

## Health Education Policy

### Rationale

Health Education allows pupils the opportunity to develop personal skills, values and self knowledge necessary to exercise their rightful role as members of the community and become valued individuals with personal dignity. This is a common aim shared with P.S.H.E. For many pupils with learning difficulties, the acquisition of social skills is delayed, as pupils have often had limited access to their peer group or appropriate situations in which to rehearse them. The pupil may have low self esteem or poor self image because they perceive themselves as being different or as having failed in many situations. It is through this area of learning that the pupil will have opportunities to acquire the necessary knowledge, skills and understanding to be able to exert influence over their environment and actively enhance quality of life.

The following themes underpin the Health Education Curriculum at Medina House.

- building confidence and self esteem,
- valuing pupils' experience and views,
- using their existing strengths,
- encouraging autonomy.

Strategies employed include;

- Skills development - to achieve rewarding relationships our pupils need to develop communication, social interaction and some basic self help skills.
- Decision making - Developing any level of independence depends on our pupils being able to make choices.
- Starting early – Health education should form part of the foundation that is developed during the early years.
- Active learning – Health education is concerned with the giving and understanding of information and enabling pupils to explore their own feelings, attitudes and beliefs.

### Aims

1. To provide pupils with self-esteem, knowledge, understanding and skills to enhance their quality of life.
2. To promote pupils' personal development to enable our children to maximise their potential.
3. To encourage our pupils to be aware of, and responsible for, their own health.
4. To promote a stimulating, safe and enriching school environment.
5. To help develop positive attitudes and values.

### Guidelines

Health Education is included (as part of P.S.H.E.) within the topic cycles in continuous and blocked units of work. P-Levels will be used to baseline and provide on-going assessment. Targets and experiences/activities can be planned in relation to these findings.

When teaching personal development, such as puberty and sexuality, we will need to be sensitive with regard to a pupils' rate of development. Sex Education is a blocked unit and is presented according to need in the older year groups. The individual students are assessed and activities are presented according to suitability. See separate policy for Sex Education.

Pupils' individual needs must remain paramount in our consideration alongside the shared needs of any class or group. Individual counselling will be a feature of our work.

Developing parental understanding and support for the school's work is essential to ensure consistency between home and school on specific health skills.

The following nine components will be included in our Health Education Curriculum Framework.

All medicines are drugs, not all drugs are medicine – substance use and misuse.

Sex education – see policy and programmed activities

Family life education – belonging and contributing to different contexts – P.S.H.E. curriculum

Safety – Stranger danger, safety in the home, safety in the environment

Health related exercise – supported by the P.E. and P.S.H.E. curriculum

Food and nutrition – see separate policy

Environmental aspects of health education – See separate policy for examples of focus areas.

Psychological aspects of health education – circle time, Getting Along Groups, Records of Achievement, emotional literacy etc.

Personal hygiene – self help via the P.S.H.E. curriculum

### **Arrangements for Monitoring**

The PHSE and Citizenship curricula are a shared responsibility, all staff involved in the planning and delivery of these areas of learning will use the appropriate B'Squared materials for baselining, on going assessment and agreeing benchmarks with the Head Teacher. Teachers with responsibility for the coordination of PHSE and Citizenship along with the School Nurse and the Head Teacher will ensure that standards of achievements, learning experiences and the quality teaching Health Education throughout the school are appropriate and of a high standard

This will be achieved through monitoring, reviewing and evaluating schemes and work and lesson planning, sampling pupils' portfolios of work, visiting classes during discrete and continuous lessons and gaining feedback from pupils, parents and inspection reports.

The co-ordinators are also responsible for ensuring there are a range of essential, appropriate resources, both human and material, to support all staff involved in delivering Health Education. These resources include topic files, artefacts, videos, audio tapes, schemes of work and books both factual and fictitious.

Health Education will be included in the Special Focus subject schedule when all staff, pupils, parents and governors will have the opportunity to engage in activities and tasks which will audit, improve and celebrate specific areas of learning.

**Assessment, Recording and Reporting:**

Health Education will be assessed according to our school policy statement on Assessment, Recording and Reporting and using P-Levels for P.S.H.E. and Citizenship. Evidence will be collected through children's own drawings, writings, symbols, verbal and non-verbal responses, art work, drama, music, photographic evidence and DVD where applicable.