the uterus leaves the body every month from the vagina. This is a girls period.
		These are products girls can use to collect blood when it leaves the body.
		People around the world sometimes have limited education about menstruation and periods.
	Sanitary Pads	Some girls cannot access sanitary products. When this happens, it can mean they miss out on education.
	Pariod Payarty	Education and access to sanitation are Children's rights under the UN Convention on the Rights of a Child.
	Feriou Poverty	
Lesson Topic	Key Words	Definition or Explanation
Hormones	Hormones	Chemical messages that are sent to the body telling the body how to respond
	Pituitary Gland	The gland in the brain that controls hormones related to growth, sends the first signal to the reproductive organs to start producing the hormones needed for puberty.  A part of the female reproductive system which produces an egg and starts releasing the two female hormones related to puberty, progesterone and oestrogen
	Ovaries	A part of the male reproductive system which begins producing sperm cells during puberty. Also releases the male hormones related to puberty, testosterone.
	Testicles	Mood Swings are caused by changing levels of hormones in the body. They can create increased sensitivity, confusion, tearfulness, aggression, anxiety, lower self esteem
	Emotional Changes	In preparation for adulthood, adolescence may want more privacy, independence and be more interested in friendship and peer relationships
	Social Changes	Ways that we can boost our mood by spending time with people we love, spending time in nature, exercise, eating well, self-care.
		The prefrontal cortex, the front part of the brain responsible for complex problem solving and rational thought does not finish developing until 25.
	Happy Hormones - Dopamine	The part of the brain very active in adolescence is the limbic system which is in charge of emotions.
		Period Poverty  Lesson Topic Key Words  Hormones Hormones  Pituitary Gland  Ovaries  Testicles  Emotional Changes  Social Changes  Happy Hormones

Year	Lesson Topic	- Oxytocin - Serotonin - Endorphins  Brain Development  Key words	Definitions and Explanations
6	Physical changes in puberty	Body parts Male reproductive system - Urethra - Penis - Testicles - Sperm - Semen - Scrotum - Erection - Wet Dream	The urethra is the tube in the centre of the penis that urine and sperm travel through to leave the body.  Testicles produce sperm. The skin around the testicles is called the scrotum.  Sperm cells are produced in the testicles, they travel in a liquid called semen.  An erection is when blood flows to the penis making it appear fuller and harder  A wet dream happens at night and is when sperm and semen leave the penis while a boy is asleep. It is not urine.
		Female reproductive system  - Vagina  - Vulva  - Urethra  - Labia Majora  - Labia Minora  - Cervix  - Uterus  - Tampon	The vulva is what can be seen from the outside of the body. The labia majora and labia minora are the protective skin around the opening on the vagina.  The urethra is above the vaginal opening and where urine comes from.  The cervix is at the top of the vagina, internally it stops things getting to far into the body ie. tampons  If a woman was pregnant, the baby would grow in her uterus. When she is pregnant, it is referred to as a womb  Tampons are introduced as an alternative to sanitary pads, they are not recommended until 13 years of age but are introduced as an option
	Page dusting	- Life out le	
6	Reproduction (Sex Education Lesson*)	Lifecycle  Reproduction	In order for the lifecycle to continue, there needs to be reproduction.  Reproduction is the process of new life being created. Reproductive happens when the male and female reproductive cells come together, and new life is formed.

	Fertilisation is the process of an egg and sperm cell meeting and joining together to make a new cell
Fertilisation	If the egg and sperm successfully join together and a new life begins then this is called conception
Conception	Exact language used:
Process of Reproduction- inc. sexual intercourse	<ul> <li>A man produces sperm in his testicles.</li> <li>Once a month, the woman's body releases an egg.</li> <li>In order for the sperm to meet the egg a man and woman will have sexual intercourse.</li> <li>During sexual intercourse, the sperm will enter a woman's body via her vagina.</li> <li>This sperm then travels through the vagina and the uterus and towards the fallopian tube.</li> <li>In the fallopian tube, the sperm may meet with the egg. The sperm and egg become one. This is called fertilisation.</li> <li>The fertilised egg will then travel to the uterus.</li> <li>If the egg is fertilised, it attaches the blood lining in the uterus.</li> <li>The lining of the uterus builds up with a bloody lining to protect the fertilised egg.</li> <li>Remember is the egg was not fertilised, the woman does not need this egg or the bloody lining and her body removes this and it comes out as her period.</li> <li>The fertilised cells formed by a sperm and egg cell meeting</li> <li>The initial growth of cells into human life</li> <li>A baby developing in the womb</li> <li>The sac in which the foetus grows in, it is filled with liquid</li> <li>The placenta is the organ a woman body creates to feed the foetus while in the womb, it passes nutrients from the woman's body through the placenta to the baby</li> </ul>
Zygote	
Embryo	
Foetus	

	Amniotic Sac/ Fluid  Umbilical cord/ placenta		
This lesson is the only lesson that parents can withdraw from as it includes a reference to sexual intercourse. As seen above, this is			
necessary to explain how the sperm and egg cell meet as part of the scientific process of reproduction.			

#### **APPENDIX 4: Letters for PARENTS**

Sample letter 1- to be sent out for Summer term lessons

RE: Relationships and Health Education (RHE) Lessons

Dear Parent/Carer,

As part of our school's **Personal, Social, Health and Economic (PSHE**) Education programme, and in line with London Borough of Ealing's recommended scheme of work for PSHE Education, children from Reception to Year 6 will take part in **Relationships and Health Education lessons** in the Summer term. These lessons were formally known as Relationships and Growing Up (RGU) but have been renamed in line with Ealing's updated Scheme of Work, which has been in place since Autumn 2024. The lessons have been carefully planned to be relevant and appropriate to each year group. For these lessons, we will be using the **updated resources and lesson content provided by Ealing**.

Nowadays, there is a vast amount of information about relationships on the internet, on TV, in magazines, to which children and young people are exposed. If children are provided with timely and age-appropriate information about their bodies and relationships, they can make their transition into adolescence and adulthood with the confidence and knowledge to understand what is happening to them. They will also have the best chances of growing into confident and healthy adults able to make positive choices.

As you may be aware, Relationships Education became statutory in all primary schools from September 2020. Here at Woodlands Academy, we firmly believe in a holistic approach to all aspects of education, including Relationships Education. Given the updated scheme of work, we are currently updating our policy, which will go to Governors after the holidays. If you would like to see a **draft copy of our Relationships and Health Education (RHE) policy**, it can be found here.

Within these lessons, we will discuss NSPCC PANTS initiative with all pupils and will also be teaching Key Stage Two pupils 'My Body, My Rules' including FGM lessons (Year 3-6). If you would like to look at the lessons, give feedback about the policy or if you have any questions, we will be holding a parent drop-in session on Wednesday 23rd April at 3:20- 3:50 in school.

Please fill in the google form if you would like to attend the workshop. If you are unable to attend the session but would like to see the lesson content, this can be indicated on the Google form and printed copies of lesson resources can be shared.

If you have any questions, please contact us.

Thank you for your continued support,

Yours sincerely,

Ms Moxom

Assistant Headteacher/DSL/PSHE and Wellbeing Lead