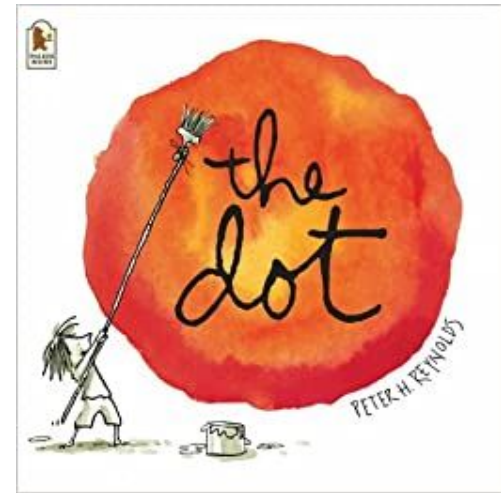
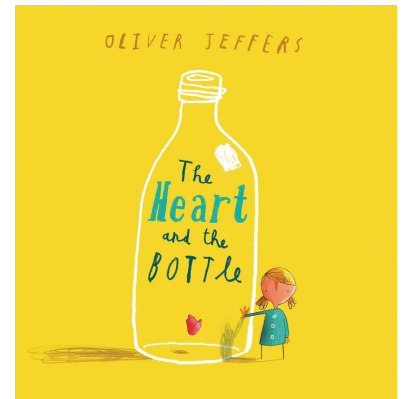




RSHE @ Dunn Street



Parent Engagement Session
'Having a healthy mind is just as important as having a healthy body'



How are we going to collect your views?

- Parents and carers can make contact with the school via phone, email or calling into the school office.
- Parents and carers can email any queries to the school which will be answered by a qualified member of the team.
- By attending the 'Parent and Carers Virtual RSHE Meeting' on the 24th May 2021 at 9.30am.
- By viewing the PSHE/RSHE questions and answers on the school website and responding with feedback.

What has changed ?

Relationships Education is defined as 'fundamental building blocks and characteristics of positive relationships, with particular reference to friendships, family relationships, and relationships with other children and with adults'

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

Although it should be noted that at Dunn Street Primary School we have been teaching PSHE for many years.

Why do we do it?

- Personal, social, health and economic (PSHE) education is an important and necessary part of all pupils' education. All schools should teach PSHE, this expectation is outlined in the national curriculum.

DfE Gov.uk

- PSHE education gives pupils the knowledge, skills, and attributes they need to keep themselves healthy and safe and to prepare them for life and work in modern Britain.

PSHE Association

* a note is attached to the value, hover over to see more details
 Compared with benchmark: Better Similar Worse Lower Similar Higher Not compared

Indicator	Period	England	North East region	County Durham	Darlington	Gateshead	Hartlepool	Middlesbrough	Newcastle upon Tyne	North Tyneside	Northumberland	Redcar and Cleveland	South Tyneside	Stockton-on-Tees	Sunderland
Infant mortality	2015 - 17	3.9	3.3	4.3	2.9	3.8	3.5	4.7	2.9	2.1	2.6	3.5	2.2	3.7	2.7
Child mortality rate (1-17 years)	2014 - 16	11.6	12.1	12.8	*	10.0	*	12.1	16.1	10.3	10.5	12.3	*	13.5	11.2
Population vaccination coverage - MMR for one dose (2 years old)	2017/18	91.2	94.5	96.9	93.0	93.6	92.4	91.9	93.3	96.7	94.6	95.1	96.7	93.7	92.7
Population vaccination coverage - Dtap / IPV / Hib (2 years old)	2017/18	95.1	97.2	98.5	98.0	95.7	96.7	95.8	95.9	98.4	95.8	97.1	98.3	97.0	98.1
Children in care immunisations	2017	84.6	90.4	84.8	*	99.2	91.6	91.6	94.8	91.4	99.6	96.6	95.6	93.0	69.0
Children achieving a good level of development at the end of reception	2017/18	71.5	71.5	72.8	72.6	70.1	69.4	63.9	70.9	72.8	75.0	71.4	72.8	70.5	71.1
Average Attainment 8 score	2016/17	44.6	44.6	44.6	45.3	46.8	44.0	43.2	43.3	47.0	44.7	44.0	43.0	45.6	43.8
Average attainment 8 score of children in care	2016/17	22.8	25.9	31.3	26.3	28.3	23.0	17.1	30.9	23.3	22.9	23.7	23.8	26.9	23.2
16-17 year olds not in education, employment or training (NEET) or whose activity is not known - current method	2017	6.0	6.2	6.3	4.4	10.7	3.6	4.2	6.6	4.3	4.5	5.5	8.3	4.2	9.4
16-18 year olds not in education, employment or training - historical method	2015	4.2	5.7	5.9	6.3	5.2	4.6	6.4	5.7	3.8	5.0	7.6	5.7	6.6	5.9
First time entrants to the youth justice system	2017	292.5	365.2	293.7	369.2	447.3	336.7	406.8	487.5	449.5	351.1	236.8	452.2	260.5	358.8
Children in poverty (under 16s)	2015	16.8	22.0	21.4	19.6	19.8	27.0	30.5	25.4	17.1	16.7	24.2	25.7	20.6	22.8
Family homelessness	2016/17	1.9	0.7	0.4	0.1	1.5	0.4	0.4	1.2	1.1	0.9	0.3	1.0	0.6	0.3
Children in care	2017	62	92	81	97	95	129	137	94	73	69	86	93	101	100
Children killed and seriously injured (KSI) on England's roads	2014 - 16	17	23	24	13	19	21	29	30	20	17	25	19	20	26
Low birth weight of term babies	2016	2.79	2.97	3.02	3.43	2.59	3.35	4.68	3.01	2.78	2.23	2.54	2.70	2.64	3.17
Obese children (4-5 years)	2017/18	9.5	10.9	10.9	8.6	9.7	12.2	13.0	11.8	9.8	10.7	11.6	10.4	10.5	11.4
Obese children (10-11 years)	2017/18	20.1	22.8	22.8	21.2	22.9	24.1	23.0	24.6	20.9	20.7	22.3	24.2	21.5	25.0
Children with one or more decayed, missing or filled teeth	2016/17	23.3	23.9	25.8	26.4	23.2	20.5	32.1	19.3	20.0	22.6	24.9	21.7	20.6	28.4
Hospital admissions for dental caries (0-4 years)	2014/15 -16/17	234.7	299.5	112.6	*	329.9	*	357.1	598.1	327.4	609.2	331.3	251.4	289.5	145.5
Under 18 conceptions	2016	18.8	24.6	21.6	24.1	20.6	34.9	36.5	20.8	15.4	21.0	31.6	24.0	27.7	31.9
Teenage mothers	2016/17	0.8	1.4	1.5	1.5	1.3	2.0	1.8	1.1	0.9	1.3	2.0	1.3	1.5	1.6
Admission episodes for mental health conditions - Under 18s	2015/16 -17/18	32.9	62.7	53.1	50.2	74.4	38.4	45.6	43.3	81.2	45.2	59.6	106.5	71.3	92.6
Hospital admissions due to substance misuse (15-24 years)	2014/15 -16/17	89.8	113.2	92.0	126.0	139.3	139.4	176.4	81.0	156.6	115.4	132.2	156.9	110.2	103.9
Smoking status at time of delivery	2017/18	10.8	16.3	18.2	16.2	15.1	17.0	17.8	15.1	11.3	13.4	17.8	19.9	17.0	17.8
Breastfeeding initiation	2016/17	74.5	59.0	56.0	*	75.6	37.9	47.9	69.4	65.4	65.6	49.9	55.6	48.7	56.6
Breastfeeding prevalence at 6-8 weeks after birth - current method	2017/18	42.7*	32.1*	29.0	31.9	*	*	29.8	46.9	*	36.7	27.2	26.2	*	24.6
A&E attendances (0-4 years)	2016/17	601.8	928.5	861.4	1533.9	1123.2	539.8	635.0	813.6	784.7	835.0	671.3	1228.6	561.4	1558.1
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years)	2017/18	96.4	130.4	152.0	155.8	112.1	106.6	139.1	123.0	111.3	111.2	132.7	150.1	96.9	154.6
Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years)	2017/18	132.7	157.0	144.1	189.8	156.7	143.3	164.6	135.9	200.6	219.3	159.5	153.3	158.3	123.9
Hospital admissions for asthma (under 19 years)	2016/17	202.8	266.2	248.0	255.8	225.5	232.4	406.0	201.1	198.4	267.5	276.8	362.4	262.8	327.1
Hospital admissions for mental health conditions	2016/17	81.5	99.3	94.7	97.7	104.9	70.0	80.8	87.6	125.6	105.1	69.6	125.4	86.1	123.5
Hospital admissions as a result of self-harm (10-24 years)	2016/17	407.1	425.3	400.8	472.8	422.7	275.8	483.1	369.7	603.3	492.3	441.4	540.3	414.6	362.3

You don't need to understand data to see the 'Reds' in South Tyneside.

Impact on pupils

- PSHE/RSHE education helps pupils to develop the knowledge, skills and attributes they need to thrive as individuals, family members and members of society. From making responsible decisions about alcohol to succeeding in their first job, PSHE education helps pupils to manage many of the most critical opportunities, challenges and responsibilities they will face growing up.
- RSE lessons are proven to increase children's understanding of healthy relationships.
- Health Education has been proven to improve attitudes to health and reduce tobacco, cannabis and alcohol use by young people
- First Aid will be taught across schools for the first time. Our current out of hospital cardiac arrest survival rate is 12%. In Norway, who routinely teach first aid in schools the rate is 52%

(PSHE Association)

Impact on Schools

- Schools must "promote the spiritual, moral, cultural, mental and physical development of pupils at the school and of society, and prepare pupils at the school for the opportunities, responsibilities and experiences of later life" while having a duty to keep pupils safe.
- PSHE/RSHE education helps children and young people to achieve their potential by supporting their wellbeing and tackling issues that can affect their ability to learn, such as anxiety and unhealthy relationships. PSHE education also helps pupils to develop skills and aptitudes - like teamwork, communication, and resilience - that are crucial to navigating the challenges and opportunities of the modern world, and are increasingly [valued by employers](#).
- A growing body of [research](#) shows that pupils who are emotionally healthy do better at school.

(PSHE Association)

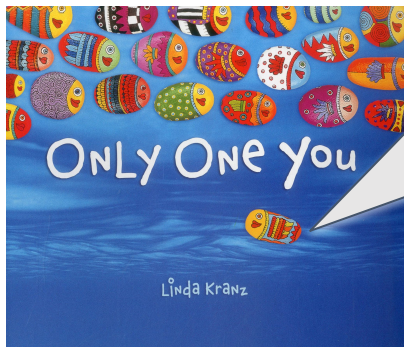
Impact on parents/carers

- An overwhelming majority of parents support the view that schools should prepare children for life and work, not just for exams. 90% of parents say that all schools should teach PSHE education according to [2015 YouGov polling](#) commissioned by the PSHE Association and the subject is supported by leading parent bodies including Mumsnet, PTA UK and the National Governors Association.
- We believe that parents welcome a partnership between home and schools which supports their children's personal and social development, and help deal with issues of increasing complexity such as those related to mental health and staying safe, both online and offline.

(PSHE Association)

Our framework:
Please see our attached overview of
PSHE/RSHE at Dunn Street Primary.

There's only one you in this great big world, make it a better place.



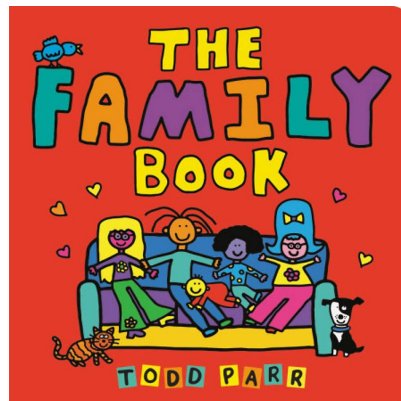
Our Approach to PSHE/RSE

- Our PSHE/RSE curriculum is taught by our teaching staff who your children are familiar and comfortable with. All PSHE/RSHE is taught in an age appropriate way and our main objective is to give your child an understanding of the modern world and ultimately to keep them safe at all times.
- Our curriculum overview provides you with a clear understanding of what is taught to your child and at what age and stage. All our PSHE/RSHE teaching is **age appropriate**.
- Children are naturally inquisitive and if children have questions then these are raised and answered in a factual way. This is to ensure that your child is able to make their own decisions and not be influenced by peers.
- Your child will have weekly PSHE/RSHE lessons following our SOW. However due to the nature of the subject when key issues arise these may need addressing immediately or form part of that week's lesson. We allow for flexibility in the curriculum as your children lead topics and points for discussion at various part of the working week.

Resources

- At Dunn Street Primary we use a range of inspiring and engaging resources to teach your children a fully comprehensive PSHE/RSHE scheme of work. Throughout the key stages stories and texts are used to promote valuable discussions and questions about relationships and mental and physical health.

Some of the texts we use at Dunn Street are...



Feedback

If you wish to discuss anything further regarding your child's PSHE/RSHE education whilst at Dunn Street Primary School then please email mtrotter@dunnstreet.s-tyneside.sch.uk or call into the school office to arrange an appointment.