



Policy Directive and Guidelines

SEX AND RELATIONSHIP EDUCATION

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Document Status

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Summary of Changes¹ from Previous Versions

Version no/Date	Change	Comment	Section/ Page
V2.0 25/08/2020	Annual review	- Updates made to dates. - Responsible officer for the policy changed to Head of Inclusion and Services for Children & Schools (originally for Lifelong Learning Manager). - Title changed to Sex and Relationship Education (originally Sexual). - Links to the PSHE Association added. - Wording updated from section 3.0 to 3.6 with added detail on Key stage 5. - A child can opt into SRE if a parent has withdrawn them after the age of 15. - Safeguarding section added.	General Pg 1 General Pg 6 Section 3.0 – 3.6 Section 5.0 Section 6.0
V2.0 25/08/2020	Introduction updated to include changes to the abortion law.	Wording now includes that reforms are being drafted for States approval.	Page 5
V2.0 25/08/2020	Wording changed in section 11 to note that the Under 21 Contraception Programme is no longer a pilot scheme.	Updated to remove pilot scheme wording.	Page 13
	<i>Table started August 2020</i>		

¹ Material changes only. Minor changes (such as to punctuation, grammar, etc.) will not be listed

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1.0 Introduction

1.1 Policy Statement

The Committee for Education, Sport & Culture developed its policy on Sex and Relationship Education (SRE) in response to the Conception, Unplanned Pregnancy and Abortion debate in 1997 which legalised abortion before 12 weeks, and in support of the States' Sexual Health Strategy. Following the States approval in June 2020 to amend the Abortion (Guernsey) Law 1997, abortions will be legalised up to 24 weeks and no limits will apply in case of significant foetal abnormalities. The changes also decriminalise terminating a pregnancy outside of a medical setting. The reforms are currently being drafted into law and will return to the States for final approval.

This policy defines SRE and describes how the content and organisation of SRE, taught outside science, in the Bailiwick Curriculum will be managed.

All young people within the Bailiwick's State Education system, including those in special schools, will receive a well-developed programme of Sex and Relationship Education, with the support of SHARE's qualified health professionals, to provide them with the necessary skills, attitudes and knowledge to make healthy, safe and informed decisions about their relationships, sexual behaviour and health. The same SRE programme is also offered to all Grant-Aided Colleges.

1.2 Policy Objectives

- To define SRE
- To outline what to teach and when, ensuring continuity between key stages
- To define what aspects of SRE are compulsory
- To define parent/carers' right to withdraw a young person from a SRE programme
- To establish the role of school Personal Social, Health, Citizenship and Education (PSHCE) Co-ordinators in SRE
- To establish the role of the Sexual Health and Relationship Education Service (SHARE)
- To establish the role of the PSHCE Advisor in SRE
- To establish the role of the school nurses and one to one services in education settings
- To define boundaries of confidentiality and best practice when working with under age young people
- To establish the process to monitor, evaluate and review a relevant sexual health and relationship education programme
- To provide SRE policy support for all Bailiwick schools including instruction on publication
- To provide guidance on managing SRE questions and complaints

1.3 Policy Application

This policy impacts all phases in all Bailiwick teaching establishments to varying degrees. Throughout this policy directive, 'Headteacher' refers to Heads of Service, Secondary School Principals and the College of Further Education Principal, and 'school' refers to any education establishment.

The application of this policy is delegated to officers within Education Inclusion Services specifically under the Sexual Health and Relationship Educators (SHARE) team.

1.4 Accountabilities

Headteachers have a duty to ensure that SRE teaching complies with this policy and is accessible to all children and young people, regardless of their sexual orientation or gender identity. Inclusive SRE will foster good relations between learners, tackle all types of prejudice – including homophobia, biphobia and transphobia – and promote understanding and respect.

Headteachers must ensure the services available from the school nurses are identified in their prospectus/on their website.

The Head of Inclusion and Services for Children & Schools is accountable for this policy and its review by SHARE.

1.5 Responsibilities

In school the PSHCE co-ordinator is responsible for ensuring delivery of SRE within the PSHCE curriculum in compliance with this policy and additionally for ensuring that relevant and current information on SRE is published in the school's prospectus / on the website. The school prospectus must provide links to this policy and clearly explain the rights of parents/carers and the learners with regards to SRE in schools. The PSHCE co-ordinators in schools are also responsible for managing complaints.

The States' Education PSHCE Advisor is responsible to the Head of Inclusion and Services for Children & Schools for the quality assurance of PSHCE lessons delivered by Support Agencies.

SHARE staff are responsible for delivering and providing age and stage appropriate, engaging and current SRE material and the timely review of this policy.

1.6 Associated Documents

[Bailiwick of Guernsey Curriculum](#)

[Comments, Compliments and Complaints](#)

[Drug, Alcohol and Tobacco Education Policy](#)

[Pregnancy and School Age Parents](#)

[External Providers and Support Agencies Policy](#)

[SHARE website on gov.gg](#)

[Safeguarding and Child Protection Policy](#)

2.0 The Definition of SRE

SRE is learning about the emotional, social and physical aspects of growing up, relationships, sex, human sexuality and sexual health. It is an integral element of a developmental personal, social, health and citizenship education programme (PSHCE). Learning in SRE should be linked to the curriculum in relevant subjects.

The aim of SRE is to equip children and young people with the information, skills and values to have safe, fulfilling and enjoyable relationships and to take responsibility for their sexual health and well-being; to raise self-esteem and promote responsibility for their actions.

Good quality SRE promotes the core values of respect, equality love and care. It also provides the opportunity for children and young people to reflect on their own attitudes, values and beliefs and those of their peers and others.

3.0 SRE Curriculum

Every school must offer a curriculum which is both balanced and broad, and that:

- Promotes the spiritual, moral, cultural, mental and physical development of learners at the school and of society
- Prepares learners at the school for the opportunities, responsibilities and experiences of later life

Schools across the Bailiwick use the programme of study for PSHE from the PSHE Association as the basis for their SRE curriculum. Full details for key stages 1- 5 can be found [here](#). A summary of learning by key stage is set out below;

3.1 Foundation Stage (Reception) pupils learn to;

- Develop positive relationships with adults and children
- Manage their own basic hygiene and personal needs
- Talk about similarities, differences and changes
- Talk about how they and others show feelings
- Say when they do or don't need help

3.2 Key Stage 1 pupils learn;

- Simple hygiene routines that can stop germs from spreading
- To recognise and name different feelings
- That there are different types of families
- The process of growing and changing from young to old
- To name the main parts of the body, including external genitalia
- To recognise that some things are private; that parts of their body covered by underwear are private
- To understand the importance of not keeping adults' secrets (only happy surprises)
- To identify who to talk to if they feel unsafe or worried

3.3 Key Stage 2 pupils learn;

- The wider importance of personal hygiene and how to maintain it
- A varied vocabulary to use when talking about feelings; about how to express feelings in different ways
- To recognise and respect that there are different types of family structure and that families of all types can give family members love, security and stability
- That for some people gender identity does not correspond with their biological sex
- That people may be attracted to someone of the same sex or different sex to them
- About privacy and personal boundaries; what is appropriate in friendships and wider relationships
- About seeking and giving consent in different situations
- To identify the external genitalia and internal reproductive organs in males and females and how the process of puberty relates to human reproduction
- About the physical and emotional changes that happen during puberty
- About how babies are conceived and born
- How to ask for advice or help for themselves or others

3.4 Key Stage 3 students learn;

- The importance of taking increased responsibility for their own physical health
- Strategies to manage the physical and mental changes that are part of growing up
- About the purpose, importance and different forms of contraception
- That certain infections can be spread through sexual activity and that barrier contraceptives offer some protection against certain STIs
- The consequences of unintended pregnancy and the options available
- Indicators of positive, healthy relationships
- The nature and importance of stable, long-term relationships for family life and bringing up children
- The difference between biological sex, gender identity and sexual orientation
- That everyone has the choice to delay sex, or enjoy intimacy without sex
- That consent is given freely and that being pressurised, manipulated or coerced is not giving consent

- About keeping safe in sexual relationships and where to access help and advice

3.5 Key Stage 4 students learn;

- The characteristics of strong, positive relationships
- About the diversity in romantic and sexual attraction and developing sexuality
- To understand the potential impact of the portrayal of sex in pornography and other media
- About the concept of consent in maturing relationships
- To recognise the impact of drugs and alcohol on choices and sexual behaviour
- How to choose and access appropriate contraception (including emergency contraception)
- The importance of parenting skills and qualities for family life
- How to take increased personal responsibility for maintaining and monitoring health including cancer prevention, screening and self-examination
- How to access information, support, help and advice

3.6 Key Stage 5 students learn;

- To develop a nuanced understanding of how to select appropriate contraception in different contexts and relationships
- How to reduce the risk of contracting or passing on a STI
- How to take responsibility for their sexual health and know where, and how, to access local and national advice, diagnosis and treatment
- To understand the moral and legal responsibilities that someone seeking consent has and the importance of respecting people's right to give, not give and withdraw their consent
- To understand the implications of unintended pregnancy and young parenthood
- How to access information, support, help and advice

4.0 Compulsory Aspects of SRE

- Young people should have a basic understanding of 'how a baby is conceived and born' before they leave primary school
- All young people, including those who develop earlier than average, need to know about puberty before they experience the onset of physical changes
- The sex education contained in the Science Curriculum (Key stages 4) for public examinations is compulsory and may include human reproduction, HIV and AIDS and other sexually transmitted infections subject to the examining board syllabus

5.0 Learners' Access to SRE

The Education Office expects all young people in the Bailiwick to access the SRE curriculum delivered in a manner appropriate to their educational setting. Parents/carers have the right to withdraw their child from sex education (other than the sex education which is part of the science curriculum). This request must be in writing to the Headteacher. Withdrawing children from SRE is not common practice and parents/carers should first have the opportunity to discuss any concerns with the school's Headteacher, PSHCE co-ordinator, class teacher or SHARE. However, a child whose parent/carer has previously withdrawn them from sex education will also have a right to opt into sex education from their 15th birthday (specifically three academic terms before they turn 16). The school will then make arrangements for this to happen in one of the three terms before the child turns 16 - the legal age of sexual consent.

Sex and relationships topics can arise incidentally in other subjects and it is important that parents/carers are aware that it is not possible to withdraw learners from these relatively limited and often unplanned discussions.

6.0 Safeguarding

Effective SRE, which brings an understanding of what is and what is not appropriate in a relationship, can lead to a disclosure of a child protection issue. It is essential that all Support Agencies and teachers delivering sex and relationship education are aware of any potential issues and know how to deal with any concerns that do arise. Teaching staff should speak to the nominated child protection lead or subject lead ahead of the lessons, and in the case of a disclosure from a student, and schools should ensure that all staff are aware of their safeguarding policies and procedures.

7.0 SRE and the role of PSHCE Co-ordinators

PSHCE co-ordinators in schools are responsible for ensuring the SRE programme of study is delivered and meets the needs of their learners, generally through discreet, timetabled PSHCE lessons. Although SRE is best delivered in PSHCE lessons, there may be instances when the timetable is collapsed.

It is important that the PSHCE co-ordinator in school ensures that the nature and content of programmes of study are differentiated sensitively according to the developmental stage of the learners, having regard to their age, ability, gender, gender identity, whether they are pregnant, their cultural background, race, religion or sexual orientation. All learners must be protected from teaching and materials which are inappropriate.

The SRE curriculum is delivered in the main by SHARE as well as by schools' own teaching staff through the PSHCE curriculum. The PSHCE co-ordinator must ensure those teachers and all those contributing to SRE, work within the school's agreed values framework and are aware of their responsibility to ensure the safety and welfare of learners. If a question from a learner is too difficult, explicit or inappropriate the teacher should attend to it later on an individual basis and may need to consult with the PSHCE co-ordinator and/or SHARE. Teachers must inform SHARE of any relevant issues in the class prior to the lesson.

Best practice dictates that any guest speakers or presentations will be preceded by introductory learning in PSHCE lessons and followed with additional learning time to embed knowledge and understanding. SHARE has resources to support this. Additionally, good quality SRE requires sufficient time for planning, delivery and evaluation which the PSHCE co-ordinator needs to accommodate.

The PSHCE co-ordinator should ensure that:

- SRE learning outcomes have been set for each year group in the school
- Adequate time has been allocated specifically for SRE
- Teaching objectives balance knowledge and understanding, exploring values and attitudes and developing skills
- There is balance between content on healthy relationships and the biology of sex
- Links are made with other subjects so that learning is rich and relevant
- Where possible the SRE programme is enriched with extra-curricular activities
- Learner attendance in SRE lessons is recorded
- SRE teaching and learning is evaluated by assessment and reflection in accordance with the school's assessment, recording and reporting policy and guidance from the PSHE Association (Primary guidance can be found [here](#) and Secondary guidance [here](#)).
- Assessment and reflection findings inform the school's PSHCE planning
- Appropriate partners are informed of evaluation to inform their work

8.0 The Role of SHARE in Sex and Relationship Education

[SHARE](#) is a service funded by Education and is responsible for developing and maintaining the Committee for Education, Sport & Culture's policy on sex and relationship education. Staffed by 2 part time qualified health professionals and a part time office manager, SHARE manages and reviews the SRE curriculum and delivers its core lessons at Key Stages 2, 3 and 4 to each year group twice a year. Additionally SHARE practitioners can support delivery at Foundation stage, Key Stage 1 and Key Stage 5 and are a resource for all teaching professionals in managing SRE in schools but especially PSHCE co-ordinators. They also maintain considerable resources to assist PSHCE co-ordinators in developing

robust programmes in their schools. These resources include but are not limited to the SHARE service level agreement; session plans; leaflets for parents/carers; and sample letters from schools to parents/carers about planned lessons.

SHARE also offer mini workshops to parents/carers to provide information on their SRE programme and the opportunity for parents/carers to ask questions.

Teaching professionals involved in the delivery of SRE should be given appropriate training and support, which is available from SHARE. It will ensure:

- There is flexibility to respond to the changing needs of learners, for example new topics identified through learner consultation
- The curriculum includes opportunities for learners to explore SRE topics with parents/carers at home
- Schools communicate to ensure curriculum progressions upon transition from primary to secondary phases
- The biological aspects of sex education are adequately covered in science

SHARE can be reached by email share@gov.gg on 01481 227707

SHARE has established protocols to monitor and evaluate the SRE curriculum and its delivery which is also quality assured by the PSHCE Advisor. Additionally it requires the PSHCE co-ordinators in schools to provide their evaluation in support of SRE policy reviews.

9.0 The Role of the PSHCE Advisor in SRE

The Education Inclusion PSHCE Advisor supports SHARE in the review of the SRE policy and its lessons, and is responsible for the quality assurance of SRE lessons delivered by SHARE practitioners and those delivered by other agencies.

10.0 The Role of School Nurses in SRE

With a [Patient Group Direction](#) in place, School Nurses can provide confidential health services in education settings. In a one to one consultation this can include the assessment for and provision of emergency hormonal contraception and advice on sexual health to school-age learners. They may provide condoms, pregnancy testing, chlamydia screening, and appropriate follow-up and referral to other health professionals in accordance with States' Education Pregnancy and School-Age Parents Policy. A school nurse will not provide regular contraception and will refer a young person in regular sexual activity to the appropriate health professional.

A parent's/carer's choice to withdraw a child from SRE does not affect the child's right to use confidential health services provided at the school or elsewhere.

A School Nurse has discretion to give contraceptive advice or treatment to a person under 16 years of age without the knowledge or consent of the young person's parent or guardian provided that, in the opinion of the School Nurse, the young person is capable of understanding the nature and possible consequences of any treatment or procedures. The School Nurse will assess competence on a case-by-case basis and should work within the [Fraser Guidelines](#) and with reference as required to the [Bailiwick's Child Protection Guidelines](#)

Additionally school nurses support SRE by:

- Introducing themselves in person to all children and young people, for example by visiting a year group assembly tutor group or SRE lesson
- Supporting teachers with suitable vocabulary and resources
- Helping primary schools with individual children who are early developers and associated issues
- Liaising with SHARE on appropriate lesson content to include current trends and new norms
- Informing PSHCE and SRE curriculum planning by feeding back (anonymously) as appropriate the common questions and concerns raised by learners' during one-to-one sessions with the School Nurse

11.0 The Role of Teachers in referring Young People to the School Nurse

The relationship with a medical professional is different to the relationship with a teacher. The young person is told that the consultation is confidential unless there is a safeguarding issue.

If a teacher refers a child or young person to the school nurse, as long as the school has authorised the principle of the service provision and published this to parents/carers, the school nurse will complete a full assessment. School nurses are obligated to discuss the value of parental/carer support and adopt the Fraser Guidelines in their assessment of the young person. If however, following counselling, the young person does not want to involve their parent/carer, the school nurse will respect their confidentiality.

The teacher's accountability for the young person ceases once the nursing professional operating under medical privilege has taken responsibility for the young person. The teacher will respect the professional assessment made by the school nurse and will maintain the confidentiality requested by the young person.

12.0 Under 21 Contraception Programme

Since December 2017, GPs and clinics have been able to provide free contraceptives to women under the age of 21. The service is available to women in Guernsey and Alderney and provides a range of contraceptive options in GP practices and dedicated sexual health centres. The service includes long acting reversible contraceptive options (such as implants), as well as oral contraceptive options and injections. Consultations, along with the drugs or devices, are provided free of charge at the point of access. Young women under the age of 21 years are able to access free contraceptive provision through their GP (in Guernsey and Alderney), Choices, or the Orchard Centre. Since this initiative has been in place unintended pregnancy rates have reduced.

13.0 Confidentiality and Best Practice

Learners might expect confidentiality as part of any ground rules in SRE, proposing that what is said in class or directly to a teacher or external SRE facilitator should remain private. This is not always possible. Therefore, learners should be encouraged to understand personal boundaries, what information is private and how to protect their own and others' privacy. A practitioner must follow the child protection procedures of the establishment in which they are working at all times.

14.0 SRE Policies in Educational Settings

Parents/carers have a right to be informed about this SRE policy. Parents/carers should also be aware that schools are required to provide a broad and balanced curriculum. Schools should therefore identify SRE within their prospectus providing a hyperlink to the policy and highlighting relevant matters for parents/carers.

15.0 The Review of SRE Curriculum

SHARE is responsible for the review of the SRE Policy which informs the PSHCE curriculum. Together with analysing how other jurisdictions manage SRE and working with professional bodies such as the Royal College of Nursing, the Sex Education Forum, QCA, OfSTED and the PSHE Association. The results from the local Young People's Survey will also be considered. SHARE will also consult with its service users, the PSHCE Advisor, PSHCE co-ordinators in schools and parents/carers.

16.0 Complaint Management

Complaints are generally best managed within the school setting as the PSHCE co-ordinator should be well placed to investigate a complaint and respond quickly, working with outside agencies and colleagues in school as required. Matters relating to the curriculum itself

should be referred to SHARE in the first instance. Any serious complaint should be escalated quickly in either situation. The Comments, Compliments and Complaints Policy found [here](#) provides details on making a complaint.