

Cambridgeshire Primary Personal Development Programme Healthy & Safer Lifestyles RS1 Relationships and Sex Education

KS1 • Years 1/2

Unit Context



In September 2020, the DfE introduced statutory requirements for Relationships Education and Health Education which are to be covered by the end of Primary School.

This unit contains teaching which directly addresses the requirements for:

Relationships Education:

Being Safe (BS)

how to report concerns or abuse, and the

vocabulary and confidence needed to do so.

Teaching on this requirement is also found in Personal Safety PS1/2.

This unit contains teaching which directly addresses the requirements for:

Health Education:

Health and Prevention (HP)

 about personal hygiene and germs including bacteria, viruses, how they are spread and the importance of handwashing.

RSE is lifelong learning about ourselves. It includes learning about emotions, self-esteem, relationships, rights and responsibilities, sexual behaviour, sexuality and sexual health. It takes place at home, at school and other places in the community. RSE is an entitlement for all children. Difference and diversity must be taken into account when delivering RSE, and teachers must carefully consider learning needs, family circumstances, race, culture, religion, gender and sexuality to ensure that the RSE they offer is inclusive of all.

RSE is most effective when provided in a wider context of social and emotional development. In school, successful RSE is firmly rooted in a broad PSHE Curriculum. RSE must enable children to gain information, develop and transfer skills and explore attitudes and values, in order to make informed choices.

In order to ensure that RSE is delivered in a supportive and positive environment, schools should take great care to develop and review their

Relationships Education policy involving the views of children, staff, parents and governors. Before teaching any unit of RSE, teachers should check they are familiar with the school's Relationships Education policy. There are also links with the policies regarding Safeguarding, Inclusion, Behaviour Management and Anti-bullying.

While there are obvious links with the National Curriculum for Science, RSE is embedded within the PSHE framework, reflecting the importance of the personal and social aspects of this area of learning. This unit of work is supported and complemented by the Unit of Work RS2 which focuses on the human lifecycle and changing responsibilities. The content of this unit is wholly consistent with the DfE Relationships Education, RSE and Health Education Statutory Guidance.

Further support can be found in the RSE Toolkit.

Unit Description

In this unit children will develop familiarity with the names of the main external parts of the body and become more confident in describing them. They will consider the amazing nature of their bodies, with a view to developing respect for their bodies and develop an understanding of how important it is to look after their body. Children will also consider simple hygiene practices and their levels of responsibility for these. The main themes of this unit are 'body knowledge', 'body functions', 'body awareness/image', 'personal hygiene' and 'prevention of illness and disease'.

Notes for Staff

This Units of Work is aimed at children in Year 1 or Year 2. It might be delivered on its own, or alongside Unit RS2, which is designed for the same year groups. The themes in this unit are extended in Unit RS3.

Teachers should also carefully consider how best to structure the delivery of the unit. Best practice would be for all the content to be delivered to all children, whatever their gender identity or biological sex. (Cont over)

Learning Expectations

At the end of this unit most pupils will:

- be able to recognise names for the main external parts of the body
- be able to name the sexual parts with growing confidence using colloquial and usually scientific words with trusted adults
- be able to describe what their bodies can do and understand how amazing their body is
- show some understanding that their body belongs to them
- be able to describe some basic personal hygiene routines and understand how these can prevent the spread of disease.

Some pupils will not have made so much progress and will:

- show a limited knowledge of external body parts and be uncertain about naming sexual parts
- show a limited understanding of what their bodies can do and will need prompting to describe familiar actions
- need support in understanding their responsibility for their body's actions
- be able to answer simple questions about basic hygiene routines.

Some pupils will have progressed further and will:

- have a secure understanding of the main external body parts
- be able to name sexual parts and will often use the scientific names confidently with trusted adults
- be able to describe their body's capabilities and will understand about the different capabilities of others
- have a secure understanding of their own responsibility for their physical actions and will be starting to understand that their body belongs to them and therefore they have rights over their body
- have a clear idea of private body parts and want more privacy now they are older
- be able to describe the personal hygiene routines they carry out and some that are less familiar
- be able to describe some common illnesses and how the spread of these can be prevented.

Children need to be able to talk confidently and appropriately about their own bodies and those of their peers. There may also be some children whose famlies are uncomfortable with them discussing body parts in mixed company (See 5B RSE-Understanding Perspectives) and special provision may be made for them. Ensure that your decisions about single/mixed sex groupings reflect the content of your published Relationships Education Policy. You should ensure that trans children feel equally included in this unit, alongside their cis peers. (For an explanation of the terminology see www.youtube.com/watch?v=mtYuUL3OdUY)

In the past many teachers have relied on the use of video-based resources to support their teaching of RSE. In our units we suggest an approach which focuses on the needs of the pupils first and then uses the Learning Objectives to determine content. The days of 'one size fits all' video resources are now past. However, various video clips and online links are referenced in the unit and are used both to introduce and consolidate various teaching points. Teachers should ensure that they watch all clips before sharing them with the class and take precautions to avoid inappropriate pop ups/comments when using facilities like YouTube. (To avoid pop ups and comments, view the YouTube link through viewpure.com or safeshare.tv, or insert the YouTube video into another presentation tool e.g. Powerpoint) If you already have video resources which are accessible for your children and which deliver on your Learning Objectives, there is no reason to stop using them, as long as they meet the criteria for use of resources in your Relationships Education Policy.

High quality RSE has been referenced by a variety of organisations (NSPCC, Barnados, Women and Equalities Committee) as supporting children to recognise abusive relationships and speak up if they are being abused. The ability to use scientific vocabulary confidently to talk about sexual body parts with trusted adults is a protective factor. Throughout the RSE Units of Work, and mirrored in the Personal Safety Units of Work, teachers are provided with multiple ways to increase understanding and confidence when using scientific vocabulary to describe sexual body parts. Teachers who would like to explore this concept further and build their own confidence in discussing the benefits of using scientific vocabulary should refer to 6B Use of Appropriate Vocabulary in Primary RSE.

The Health Related Behaviour Survey (see Sources of Information and Support below) includes questions about how and from whom children access information about body changes. This survey reflects the views of Y5 and Y6 children, but the information may be used to guide provision for younger children.

Activities for Recording Assessment

In the statutory requirements the DfE state that "Schools should have the same high expectations of the quality of pupils' work in these subjects as for other curriculum areas. A strong curriculum will build on the knowledge pupils have previously acquired, including in other subjects, with regular feedback provided on pupil progress.... Teaching should be assessed and assessments used to identify where pupils need extra support or intervention." The self-assessment materials provided for this unit (see Assessment) are an effective way of pupils assessing their own confidence in a range of skills both at the beginning of the unit of work and at the end, thus demonstrating progress. You may also wish to use the unit assessments which enable you to assess individual children against the learning expectations for this unit.

'A' at the end of an activity indicates an opportunity for recording assessment. This may be formative assessment or to gauge learning following teaching activities.

Activity 1.2: Use this labelling activity to assess whether the children can recognise external parts of the body and whether they have learned the scientific vocabulary for sexual parts. They may use the colloquial terms or none at all. You may also choose to assess whether the children will use the terms when speaking, especially for those who find writing difficult.

Activity 2.1 and 2.2: Use either of these written activities to assess children's understanding of their own body's capabilities.

Out of School Learning

Working in partnership with parents/carers in RSE is essential if the children are to fully benefit from the teaching in school. The DfE Guidance requires schools to communicate about their curriculum content in Relationships Education and Health Education. Schools must also communicate parents' right to ask their child be excused from non-statutory 'Sex Education' (learning about human conception and birth). None of the learning in this unit falls within that definition and therefore families have no right to withdraw from any elements of it. All the learning is statutory, either as part of Relationships Education or Health Education, or as part of the National Curriculum for Science.

As part of the RSE Toolkit there are several supportive documents which schools can use to communicate and engage positively with families. Of particular relevance are 8A Leaflet for Primary School Families and 8B Primary Sample Letters. You will also find resources 5B Understanding

Perspectives and 8L Leading Discussions supportive in your work with parents who are concerned about RSE.

The school should plan to use the leaflets or hold meetings to give parents/ carers opportunities to become informed about the content of RSE, so that they can prepare themselves to discuss bodies and relationships with their children. Your senior leaders or PSHE leader should support you with this. Your school might choose to circulate a leaflet to families which supports them with these conversations, or publicise websites which enable parents/ carers to prepare themselves for conversations about puberty and sexual intercourse in due course e.g. https://www.fpa.org.uk/advice-parents-and-carers/how-start-talking-about-it, www.bigtalkeducation.co.uk/parents/how-to-talk-about-sex/ and www.nspcc.org.uk/keeping-children-safe/sexual-behaviour-children//

Ask families to focus on asking their children to perform key personal hygiene tasks during the unit and encourage their children to carry these out independently. Use Activity 7.1 to feed back to parents/carers about children's key areas of learning.

Sensitive Issues



Sensitive issues to be aware of are marked in the notes column with this symbol.

The whole area of RSE is obviously sensitive. Teachers should prepare themselves for use of vocabulary and the

details of the content of the unit before beginning. In order to create a positive, supportive environment for RSE and to reduce the likelihood of inappropriate disclosures, it is best practice to create ground rules with the class, in addition to the normal class rules. Refer to 6A Teaching Methodologies in RSE.

When answering children's questions, ensure that you consider your planned, published curriculum before answering. If a child asks about a sensitive issue which falls beyond your planned curriculum for this age group, you should avoid answering to the whole class. You might choose to respond only to the child or group who asked the question, or you might refer the question on to parents/carers. Your knowledge of the family and the child will guide you here. For further support with this refer to 6B Answering Children's RSE Questions.

This unit will cause children to reflect on their own personal experiences and family behaviours. This might prompt some children to talk about issues of a sensitive or personal nature. There might also be rare instances where children disclose issues which raise concerns regarding personal safety,

abuse or female genital mutilation (FGM). In this case, follow your school's Safeguarding Policy.

For some people, the use of scientific vocabulary for sexual parts is a sensitive issue. It is very important to introduce children to scientific vocabulary for body parts as early as possible. Part of statutory Relationships Education (Being Safe) is that children should know 'how to report concerns or abuse, and the vocabulary and confidence needed to do so'. It is essential that, as a school or teaching team, you decide which vocabulary is to be used and then use it consistently. Refer to 6D Use of Vocabulary in Primary RSE.

When delivering RSE units of work, teachers are often concerned about the responses of parents/carers. Good RSE includes working in partnership with famies and ensuring they are involved and supportive of the school's aims. Under the new statutory guidance, parents/carers have a right to be consulted with about policy for Relationships Education. Further guidance on consultation can also be found in the RSE Toolkit. Individual teachers do not need to consult with families. However, if this has not been carried out in school, a class teacher may find the reactions of families less supportive. It is essential for each class teacher to be aware of the school policy on Relationships Education and Sex Education. Parents/carers will have access to this policy and so policy and practice must be consistent, in order to reduce concerns and to keep staff members safe.

Teachers must ensure that teaching in RSE is inclusive of all children. whatever their family structures, religious or cultural background or their learning needs. Teachers must ensure that teaching in RSE complies with their duties under the Equality Act 2010 and that it prepares children for 'life in modern Britain'. In order to ensure that children see themselves and their families reflected back in the lessons, teachers should take care to avoid the assumption that all children will go on to marry, or that they will choose a partner of the opposite sex. It is highly likely that there are children in the group who either have unmarried or LGBT+ parents/carers or wider family members. In short, teachers should avoid heteronormative presumptions.

Teachers should assume that children in the group will hear different views about marriage, families and sexuality at home and should promote respectful listening and celebration of diversity in the class. Different views might stem from religious or cultural beliefs or family experiences. The DfE Guidance references the need to ensure that all views are reflected in Relationships Education at various points (Paras 19-22, 27-37).

Teachers should reflect faith perspectives in RSE especially if that ensures that members of their class hear their family's views reflected back. The guidance states 'in all schools, when teaching these subjects, the religious background of all pupils must be taken into account when planning teaching, so that topics that are included in the core content are appropriately handled.' Teachers may use the format 'some people believe X, some people believe Y, the law says Z.'

Teachers are also often concerned about how to respond if children ask explicit, complex or mischievous questions during work on RSE. The presence of good ground rules and a non-judgemental response to questions from the teacher is the best starting point for dealing with such questions. There is guidance on this topic in the 6B Answering Children's Questions relating to RSE and 6A Teaching Methodologies for Effective RSF.

Resources for This Unit

Specific resources for delivering the Teaching Activities in this Unit are referred to in the Points to Note column as appropriate.

Generic resources to support teaching and learning are also referred to in the Points to Note column.

All these resources can be accessed and downloaded using the links in the resource, or via the website www.pshecambridgeshire.org.uk

For example:

See TG Classroom Strategies for information on Draw and Write.

A full list of resources and books is included at the end of this unit.

Linked Units

RS 2 Relationships and Sex Education

PS 1/2 Personal Safety

MC 1/2 Managing Change

HL 1/2 Healthy Lifestyles



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Section A: Body Knowledge		
Framework question/s	What are the names of the main parts of the body? (BS)	
Learning Objective	1. To recognise the main external parts of the bodies of humans, including names for sexual parts. (BS)	
Possible Success Criteria	To be able to: use names such as arm leg, elbow with confidence use scientific names such as penis, testicles and vagina/vulva use the words male and female.	

Teaching Activities

1.1 Show the children a large outline shape of a boy and a girl of their own age. You might choose to draw around people in the class. As a class, ask the children to talk in pairs about the bodies and make a list together of all the body parts they can think of that can be seen from the outside. Tell the children that family names for sexual parts e.g. willie and twinkle are acceptable to use in class, but ensure that children are introduced to the scientific terms e.g. penis, testicle, vagina/vulva. Explain this to the children by saying that these are the words a doctor might use if they were describing different body parts. You might call them the 'doctor' words. Show the children sets of cards with named external body parts, including the 'doctor' names for sexual parts, and compare these to the lists they have made, noting any body parts/names they may have missed out. If necessary add further cards to the sets to ensure that the children's suggestions are included. Mix the cards up and ask children to place them on the body outlines in the appropriate place. Acknowledge the children who can say the scientific words aloud in order to encourage others to say the 'doctor' words.

Points to Note

- It is highly desirable to encourage children to use the scientific words for sexual body parts for reasons of safeguarding. Ensure that you have agreed which terms are to be used with your teaching colleagues and that this is consistent with your school Relationships Education Policy. Young children need one word for the external female parts. You should decide as a staff whether to use the term vulva or vagina. ('Vulva' is the scientifically correct term for the external female sexual parts. 'Vagina' is an internal part.) See 6D Use of Vocabulary in Primary RSE to assist in your decision making.
- It is suggested that you focus on the bodies of children of this age group in this exercise. A development in later units will be to look at adult bodies.
- You may choose to share the book Who Has What? Be aware that it introduces simple names for internal organs, which goes slightly beyond the scope of this unit.
- You may refer to NSPCC Pants Rule teaching materials to focus on personal safety issues closely linked to this activity. www.nspcc.org.uk/preventingabuse/ keeping-children-safe/underwear-rule/

Section A: Body Knowledge Continued		
Framework question/s	What are the names of the main parts of the body? BS	
Learning Objective	1. To recognise the main external parts of the bodies of humans, including names for sexual parts. BS	
Possible Success Criteria	To be able to: use names such as arm leg, elbow etc with confidence use scientific names such as penis, testicles and vagina/vulva use the words male and female.	

Teaching Activities

1.2 Talk about the differences and similarities between male and female bodies using the outlined bodies and reinforce the vocabulary introduced in 1.1 i.e. penis, testicle, vagina/vulva. Emphasise that males and females have many body parts that are the same, but that some are different. You might explain that the parts that are different in male bodies are the bits between their legs. They have a tube called a penis that they wee from and dangly bits called testicles/testes. Female bodies have different parts too. These parts are also between their legs. They have an area called a vulva/vagina, with a special hole in the middle and another hole at the front they wee from. Everyone has a hole at the back where poo comes out.

Give each child the outlines of male and female bodies and challenge them to write the names of as many external body parts as they can around the drawings. A

Points to Note

Refer to the 6D Use of Vocabulary in Primary RSE.



All staff have a responsibility to be aware of the warning signs and symptoms that a girl (usually aged between 0-15 years) may be at risk of female genital mutilation (FGM). Learning scientific names for body parts and building confidence in talking about them is a widely recognised protective factor. Visit www.nspcc.org.uk for more information.

- Body Outlines of external body parts for male and female may be found in Resource 1 KS1 External Male Body Outline and Resource 2 KS1 External Female Body Outline. You may also choose to use Resource 3 Body Part Labels You may download and print Let's Grow with Nisha and Joe www.fpa.org.uk/sites/default/files/lets-grow-with-nisha-and-joenon-printing.pdf to support this activity.
- · Your explanation of female sexual parts will need to be tailored to reflect whether you are using the word 'vulva', 'vagina' or both. In the sample explanation, you might choose to use scientific words for 'wee'-urine and 'poo'-faeces.
- It would be more inclusive of trans people to use the phrase 'people with male/female bodies' rather than the term 'girls' and boys' which many people use to refer to the social construct of 'gender'.
- · Intersex people have bodies which do not neatly fit into the medical definitions of male and female. Between 1% and 2% of people are born intersex. You may be aware of such children in your class, but sometimes families choose not to share this sensitive medical information. For more information visit UK Intersex Association www.ukia.co.uk/

Framework question/s	What can my amazing body do?		
Learning Objective	2: To describe what their bodies can do.		
Possible Success Criteria	To be able to: give examples of things my body can do give a reason that my body is amazing.		
Teaching Activities		Points to Note	
of all the activities they ca (skipping, dancing, jumpin (writing, drawing, reading)	oicture of themselves or write their name on a piece of paper and draw and label around it pictures in do with their bodies. Encourage them to think of activities they do using their whole bodies g, sports) i.e. gross motor skills, and those activities they do using one or two parts of their bodies i.e. fine motor skills. In small groups or Circle Time, ask the children to share their drawing and urite activity. They could then describe why they like this activity the best. A	There are obvious issues here of being sensitive to physical disability. Encourage all the children to understand that everyone has different capabilities. All bodies are different and we can all use our bodies in different ways. You may share All Kinds of Bodies or find relevant pages of The Great Big Body Book.	
different activities and acti their chosen body part and and describe in turn their	ren to work in pairs. They should take it in turns to choose one part of their body and name as many ons they use that part of their body for as they can. Back at a table, they could draw a picture of dillustrate all the activities they use it for. In small groups, ask the children to share their drawing avourite activity. In turns to mime their activity and ask the others to guess the activity and the body	For information about Circle Time, see the TG Circle Time.	
2.3 In Circle Time, complete the sentence stem <i>My body is amazing because</i> Encourage the children to think about physical capabilities, e.g. jump, run, clap, but also body functions e.g. healing when cut, mending broken bones. Share some amazing body facts with the children, e.g. <i>Did you know that there are 206 bones in the adult human body, but that a baby is born with over 300 bones? Did you know there are 27 bones in each hand?</i> Ask the children if they know any amazing body facts and which are the most amazing facts. Emphasise the many and varied capabilities of everyone's body.		 For information about Circle Time, see the TG Circle Time. Consider carefully the needs of those with physical disabilities and emphasis that everybody can do amazing things, but not everybody can do everything. Refer to a non-fiction book which describes the human body e.g. The Great Big Book of Bodies. Search online for 'Amazing Body Facts' for other suggestions which will interest your class. Watch a video like this one. www.youtube.com/watch?v=sOFQHqdpxQg (To avoid pop ups and comments, view the YouTube link through viewpure.com or safeshare.tv, or insert the YouTube video into another presentation tool e.g. Powerpoint.) 	
body and to decide on one	small groups or pairs. Ask each group to look at a non-fiction book or online resource, about the amazing fact they would like to share with the class. Make a class list of amazing facts about the as. You might make a film or poem of the children describing the facts they have discovered.	Guidance on using video and film can be found in TG Using Technology You could give small groups different sections of the DK Find Out page www.dkfindout.com/uk/human-body/ to look at and share their favourite fact.	

Section C - Body Awareness and Body Image			
Framework question/s	When am I in charge of my actions and my body? (BS)		
Learning Objective	3. To understand that they have responsibility for their body's actions and that their body belongs to them. (BS)		
Possible Success Criteria	To be able to: • give an example of how I can be in control of my body • describe some things I would only do in private • name the parts of my body which are private.		
Teaching Activities		Points to Note	
(You might repeat the exerce children's responses are difful bit clumsy and sometimes preclaim feel about this. Would they for Time, ask each child to sugable space on the carpet and Encourage the children to the	ibe a scenario where the puppet finds it difficult to keep their hands and feet to themselves. is twice, once with a male puppet/doll and once with a female. It will be interesting to see if the ferent each time.) The dolls wriggle a lot and sometimes hurt their friends by accident. They're a full or push people too hard on the playground. Ask the children how the puppet's friends might eel annoyed, unfriendly or frightened? Ask the children for some ways people could help. In Circle gest something the puppet could do to make things better e.g. Say sorry if people are hurt; sit in a assembly; ask a friend to tell them if they are wriggling. Think about how we need to be aware of what our bodies are doing to make sure we don't hurt. We all have the right to feel safe and it is our responsibility to ensure our bodies don't hurt other purpose.	 Information about using Puppets can be found in TG Using Resources. You could take this opportunity to reflect on the class rule which covers this area, e.g. keep your hands and feet to yourself. You might make it a focus for a day or two, or ask the children to 'tell a good tale' about when they feel someone was trying hard to follow the rule. At this point you may choose to reinforce the children's understanding of physical space and consent. Refer to 6H Consent, Pornography and Sexting. For information about Circle Time, see the TG Circle Time. 	
with everyone. Ask them wherefer to do in private e.g. g when they were babies or to to the children that as we go in public. Ask the children for school, but they don't at how house. In the circle, ask each they wanted more privacy, expeople watching me, so please.	on the meaning of the words <i>private</i> and <i>privacy</i> i.e. something you wouldn't show or share openly ere they have heard or seen these words. Ask the children to make suggestions of activities they coing to the toilet, having a bath. Ask the children for ideas of things they would have done in public addlers e.g. running round with nothing on, not wearing a swimming costume at the beach. Explain at older we often feel we want to do things in private and we feel uncomfortable doing some things in ideas of ways they act differently at home and at school e.g. they always shut the toilet door at the. Discuss the different places they feel are private places e.g. home, their bedroom, their Gran's the child to work with a partner and think of something they could say if they felt embarrassed and a.g. I feel a bit shy/embarrassed, so please could you shut the door? I don't like the feeling of other ase could I get changed in a cubicle? Ask the pairs to feedback their ideas to a puppet/doll/soft toy like to their parent/carer about this.	 Ensure that you emphasise that different families have different ways of behaving. In some families the bathroom door is never shut and nudity is common, for some the reverse is the case. Children should understand that privacy is linked to feeling safe. Refer to PS 1/2 Personal Safety. Information about using Puppets can be found in TG Using Resources. 	

Section C: Body Awareness and Body Image Continued		
Framework question/s	When am I in charge of my actions and my body? (BS)	
Learning Objective	3. To understand that they have responsibility for their body's actions and that their body belongs to them. (BS)	
Possible Success Criteria	To be able to: give an example of how I can be in control of my body describe some things I would only do in private name the parts of my body which are private.	

Teaching Activities

3.3 Give the children the drawing of body outlines of a boy and girl, ask them to shade in the parts of the body which are called 'private parts'. Assess whether the children have similar ideas. Discuss bodies of children of the same age as those in your class, rather than adult bodies. Describe the private parts of the body as those parts covered by their pants. In some families 'private parts' might be considered the parts covered by pants and vest. Ask the children for some reasons that other people might see their 'private parts' e.g. a doctor or nurse if they are ill. a parent helping them to get dressed. Grandpa helping them in the bath. Explain that if they ever feel uncomfortable or get a 'No' feeling about their private parts that they should tell someone they trust. Emphasise throughout that their body belongs to them. The children may understand that the concept of private parts and activities to be done in private change as they get older. E.g. older girls will begin to consider their breasts as private parts.

Points to Note

- Use Resource 1 KS1 External Male Body Outline and Resource 2 KS1 External Female Body Outline.
- · Be aware that in some families the parts considered 'private' for males and females are those covered by pants and vest. The mouth is also considered a private part in some cultures.
- Children may already be familiar with the 'NSPCC's Pants rule. This is a good place to reinforce it. http://www.nspcc.org.uk/preventingabuse/keeping-children-safe/underwear-rule/. You may also share this with parents/carers.
- If you have concerns about children's understanding of privacy relating to their body refer to PS 1/2 Personal Safety. Log any concerns you have relating to safeguarding with your DSL.
- · Encourage the children to return to their Networks of Support to remind themselves of adults they can talk to. These were developed in units BB 1/2 Beginning and Belonging and in PS 1/2 Personal Safety.

Section D - Personal Hygiene			
Framework question/s	How can I keep my body clean? (HP)		
Learning Objective	4. To know how to keep themselves clean. (HP)		
Possible Success Criteria	To be able to:		
Teaching Activities		Points to Note	
• • •	dren to make a list of things they can do to keep themselves clean and germ free e.g. brush teeth, dry basket, wash hair. Ask the groups to share their list with the class. The actions could be mimed ss.	 You may wish to invite support from visitors such as the dental service or school nurse to reinforce messages about the best way for children to keep their bodies clean. See Sources of Information and Support. 	

- 4.2 In groups, ask the children to collect pictures from magazines and catalogues of things we need in order to keep clean e.g. toothpaste, soap, towel, water, nail-brush, wipes, tissues, bath, shower, hair brush, nit comb. Use these pictures to make a collage. Or encourage the children to draw and label their own pictures of the things they use to keep clean.
 4.3 Give each child two cards showing a smiley face and a sad face, or use thumbs up/down as a signal. In Circle Time, read a
- 4.3 Give each child two cards showing a smiley face and a sad face, or use thumbs up/down as a signal. In Circle Time, read a number of scenarios to the children using fictional characters which involve good and bad hygiene practices e.g. Mr Brown brushes his teeth every morning; Miss Blue washes her hands before lunch; Mr and Mrs Orange share a tooth brush; Miss Purple wipes her nose on her sleeve; Mr Pink leaves his dirty tissues on the table. Ask the children to show either their smiley or sad face once they have listened to the scenario and decided whether it represents 'good hygiene' or 'bad hygiene'. Talk through each scenario and discuss the reason for the children's choices.
- Issues of hygiene and cleanliness should be discussed sensitively with regard to the differences there might be between families.
- In the light of the Covid 19 Pandemic, the children may have specific understanding about hand sanitizers, masks etc.
 - Use Resource 4 Hygiene Situations for scenarios which may be used in whole class or group work.
- · Read **Dr Dog** to the children to support this learning.
- 4.4 In Circle Time, discuss night time and morning routines for keeping clean. Ask the children to draw a sequence of pictures or comic strip showing their good hygiene routines at night time and in the morning.
- · Link with learning from Science about dental hygiene.
- For information about Circle Time, see the TG Circle Time.
- 4.5 In Circle Time, discuss ways of looking after the classroom which will help to keep the children clean e.g. washing hands regularly, changing outdoor shoes, wiping tables, using the bin for dirty tissues. Ask the children to design a poster for the classroom which will help children to keep themselves or the classroom clean e.g. please flush the toilet after you have used it, please wash your hands before lunch. Alternatively, create a short film or photograph the children describing ways to keep the classroom and themselves clean and images/footage of them doing these things.
- Guidance on the use of Film and Interactive Display can be found in the TG Using Technologies.

Framework question/s	How can I avoid spreading common illnesses and diseases? (HP)	
Learning Objective	5. To understand the importance of basic hygiene practices, e.g. washing hands, using a tissue, and how these prevent the spread of disease. (HP)	
Possible Success Criteria	To be able to: • name a way they can prevent the spread of germs.	
Teaching Activities		Points to Note
themselves, after handling their hands, both visible an e.g. through their mouths, r	his by washing their hands, washing and covering cuts and by making sure they do not put	Learning about good hygiene routines can be reinforced if your school toilets have hot water, soap and clean towels. Ask children if they know what to do if there if soap or towels are not available in the school toilets.
5.2 Gather all the children in a space where they can freely move around. Explain that you are going to play a game where people shake hands and say 'hello' to each other. Set up rules about safe movement around the space and also options for children who do not wish to shake hands, perhaps high fives or fist bumps. Without making it too obvious, place your hands flat in a tray of fine glitter. Ask one or two others, adults or children, to do that same. Then begin the hand shaking game. Ask the children to shake hands with 10 other people and then sit down in a space. When all the children are sitting down, ask them to look at their hands and ask them what they notice. Many children will have signs of glitter on their hands. Talk together about what happened.		 It is not appropriate to use this activity if social distancing is in place. Children and staff may recall times when handwashing was particularly important e.g. Covid 19 Pandemic. Sensitively ask for their reflections on this, if appropriate.
Ask the children to wash their hands and see how long it takes to get rid of the glitter.		
Finally, ensure that the children understand that germs pass from person to person by touch, but that we can't see them. In order to wash away the germs we have to wash our hands thoroughly.		
someone has a nasty coug	n with a set of cards (Resource 6) describing situations involving the presence of germs <i>e.g.</i> n, and another set of cards describing a good hygiene practice that prevents the transmission of the with your hand. Ask the children to match the cards and talk about their decision with the rest of	Refer to Resource 6 Hygiene Match.
5.4 Read or sing together the C	atch it! Bin It! Kill It! Rhyme and learn the actions.	Refer to Resource 5 Catch It! Bin It! Kill It Rhyme.

Section F - Processing the Learning		
Framework question/s	What have I learned?	
Learning Objective	6. To understand what they have learned and be able to share it with others.	
Possible Success Criteria	To be able to: • explain something I've learned.	
Teaching Activities Points to Note		Points to Note

Teaching Activities	Points to Note
6.1 Remind the children that they have learned about names of body parts, what their bodies can do and how amazing they are, private places and private body parts and how to keep clean. Ask each child to choose one thing they have learned which they would like to explain to someone at home. Ask the children to explain their chosen area and share what they might say with the class.	For assessment grids and activities for this unit see Assessment.

Resources to Support this Unit

When choosing and using any resources for RSE, you must ensure that the resource is consistent with your own school's Relationships Education policy. You may refer to 7A Checklist for Selecting Resources.

The following resources are included in the Unit RS1 Resource Pack linked to this Unit:

- 1. KS1 External Male Body Outline
- 2. KS1 External Female Body Outline
- 3. Body Part Labels
- 4. Is It Hygienic?
- 5. Catch It, Bin It, Kill It Rhyme
- 6. Hygiene Match

These resources are directly referenced within this unit:

Let's Grow with Nisha and Joe www.fpa.org.uk/sites/default/files/lets-grow-with-nisha-and-joe-non-printing.pdf

Dr Dog Babette Cole

Who Has What? Robie H Harris

The Great Big Book of Bodies Mary Hoffman

These may also support work on this unit:

I'm Falling to Bits Ted Arnold

You can Swim, Jim Kaye Umansky

See inside your body Katie Daynes

How Your Body Works Judy Hindley

Let's Talk About Where Babies Come From Robie H Harris

Lets Talk About Girls, Boys, Babies, Families and Friends Robie H Harris

Why do I wash my hands? Angela Royston

What are Germs? Katie Daynes

Why should I brush my teeth? Katie Daynes

Sources of Information and Support

Cambridgeshire RSE Toolkit

In the RSE Toolkit you will find a full range of documents to support teaching, working with parents, policy development and resourcing for RSE.

Health Related Behaviour Survey

Schools Health Education Unit runs this survey. The Health Related Behaviour Survey is used with Year 5 and 6 pupils in some schools. For information about the HRBS in Cambridgeshire, contact the PSHE Service. Teachers of younger children may find your school results informative.

For information about the HRBS nationally, go to www.sheu.org.uk

Sex Education Forum www.sexeducationforum.org.uk

An invaluable support for all teachers and schools delivering RSE and developing policy and practice. Look here for further resources for Primary RSE.

ChildLine www.childline.org.uk

A free, confidential helpline for children and young people. Trained volunteers are on hand to provide advice and support by phone and online, 24 hours a day. Children and young people can call ChildLine on 0800 1111. The website offers help, support and guidance for all children about things they worry about.

NSPCC Speak Out Stav Safe

learning.nspcc.org.uk/services/speak-out-stay-safe

Speak Out Stay Safe is a session provided free of charge to all primary schools in the UK. It provides:

- whole school assemblies and then targeted workshops for older children
- a clear understanding of abuse in all its forms, including bullying and sexual abuse
- knowledge of how to protect themselves
- an awareness of how to get help and support through ChildLine and other support networks.

Links to Support Parents

www.fpa.org.uk/help-mums-dads-and-carers

www.bigtalkeducation.co.uk/parents/how-to-talk-about-sex/

www.nspcc.org.uk/preventing-abuse/keeping-children-safe/healthy-sexual-behaviour-children-young-people/

Life Education Centres (LEC) www.coramlifeeducation.org.uk

Programmes to support and enhance Drug and Health Education in primary schools. This work is predominantly delivered through a visit from the LEC

classroom with trained educators. The Year 1 and Year 2 LEC programmes both encourage the children to reflect upon how amazing their bodies are.

Cambridgeshire and Peterborough – contact Cambridgeshire PSHE Service – 01480 376256

NHS Website www.nhs.uk/conditions

For information about the symptoms, diagnosis and treatment of illnesses such as head lice, chicken pox, common colds and other illnesses the children might be aware of, refer to this website. The articles are aimed at adults, but give clear information about how each illness is spread for teacher reference.

Stonewall www.stonewall.org.uk

The charity promoting LGBT+ rights which provides guidance for preventing and responding to homophobia and homophobic bullying.

Resources for Teachers can be found here: www.stonewall.org.uk/best-practice-toolkits-and-resources-0

Free posters, postcards and sticker sheets illustrating the 'Different Families, Same Love' campaign are also available from Stonewall. www.stonewall.org.uk/resources/different-families-same-love-pack

Cambridgeshire Oral Health Improvement

Dental service, Oral Health Department, or your local **Oral Health Promotion** service. This service offers 'My Smile Programme' for schools and Early Years.

cambridgedental.fatwordpress.co.uk/services/oral-health-improvement/

email ccs.dentalohecambs@nhs.net Tel 01223 723128

Cambridgeshire Primary Personal Development Programme

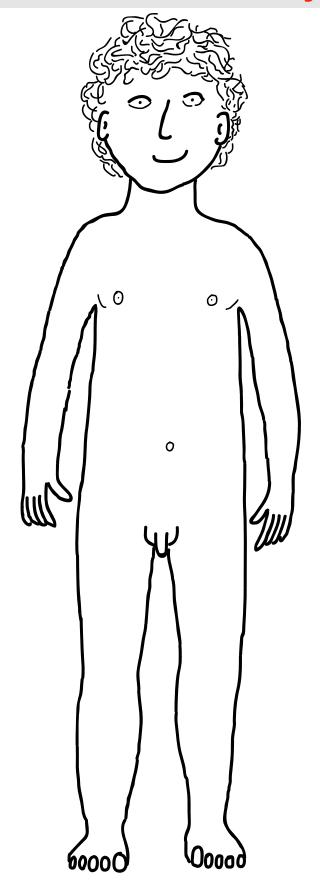
Healthy and Safer Lifestyles • RS1 Relationships and Sex Education

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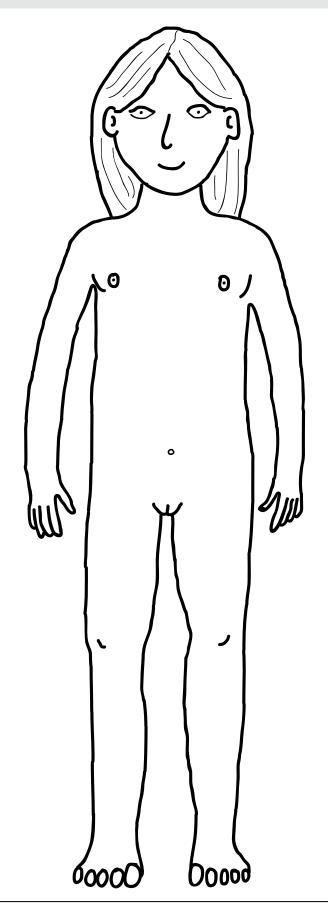
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Click on the title of the resource you require.

Resource 1 - KS1 External Male Body Outline



Resource 2 - KS1 Female External Body Outline



Resource 3 - Body Part Labels

penis	testes*	testicles*	
knee	vagina*	vulva _*	
bottom	leg	anus	
chest	eyebrow	arm	
nipple	knuckles	shoulder	
toe	foot	elbow	
finger	fingernail	eyelash	
wrist	lips	ear	
nose	nose eye moi		
hair	skin	shin	
toenail	cheek	chin	
palm	sole	ankle	
back	calf	heel	

^{*} Use which ever word you have agreed to use in your school. Refer to 6D Use of Vocabulary in Primary RSE for guidance.

Healthy and Safer Lifestyles • RS1 Relationships and Sex Education

Resource 4 - Hygiene Situations

Is it hygienic?	Yes	No
Mr Brown brushes his teeth every morning.		
Miss White always washes her hands before lunch.		
Mr and Mrs Green share a toothbrush.		
Miss Black wipes her nose on her sleeve.		
Mr Blue wears his pants for three days in a row.		
Miss Purple just wipes her plates after eating, she doesn't wash them up.		
Mr Yellow picks his nose.		
Mrs Red brushes her teeth after breakfast and before bedtime.		
Mr Purple leaves his dirty tissues lying around the house.		
Mrs Orange doesn't wash her hands after going to the toilet.		
Mr Grey wipes food onto his clothes as he's eating.		
Mrs Pink always throws her dirty tissues in the bin.		
Mr Lilac doesn't like baths, so he has a shower every other day.		

Resource 5 - Catch It! Bin It! Kill It! Rhyme

I will catch those germs when I "ATICHOO!", I will catch those germs in my tissue.

Catch It and Bin It to Kill It, that's it! there're no germs on us!

Put the tissue into a bin, germs won't get out once they are in.

Catch It and Bin It to Kill It, that's it! there're no germs on us!

Kill the germs they make us sick, come on everyone wash them off quick!

Catch It and Bin It to Kill It, that's it! there're no germs on us!



Shout 'Atichoo!' and catch your sneeze or cough in your clean tissue.



Put your tissue in the bin in the middle of the room.



Rub your hands together quickly.

All materials on this page sourced from the NHS.

Healthy and Safer Lifestyles • RS1 Relationships and Sex Education

Resource 6 - Hygiene Match

Cut these cards up and give groups of children the cut cards. Ask them to match a white 'germy' card with a green advice card.

I have a nasty cough.

Always cover your mouth when you cough.

I have a scab on my knee.

Don't pick your scab. When it is ready it will fall off.

I have a runny nose.

Use a tissue and throw it in the bin.

I have a nasty cold.

Don't wipe your nose on your hand or your clothes.

I keep on sneezing.

Cover your mouth and nose when you sneeze.

I keep on picking my nose.

Don't pick your nose, use a tissue.

I have some dirt in a cut on my knee.

Wash the dirt out of your cut before you put a plaster on.

I have just been to the toilet.

Always wash your hands after going to the toilet.

I am just about to eat my lunch.

Always wash your hands before you eat.

I have just been playing outside in the mud.

Wash your hands before you put your hands near your mouth.

I have just been playing with my dog.

Wash your hands before you put your hands near your mouth.

Cambridgeshire Primary Personal Development Programme • Monitoring Coverage

Class: Teacher:

R	Α	G	Notes
	R	R A	R A G

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