

### Relationships and sex education (RSE), and personal, social, health and economic education (PSHE) policy **April 2023**

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#### Section 1: Vision statement

At Highlands School we believe that our high-quality relationships, sex and health education and a broader personal, social, health and economic education (PSHE) will stay with our students for life. Our DARE values are at the heart of everything we do at Highlands School and our relationships, sex, health and PSHE curriculum embody these core values.

RSE (relationships and sex education) and health education is **not** about encouraging students to become sexually active nor is it about promoting any particular lifestyle of relationship choice. RSE is about providing students with the knowledge, skills and confidence to make safe, healthy and informed relationship choices as young people and in the future as adults. At Highlands School we provide students with an innovative curriculum fit for the world our students are living in. We believe in empowering our students to understand their bodies, to reflect on their relationship values and to be able to openly discuss relationships as this will reduce the risk of unhealthy and abusive relationships and the spread of sexually transmitted infections. We are committed to the important role that RSE and health education has in students' holistic education and we aim to build on the RSE programmes covered in primary school. The theme of consent underpins our RSE and health education curriculum. We introduce students to the importance of consent from year 7 and this is revisited on a yearly basis and adapted to the age of each year group.

We have an obligation to provide students with high-quality and age-appropriate teaching of RSE. This policy outlines how our curriculum in these subjects will be organised and delivered, to ensure it meets the needs of all students.

#### 1.1. Definitions and statutory requirements

This policy covers three overlapping curriculum areas

- **1.1.1. PSHE** stands for personal, social, health and economic education and is a non statutory subject. However, we are required by law to teach some aspects of PSHE. We follow best practice guidance from the PSHE Association and provide our students with a full PSHE education.
- 1.1.2. RSE stands for relationships and sex education. Schools are required by law to teach relationships and sex education (RSE) under the <u>Children and Social Work Act 2017</u>, in line with the terms set out in the new <u>statutory guidance</u> and section 403 of the <u>Education Act 1996</u>.
- **1.1.3. Health education** we are also legally required to teach health education under the same statutory guidance as RSE.
- **1.1.4. RSHE** is the acronym used to refer to relationships and sex education and health education collectively.

At Highlands School we teach PSHE, RSE and health education as set out in this policy.

#### **Section 2: Aims**

- 2.1. The aims of relationships and sex education (RSE) at Highlands School are to:
  - 2.1.1. Provide a framework in which sensitive discussions can take place.
  - 2.1.2. Help students develop feelings of self-respect, confidence and empathy.
  - 2.1.3. Create a positive culture around issues of sexuality and relationships.
  - 2.1.4. Teach students the correct vocabulary to describe themselves and their bodies.

- 2.1.5. Educate students on how to keep themselves physically, emotionally and mentally safe within relationships.
- 2.1.6. Ensure that all students have a comprehensive understanding of what it means to give and receive consent within sexual and romantic relationships.
- 2.1.7. Ensure that our RSE curriculum is LGBT+ inclusive.
- 2.1.8. Prepare students for puberty and give them an understanding of sexual development.
- 2.1.9. To ensure students can keep themselves safe online.
- 2.1.10. To support students in developing a positive body image and to challenge notions of body shaming.

#### 2.2. The aims of health education at Highlands school are to:

- 2.2.1 Provide students with the information that they need to make good decisions about their own health and wellbeing.
- 2.2.2. Teach students how to recognise what is normal and what is an issue in themselves and others and, when health and wellbeing issues arise, know how to seek support as early as possible from appropriate sources.
- 2.2.3. To make links between good physical health and positive mental wellbeing, and vice versa.
- 2.2.4. Develop students' self-control and ability to self-regulate, and teach strategies for doing so.
- 2.2.5. Reduce stigma attached to health issues, in particular those to do with mental wellbeing and sexual health.
- 2.2.6. Prepare students for the changes they will experience physically, emotionally and mentally in their development to adulthood. This will include puberty and menstruation education.
- 2.2.7. Ensure students understand how to develop and maintain routines around personal hygiene.

#### 2.3. The aims of personal, social, health and economic education (PSHE) at Highlands school are to:

(This section covers the aims of PSHE not already covered in relationships sex and health education.)

- 2.3.1. Contribute to students' wider spiritual, moral, social and cultural education.
- 2.3.2. Develop students' ability to live independently as young adults in the wider world.
- 2.3.3. Develop students' financial literacy.
- 2.3.4. Support students in becoming reflective and emotionally intelligent.
- 2.3.5. Teach students how to become responsible members of their school and wider community.

#### **Section 3: Policy development**

- 3.1. All schools are required to consult parents/carers on their RSE policy.
- 3.2. This policy has been developed in consultation with staff, students and parents/carers. The consultation and policy development process involved the following steps:
  - 3.2.1. Review the senior leaders responsible for RSE and PSHE collated all relevant information including relevant national and local guidance.
  - 3.2.2. Staff consultation all school staff were given the opportunity to look at the policy and make recommendations.

- 3.2.3. Parent/carer consultation an information pack was prepared and shared with all parents along with the policy and survey to submit feedback.
  - 3.2.4. Student consultation we investigated what exactly students want from their RSE curriculum.
  - 3.2.5. Ratification once amendments were made; the policy was shared with governors and ratified.

#### **Section 4: Curriculum**

- 4.1. Our curriculum is set out as per appendix 2 but we may need to adapt it as and when necessary.
- 4.2. We have developed the curriculum in consultation with parents/carers, students and staff, taking into account the age, needs and feedback from students. If students ask questions outside the scope of this policy, teachers will respond in an appropriate manner so they are fully informed and do not seek answers online.
- 4.3. The new statutory guidance requires that schools teach the specified content covering these key themes.
  - 4.3.1. Families.
  - 4.3.2. Respectful relationships, including friendships.
  - 4.3.3. Online and media.
  - 4.3.4. Being safe.
  - 4.3.5. Intimate and sexual relationships, including sexual health.
- 4.4. For information on the content specified in the statutory guidance see appendix 1. For specific information about our RSHE and PSHE curriculum see appendix 2.

#### **Section 5: Delivery of RSE**

- 5.1. We ensure that when teaching RSE, health education and PSHE we do so in an inclusive manner. We acknowledge and celebrate what unites us as a community and what makes us unique. For example, when teaching about family life we ensure that there is no stigmatisation of students who do not live in a traditional heterosexual nuclear family. We teach students that families can include single parent families, LGBT parents, families headed by grandparents, adoptive parents, foster parents/carers amongst other structures. We train staff to be aware and sensitive to the personal circumstances of students. We teach students to be inclusive, respectful and sensitive to the wide-ranging diversity within our school, our community and the wider world.
- 5.2. PSHE, RSE and health education is delivered in the following way.

#### 5.2.1. Year 7 and year 8

- 5.2.1.1. PSHE, RSE and health education will be taught to year 7 and year 8 through their weekly citizenship lesson. Approximately one third of citizenship curriculum time will be given to PSHE, RSE and health education.
- 5.2.1.2. In addition, year 7 and year 8 will receive a 65-minute PSHE lesson once per week. This is part of our whole school tutor time programme delivered by form tutors. Sex education is not taught by form tutors. All sex education in year 7 and 8 is taught by specialist teachers either in citizenship lessons or in off-timetable days.

#### 5.2.2. **Year 9 to year 13**

5.2.2.1. Year 9 to year 13 will receive a 65-minute PSHE lesson one per week. This is part of our whole school tutor time programme delivered by form tutors. Sex education is not taught by

form tutors. All sex education is taught by specialist teachers during the regular PSHE slot, as part of a 6-week specialist RSE unit.

#### **Section 6: Roles and responsibilities**

#### 6.1. The governing board is responsible for:

- 6.1.1. Ensuring all students make progress in achieving the expected educational outcomes.
- 6.1.2. Ensuring the RSE and health education curriculum is well-led, effectively managed and well-planned.
- 6.1.3. Evaluating the quality of provision through regular and effective self-evaluation.
- 6.1.4. Ensuring that teaching is delivered in ways that are accessible to all students with SEND.
- 6.1.5. Providing clear information to parents/carers on the subject content and the right to request that their child is withdrawn.
- 6.1.6. Ensuring RSE and health education is resourced, staffed and timetabled in a way that ensures the school can fulfil its legal obligations.
- 6.1.7. Maintaining and developing the religious ethos of the school.

#### 6.2. The headteacher is responsible for, and may delegate through a deputy or assistant headteacher:

- 6.2.1. The overall implementation of this policy.
- 6.2.2. Ensuring all staff are suitably trained to deliver the subjects.
- 6.2.3. Ensuring parent/carer are fully informed of this policy.
- 6.2.4. Reviewing all requests to withdraw students from non-statutory elements of the RSE and health education curriculum.
- 6.2.5. Discussing withdrawal requests with parents, and the child if appropriate, to ensure their wishes are understood and to clarify the nature and purpose of the curriculum, including the benefits of receiving the education.
- 6.2.6. Ensuring withdrawn students receive appropriate, purposeful education during the period of withdrawal.
- 6.2.7. Encouraging parents/carers to be involved in consultations regarding the school's RSE and health education curriculum.
- 6.2.8. Reviewing this policy on an annual basis.
- 6.2.9. Reporting to the governing board on the effectiveness of this policy and the curriculum.

#### 6.3. The PSHE leader is responsible for:

- 6.3.1. Overseeing the delivery of RSE and health education.
- 6.3.2. Working closely with colleagues in related curriculum areas to ensure the RSE and health education curriculum compliments, and does not duplicate, the content covered in national curriculum subjects.
- 6.3.3. Ensuring the curriculum is age-appropriate and of high-quality.
- 6.3.4. Reviewing changes to the RSE and health education curriculum and advising on their implementation.
- 6.3.5. Monitoring the learning and teaching of RSE and health education, providing support to staff where necessary.
- 6.3.6. Ensuring the continuity and progression between each year group.
- 6.3.7. Helping to develop colleagues' expertise in the subject.
- 6.3.8. Ensuring teachers are provided with adequate resources to support teaching of the curriculum.

- 6.3.9. Ensuring the school meets its statutory requirements in relation to RSE and health education.
- 6.3.10. Leading staff meetings and ensuring all members of staff involved in the curriculum have received the appropriate training.
- 6.3.11. Organising, providing and monitoring CPD opportunities in the subject.
- 6.3.12. Ensuring the correct standards are met for recording and assessing student performance.
- 6.3.13. Monitoring and evaluating the effectiveness of the subjects and providing reports to the headteacher.
- 6.3.14. Responding appropriately to students whose parents/carers have requested to withdraw them from the non-statutory components of RSE, by providing them with alternative education opportunities.

#### 6.4. Staff who teach PSHE, RSE and health education are responsible for:

- 6.4.1. Acting in accordance with, and promoting, this policy.
- 6.4.2. Delivering RSE and health education in a sensitive way and that is of a high-quality and appropriate for each year group.
- 6.4.3. Ensuring they do not express personal views or beliefs when delivering the curriculum.
- 6.4.4. Planning lessons effectively, ensuring a range of appropriate teaching methods and resources are used to cover the content.
- 6.4.5. Modelling positive attitudes to RSE and health education.
- 6.4.6. Liaising with the SENCO about identifying and responding to the individual needs of students with SEND.
- 6.4.7. Liaising with the PSHE leader about key topics, resources and support for individual students.
- 6.4.8. Monitoring student progress in PSHE, RSE and health education.
- 6.4.9. Reporting any concerns regarding the teaching of RSE or health education to the RSE and health education subject leader or another member of the SLT.
- 6.4.10. Reporting any safeguarding concerns or disclosures that students may make as a result of the subject content to the DSL.

#### 6.5. The SENCO is responsible for:

- 6.5.1. Advising the PSHE leader and teaching staff how best to identify and support students' individual needs.
- 6.5.2. Advising staff on the use of TAs in order to meet students' individual needs.

#### Section 7: Parents'/carers' right to withdraw

The school feels strongly that all students should have the opportunity to engage fully with all aspects of sex education. We are committed to ensuring students are educated and empowered to keep themselves physically, emotionally and mentally safe, and feel it is highly important that students have a clear understanding of all components of sex education.

- 7.1. Parents/carers have the right to withdraw their children from the sex education components within RSE up to and until 3 terms before the child turns 16. After this point, if the child wishes to receive sex education rather than being withdrawn, the school will arrange this. As a school, we define sex education as content under the topic of 'intimate relationships' that specifically relates to contraception and sexually transmitted infections.
- 7.2. Parents/carers cannot withdraw their children from sex and reproduction education taught as part of the science curriculum.
- 7.3. Parents/carers cannot withdraw their children from the relationships aspect of the RSE curriculum, or from health education.

- 7.4. Requests for withdrawal should be put in writing and addressed to the headteacher.
- 7.5. A copy of withdrawal requests will be placed in the student's educational record.
- 7.6. The headteacher or senior leader responsible for RSE will arrange a time to meet with the parent/carer to discuss their concerns and to outline the importance of RSE. If after this meeting the parent/carer still wishes to withdraw their child from sex education, then arrangements will be made for this to happen and alternative work will be given to these students.

#### **Section 8: Training**

- 8.1. All staff required to teach PSHE, RSE and health education will be trained to do so. This training is included in our continuing professional development calendar.
- 8.2. The senior leader responsible for RSE will also invite visitors from outside the school, such as school nurses or sexual health professionals, to provide support and training to staff teaching RSE.

#### **Section 9: Monitoring arrangements**

- 9.1. The delivery of PSHE, RSE and health education is monitored by the senior leader responsible.
- 9.2. Monitoring and evaluation will be conducted through the whole school quality assurance process in addition to subject specific learning walks, work sampling, staff feedback, student voice and the quality assurance of teaching materials.
- 9.3. Students' development in RSE is monitored by class teachers as part of our internal assessment systems.
- 9.4. This policy will be reviewed annually by the senior leader responsible for PSHE, RSE and health education. At every review, the policy will be approved by the governing body and the headteacher.

# Appendices

#### **Appendix 1a: Statutory RSE learning outcomes.**

These have been taken from the statutory guidance, which can be read in full <a href="here">here</a>.

#### By the end of secondary school students should know:

TOPIC	STUDENTS SHOULD KNOW
Families	That there are different types of committed, stable relationships.
	<ul> <li>How these relationships might contribute to human happiness and their importance for bringing up children.</li> </ul>
	• What marriage is, including their legal status e.g. that marriage carries legal rights and protections not available to couples who are cohabiting or who have married, for example, in an unregistered religious ceremony.
	<ul> <li>Why marriage is an important relationship choice for many couples and why it must be freely entered into.</li> </ul>
	• The characteristics and legal status of other types of long-term relationships.
	• The roles and responsibilities of parents/carers with respect to raising of children, including the characteristics of successful parenting.
	• How to: determine whether other children, adults or sources of information are trustworthy: judge when a family, friend, intimate or other relationship is unsafe (and to recognise this in others' relationships); and, how to seek help or advice, including reporting concerns about others, if needed.
Respectful relationships, including friendships	• The characteristics of positive and healthy friendships (in all contexts, including online) including: trust, respect, honesty, kindness, generosity, boundaries, privacy, consent and the management of conflict, reconciliation and ending relationships. This includes different (non-sexual) types of relationship.
	Practical steps they can take in a range of different contexts to improve or support respectful relationships.
	<ul> <li>How stereotypes, in particular stereotypes based on sex, gender, race, religion, sexual orientation or disability, can cause damage (e.g. how they might normalise non-consensual behaviour or encourage prejudice).</li> </ul>
	• That in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including people in positions of authority and due tolerance of other people's beliefs.
	<ul> <li>About different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders to report bullying and how and where to get help.</li> </ul>
	• That some types of behaviour within relationships are criminal, including violent behaviour and coercive control.
	<ul> <li>What constitutes sexual harassment and sexual violence and why these are always unacceptable.</li> </ul>

	• The legal rights and responsibilities regarding equality (particularly with reference to the protected characteristics as defined in the Equality Act 2010) and that everyone is unique and equal.
Online and media	<ul> <li>Their rights, responsibilities and opportunities online, including that the same expectations of behaviour apply in all contexts, including online.</li> </ul>
	<ul> <li>About online risks, including that any material someone provides to another has the potential to be shared online and the difficulty of removing potentially compromising material placed online.</li> </ul>
	• Not to provide material to others that they would not want shared further and not to share personal material which is sent to them.
	<ul> <li>What to do and where to get support to report material or manage issues online.</li> </ul>
	The impact of viewing harmful content.
	• That specifically sexually explicit material e.g. pornography presents a distorted picture of sexual behaviours, can damage the way people see themselves in relation to others and negatively affect how they behave towards sexual partners.
	<ul> <li>That sharing and viewing indecent images of children (including those created by children) is a criminal offence which carries severe penalties including jail.</li> </ul>
	<ul> <li>How information and data is generated, collected, shared and used online.</li> </ul>
Being safe	• The concepts of, and laws relating to, sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, forced marriage, honour-based violence and FGM, and how these can affect current and future relationships.
	<ul> <li>How people can actively communicate and recognise consent from others, including sexual consent, and how and when consent can be withdrawn (in all contexts, including online).</li> </ul>
Intimate and sexual	<ul> <li>How to recognise the characteristics and positive aspects of healthy one-to-one intimate relationships, which include mutual respect, consent, loyalty, trust, shared interests and outlook, sex and friendship.</li> </ul>
relationships, including sexual health	• That all aspects of health can be affected by choices they make in sex and relationships, positively or negatively, e.g. physical, emotional, mental, sexual and reproductive health and wellbeing.
	• The facts about reproductive health, including fertility and the potential impact of lifestyle on fertility for men and women.
	• That there are a range of strategies for identifying and managing sexual pressure, including understanding peer pressure, resisting pressure and not pressuring others.
	• That they have a choice to delay sex or to enjoy intimacy without sex.
	• The facts about the full range of contraceptive choices, efficacy and options available.
	The facts around pregnancy including miscarriage.

• That there are choices in relation to pregnancy (with medically and legally accurate, impartial information on all options, including keeping the baby, adoption, abortion and where to get further help).
• How the different sexually transmitted infections (STIs), including HIV/AIDs, are transmitted, how risk can be reduced through safer sex (including through condom use) and the importance of and facts about testing.
• About the prevalence of some STIs, the impact they can have on those who contract them and key facts about treatment.
<ul> <li>How the use of alcohol and drugs can lead to risky sexual behaviour.</li> </ul>
How to get further advice, including how and where to access confidential sexual and reproductive health advice and treatment.

#### Appendix 1b: Statutory health education learning outcomes.

These have been taken from the statutory guidance, which can be read in full <a href="here">here</a>.

#### By the end of secondary school students should know:

TOPIC	STUDENTS SHOULD KNOW
Mental	How to talk about their emotions accurately and sensitively, using appropriate vocabulary.
well-being	That happiness is linked to being connected to others.
3 3 3	How to recognise the early signs of mental wellbeing concerns.
	• Common types of mental ill health (e.g. anxiety and depression).
	<ul> <li>How to critically evaluate when something they do or are involved in has a positive or negative effect on their own or others' mental health.</li> </ul>
	• The benefits and importance of physical exercise, time outdoors, community participation and voluntary and service-based activities on mental wellbeing and happiness.
Internet safety and harms	• The similarities and differences between the online world and the physical world, including: the impact of unhealthy or obsessive comparison with others online (including through setting unrealistic expectations for body image), how people may curate a specific image of their life online, over-reliance on online relationships including social media, the risks related to online gambling including the accumulation of debt, how advertising and information is targeted at them and how to be a discerning consumer of information online.
	<ul> <li>How to identify harmful behaviours online (including bullying, abuse or harassment) and how to report, or find support, if they have been affected by those behaviours.</li> </ul>

Physical health and fitness	• The positive associations between physical activity and promotion of mental wellbeing, including as an approach to combat stress
	<ul> <li>The characteristics and evidence of what constitutes a healthy lifestyle, maintaining a healthy weight, including the links between an inactive lifestyle and ill health, including cancer and cardiovascular ill-health.</li> </ul>
	<ul> <li>About the science relating to blood, organ and stem cell donation.</li> </ul>
Healthy eating	• How to maintain healthy eating and the links between a poor diet and health risks, including tooth decay and cancer.
Drugs, alcohol and tobacco	<ul> <li>The facts about legal and illegal drugs and their associated risks, including the link between drug use, and the associated risks, including the link to serious mental health conditions.</li> </ul>
and tobacco	<ul> <li>The law relating to the supply and possession of illegal substances.</li> </ul>
	<ul> <li>The physical and psychological risks associated with alcohol consumption and what constitutes low risk alcohol consumption in adulthood.</li> </ul>
	<ul> <li>The physical and psychological consequences of addiction, including alcohol dependency.</li> </ul>
	<ul> <li>Awareness of the dangers of drugs which are prescribed but still present serious health risks.</li> </ul>
	• The facts about the harms from smoking tobacco (particularly the link to lung cancer), the benefits of quitting and how to access support to do so.
Health and prevention	<ul> <li>About personal hygiene, germs including bacteria, viruses, how they are spread, treatment and prevention of infection, and about antibiotics.</li> </ul>
	<ul> <li>About dental health and the benefits of good oral hygiene and dental flossing, including healthy eating and regular check-ups at the dentist.</li> </ul>
	<ul> <li>The benefits of regular self-examination and screening the facts and science relating to immunisation and vaccination. (late secondary)</li> </ul>
	<ul> <li>The importance of sufficient good quality sleep for good health and how a lack of sleep can affect weight, mood and ability to learn.</li> </ul>
Basic first aid	Basic treatment for common injuries.
Basic first aid	• Life-saving skills, including how to administer CPR.
	<ul> <li>The purpose of defibrillators and when one might be needed.</li> </ul>
Changing	• key facts about puberty, the changing adolescent body and menstrual wellbeing.
adolescent body	• the main changes which take place in males and females, and the implications for emotional and physical health.

#### Appendix 1c: Non-statutory PSHE learning outcomes.

This section covers the learning outcomes for aspects of PSHE that do not fall under the statutory requirements in RSE and health education. These learning outcomes are taken from the PSHE Association programmes of study.

#### By the end of secondary school students should know:

STUDENTS SHOULD KNOW
About online communication.
How to use social networking sites safely.
<ul> <li>How to recognise online grooming in different forms, e.g. in relation to sexual or financial exploitation, extremism and radicalization.</li> </ul>
How to respond and seek support in cases of online grooming.
How to recognise biassed or misleading information online.
How to critically assess different media sources.
How to distinguish between content which is publicly and privately shared.
About age restrictions when accessing different forms of media and how to make responsible decisions
How to protect financial security online.
How to assess and manage risks in relation to gambling and chance-based transactions.
How to make safe financial choices.
About ethical and unethical business practices and consumerism.
About saving, spending and budgeting.
How to manage risk-taking behaviour.
How to effectively budget and evaluate savings options.      How to effectively budget and evaluate savings options.
How to prevent and manage debt, including understanding credit rating and pay day lending.      How data is governed, calledted and shared, and the influence of torgeted advertising.
How data is generated, collected and shared, and the influence of targeted advertising.
<ul> <li>How thinking errors, e.g. gambler's fallacy, can increase susceptibility to gambling.</li> <li>Strategies for managing influences related to gambling, including online.</li> </ul>
<ul> <li>About the relationship between gambling and debt.</li> </ul>
<ul> <li>About the relationship between gambling and debt.</li> <li>About the law and illegal financial activities, including fraud and cybercrime.</li> </ul>
How to manage risk in relation to financial activities.

Employability and enterprise	<ul> <li>How to be enterprising, including skills of problem-solving, communication, teamwork, leadership, risk-management, and creativity.</li> </ul>
	About equality of opportunity in life and work.
	How to challenge stereotypes and discrimination in relation to work and pay.
	About employment, self-employment and voluntary work.
	About different types of employment and career pathways.
	How to manage feelings relating to future employment.
	About young people's employment rights and responsibilities.
	How to evaluate strengths and interests in relation to career development.
	Strategies for overcoming challenges or adversity at work.
	About responsibilities in the workplace.
	How to manage practical problems and health and safety.
	How to maximise employability, including managing online presence and taking opportunities to broaden experience.
	About rights, responsibilities and challenges in relation to working part time whilst studying.
	How to manage work/life balance.
Career	About a broad range of careers and the abilities and qualities required for different careers
progression	How to challenge stereotypes, broaden their horizons and how to identify future career aspirations
p. 68. 666.611	About the link between values and career choices
	About transferable skills, abilities and interests
	How to demonstrate strengths.
	How to work towards aspirations and set meaningful, realistic goals for the future.  Also 1.0055 and 1.0014 for this set.
	About GCSE and post-16 options.  To get and achieve SMART to great and
	• To set and achieve SMART targets.
	Effective revision techniques and strategies.  About application processes including writing CVa paragraph statements and interview technique.
	<ul> <li>About application processes, including writing CVs, personal statements and interview technique.</li> <li>How to set aspirational goals for future careers and challenge expectations that limit choices.</li> </ul>