

KS2 Discrete Provision

Medium-Term Plan: Sex Education and Sensitive Content

Content delivered through discrete lessons rather than the integrated curriculum mapping, in line with the school's trauma-informed approach

More Than Ed

Academic Year 2026/27

About this document

This is the **medium-term plan (MTP)** for KS2 sex education and any RSHE content delivered through discrete lessons rather than through the integrated curriculum mapping. It complements the **KS2 PSHE Curriculum Mapping**, the **Everyday Practice → RSHE 2026** audit, and the **KS2 RSHE 2026 Verification Items** document.

Together with those documents, this MTP enables the school to demonstrate **full coverage of the statutory RSHE 2026 framework** (Department for Education, July 2025; effective September 2026) at Key Stage 2.

Scope at KS2

At primary phase, the statutory framework comprises Relationships Education and Health Education. **Sex education at primary is not compulsory** — but the DfE recommends that primary schools teach it in Y5 and/or Y6, in line with the Science National Curriculum content on conception and birth. The Science NC content itself **is statutory** and parents cannot withdraw from it; non-statutory sex education is **subject to parental withdrawal** (paragraphs 16–20 of the statutory guidance).

At KS2, the discrete provision in this school is limited to:

- Y5 puberty (statutory Health Education; not withdrawable).
- Y6 puberty consolidation (statutory; not withdrawable).
- Y6 conception and birth (statutory Science NC; not withdrawable).
- Y6 non-statutory sex education (optional; subject to parental withdrawal).

All other RSHE content at KS2 — relationships, online safety, mental wellbeing, health protection, personal safety, first aid, drugs/alcohol/vaping — is delivered through the integrated curriculum and the everyday practice of the school, as documented in the other four documents in this set.

Why discrete delivery for the cohort

The school's SEMH pupils often have lived experience that makes sex education content potentially activating. Discrete delivery (rather than absorption into the broader curriculum) allows:

- Pre-briefing of the DSL and key adults so 1:1 follow-up is ready.
- Sequencing aligned with each pupil's Trauma Recovery Model stage, planned with the in-house psychotherapist.
- Smaller group sizes where helpful, with the key adult present.
- Clear parental communication and the option to request withdrawal (where applicable).
- Defensible record of what was taught when, supporting audit and inspection.

How to read the table

Each year group has its own section. Within each year, content is sequenced by term. The five columns show: the term and topic; the statutory content covered (including whether it is statutory and withdrawable or not); the PSHE/RSHE codes addressed; the preparatory work already happening through everyday practice; and brief delivery notes for the teacher/key adult.

Two cells are flagged with special status: **STATUTORY** (parents cannot withdraw) and **OPTIONAL** (parents can request withdrawal). This distinction is critical for the RSE policy and parent communications.

Medium-term plan by year

Year 5

Y5 focuses on **puberty preparation, vocabulary and the physical changes themselves**. All Y5 content is statutory and parents cannot withdraw from it.

Term / Topic	Must-teach outcomes	PSHE / RSHE codes	Everyday Practice preparatory work	Delivery notes
Autumn	<i>Preparation — vocabulary, trust and consent foundations before puberty content begins.</i> 1. Use the correct anatomical names for body parts: penis, vulva, vagina, testicles, scrotum, nipples. 2. Identify which parts of the body are private and explain why. 3. Explain what consent means in age-appropriate contexts (hugs, photos, sharing personal information). 4. Use “no”, “stop” and “I don’t want to” language assertively. 5. Name at least two trusted adults they could go to with a worry, in and outside school. 6. Recognise that nobody, including adults they know, has the right to touch their private parts without consent. STATUTORY — not withdrawable	DB2 (anatomy) BS1, BS3 (boundaries, body autonomy) BS4, BS5 (trusted adults) RR3 (assertiveness)	Builds directly on SaLT-informed 1:1 vocabulary work; NSPCC PANTS embedded through daily routines and SEL. Pupils with past trauma will have had 1:1 preparation by their key adult.	Mostly consolidation. Whole-class or small-group. Key adult attendance recommended.
Spring	<i>Puberty — part 1 (the changes). Statutory Health Education + Science NC content.</i> 1. Describe the physical changes that happen to all bodies during puberty: growth spurts, body hair, skin changes (spots), increased sweat, body shape changes. 2. Describe physical changes specific to bodies with male anatomy: voice deepening, erections, wet dreams (presented factually and reassuringly as normal). 3. Describe physical changes specific to bodies with female anatomy: breast development, the start of periods, the basic outline of the menstrual cycle. 4. Explain what a period is, how often it happens, and that it is a normal sign the body is healthy.	DB1, DB2, DB3 (developing bodies, anatomy, menstrual cycle) H30, H31, H32 (PSHE) W3 (feelings)	Daily routines support discreet menstrual product access (DB2). The school day uses non-stigmatising language (“period products” not “feminine hygiene”) per DfE guidance.	Single-sex small groups optional for parts; whole-class for others. Key adult present.

Term / Topic	Must-teach outcomes	PSHE / RSHE codes	Everyday Practice preparatory work	Delivery notes
	5. Recognise that puberty also brings emotional changes: mood swings, new feelings about friendships, the need for more privacy. 6. Understand that puberty can start any time between around 8 and 14 — all of this range is normal. 7. Recognise that the rate and order of changes vary between individuals and there is no single “normal” timeline. 8. Identify trusted adults to go to if changes feel worrying or uncomfortable. STATUTORY — not withdrawable			
Summer	<i>Puberty — part 2 (managing puberty in practice).</i> 1. Identify the main types of period products (pads, tampons, period pants, menstrual cups) and when each might be used. 2. Demonstrate or describe how to use a sanitary pad and where products are kept at school. 3. Explain what to do if a period starts unexpectedly at school. 4. Describe how to track periods using a calendar or app. 5. Describe the personal hygiene routines that become more important during puberty: washing daily, antiperspirant, oral hygiene, hair care. 6. Identify reliable sources of information about puberty (school staff, a GP, NHS website) and recognise that social media is not a reliable source. 7. Recognise that bodies change at different rates and that media images do not show how most bodies actually look. 8. Articulate that all bodies are worthy of respect. STATUTORY — not withdrawable	DB3 (menstrual cycle) HP1–HP6 (personal hygiene) W3, W4 (feelings about own body) WO9 (reliable sources)	Builds on hygiene routines already embedded daily. Body image conversations supported in SEL and 1:1 with the key adult.	Practical demonstrations of period products useful for all pupils regardless of biological sex.

Y6 consolidates puberty content, introduces the conception and birth NC content, and (optionally) the non-statutory sex education that draws on it. Only the Summer term 1 block is subject to parental withdrawal.

Term / Topic	Must-teach outcomes	PSHE / RSHE codes	Everyday Practice preparatory work	Delivery notes
Autumn	<i>Puberty consolidation and Q&A.</i> 1. Revisit the physical and emotional changes covered in Y5 (especially for any pupil who has started puberty since). 2. Address pupil questions raised during the year (using anonymous question box). 3. Re-identify trusted adults and reliable sources for puberty questions. 4. Reinforce that the rate and order of puberty changes vary widely between individuals. STATUTORY — not withdrawable	DB1, DB2, DB3 (revisit) MW3, MW4 (help-seeking) WO9 (reliable sources)	1:1 key-worker time used for pupil-specific questions raised during term. Family liaison communicates with parents/carers about menstrual support at home.	Lower-stakes lesson — mostly Q&A and clarification.
Spring	<i>Human reproduction and conception — Science National Curriculum content.</i> 1. Describe sexual intercourse, factually, as the means by which a baby is conceived (no explicit detail of sexual activity required). 2. Explain fertilisation: that a sperm from a man's body joins with an egg from a woman's body. 3. Describe the basic stages of pregnancy. 4. Describe birth as part of the human life cycle. 5. Recognise that there are different ways families come to have children: biological parenthood, adoption, fostering, IVF, surrogacy (age-appropriate light touch). 6. Recognise that all family structures — including those with same-sex parents, single parents, kinship carers, foster and adoptive parents — can provide love and care. STATUTORY — not withdrawable	DB1 (NC life cycle and reproduction) F3 (different family structures) H33 (PSHE)	Pupils with care experience, adoption or donor-conception backgrounds supported through 1:1 key-worker time and in-house psychotherapy. Family liaison may flag relevant pupil contexts in advance.	Single explicit factual lesson. Some pupils will have personal connections (adoption, donor conception) needing sensitive 1:1 follow-up.
Summer (term 1)	<i>Optional non-statutory sex education — builds on the Y6 Science conception content.</i> 1. Recognise that sex is something adults choose to do, usually within loving relationships.	F1–F6 (consolidation) BS3 (body autonomy) DB1 extension	Parental consultation completed in advance per DfE guidance. Withdrawn pupils receive purposeful	Parents notified in advance and may withdraw.

Term / Topic	Must-teach outcomes	PSHE / RSHE codes	Everyday Practice preparatory work	Delivery notes
	2. Explain that no one should ever touch their private parts without consent and that under-16s cannot legally consent to sex. 3. Recognise that sex is not the only way to have a baby (links back to adoption, IVF, surrogacy). 4. Recognise that adults have ways to prevent pregnancy (contraception) — mentioned factually without detailed teaching of methods at primary. 5. Identify where to get more information about sex and relationships as they get older (school staff, GP, NHS website). 6. Recognise that these are adult topics and they do not need to act on this information now. WITHDRAWABLE — parents may request withdrawal		alternative provision (statutory responsibility).	Materials shared with parents on request. Headteacher discusses any withdrawal request with parents before granting.
Summer (term 2)	<i>Transition to KS3 — forward-looking, Q&A.</i> 1. Recognise that puberty changes will continue through KS3. 2. Recognise that relationships may change in new ways as they get older — including friendships changing, the possibility of romantic feelings, and that these can be towards people of any sex. 3. Anticipate that online life will become more significant and that KS3 will cover online safety in more depth. 4. Identify trusted adults they can talk to in their new KS3 setting. 5. Recognise that some sensitive content at KS3 will be taught in different settings (whole class, small group, 1:1). STATUTORY — not withdrawable	F2 (different relationships) RR4 (diversity) MW3, MW4 (trusted adults) H36 (transitions)	Transition work supported by EHCP review processes and family liaison. 1:1 key adult sequences personal transition support.	Lower-stakes Q&A. Bridge to KS3 PSHE/RSHE provision.

Sequencing and safeguarding considerations

Sequencing principles

- Vocabulary first, content second — Y5 Autumn establishes the anatomical language and consent vocabulary that the rest of the year and Y6 build on.
- Statutory before optional — the non-statutory Y6 sex education block sits last in Y6 so all withdrawable content is bounded and clearly identifiable.
- Aligned to body changes happening in real time — puberty content is taught when most pupils are beginning to experience it (some will be earlier).
- Trauma-informed pacing — the in-house psychotherapist reviews each pupil's readiness before each block; pupils with sexual abuse history have an individually-sequenced 1:1 pathway, not the standard MTP timing.

Safeguarding before, during and after lessons

- DSL pre-briefed at the start of each term about content coming up.
- Key adults briefed before each lesson; available immediately afterwards.
- In-house psychotherapist available same-day for any pupil whose content is activating.
- Standard ground rules used in every lesson: respect, no personal disclosure forced, distancing language ("some people might think..."), question box for anonymous questions.
- Disclosures responded to per safeguarding policy; never closed down in the moment.

Parent communication

- At the start of each academic year, parents receive an overview of the year's RSHE content (statutory and optional) and the dates of each block.
- Materials available on request (statutory requirement).
- For Y6 Summer optional sex education: explicit advance notice + opt-out form sent home; headteacher discusses any withdrawal requests with parents per DfE guidance.
- Withdrawn pupils receive purposeful alternative provision during the block (statutory responsibility).

Coverage checklist

Use this checklist when planning each term to confirm that every must-teach outcome has a planned lesson, resource and evidence record. One row per outcome. Tick when planned (P), delivered (D) and evidenced (E). If a pupil is receiving the content via 1:1 work rather than whole-group, mark 1:1 in the evidence column.

Year	Term	#	Must-teach outcome	Status	Evidence ref / 1:1
Y5	Autumn	1	Use the correct anatomical names for body parts: penis, vulva, vagina, testicles, scrotum, nipples.	P / D / E	
Y5	Autumn	2	Identify which parts of the body are private and explain why.	P / D / E	
Y5	Autumn	3	Explain what consent means in age-appropriate contexts (hugs, photos, sharing personal information).	P / D / E	
Y5	Autumn	4	Use “no”, “stop” and “I don’t want to” language assertively.	P / D / E	
Y5	Autumn	5	Name at least two trusted adults they could go to with a worry, in and outside school.	P / D / E	
Y5	Autumn	6	Recognise that nobody, including adults they know, has the right to touch their private parts without consent.	P / D / E	
Y5	Spring	1	Describe the physical changes that happen to all bodies during puberty: growth spurts, body hair, skin changes (spots), increased sweat, body shape changes.	P / D / E	
Y5	Spring	2	Describe physical changes specific to bodies with male anatomy: voice deepening, erections, wet dreams (presented factually and reassuringly as normal).	P / D / E	
Y5	Spring	3	Describe physical changes specific to bodies with female anatomy: breast development, the start of periods, the basic outline of the menstrual cycle.	P / D / E	
Y5	Spring	4	Explain what a period is, how often it happens, and that it is a normal sign the body is healthy.	P / D / E	
Y5	Spring	5	Recognise that puberty also brings emotional changes: mood swings, new feelings about friendships, the need for more privacy.	P / D / E	
Y5	Spring	6	Understand that puberty can start any time between around 8 and 14 — all of this range is normal.	P / D / E	

Year	Term	#	Must-teach outcome	Status	Evidence ref / 1:1
Y5	Spring	7	Recognise that the rate and order of changes vary between individuals and there is no single "normal" timeline.	P / D / E	
Y5	Spring	8	Identify trusted adults to go to if changes feel worrying or uncomfortable.	P / D / E	
Y5	Summer	1	Identify the main types of period products (pads, tampons, period pants, menstrual cups) and when each might be used.	P / D / E	
Y5	Summer	2	Demonstrate or describe how to use a sanitary pad and where products are kept at school.	P / D / E	
Y5	Summer	3	Explain what to do if a period starts unexpectedly at school.	P / D / E	
Y5	Summer	4	Describe how to track periods using a calendar or app.	P / D / E	
Y5	Summer	5	Describe the personal hygiene routines that become more important during puberty: washing daily, antiperspirant, oral hygiene, hair care.	P / D / E	
Y5	Summer	6	Identify reliable sources of information about puberty (school staff, a GP, NHS website) and recognise that social media is not a reliable source.	P / D / E	
Y5	Summer	7	Recognise that bodies change at different rates and that media images do not show how most bodies actually look.	P / D / E	
Y5	Summer	8	Articulate that all bodies are worthy of respect.	P / D / E	
Y6	Autumn	1	Revisit the physical and emotional changes covered in Y5 (especially for any pupil who has started puberty since).	P / D / E	
Y6	Autumn	2	Address pupil questions raised during the year (using anonymous question box).	P / D / E	
Y6	Autumn	3	Re-identify trusted adults and reliable sources for puberty questions.	P / D / E	
Y6	Autumn	4	Reinforce that the rate and order of puberty changes vary widely between individuals.	P / D / E	
Y6	Spring	1	Describe sexual intercourse, factually, as the means by which a baby is conceived (no explicit detail of sexual activity required).	P / D / E	

Year	Term	#	Must-teach outcome	Status	Evidence ref / 1:1
Y6	Spring	2	Explain fertilisation: that a sperm from a man's body joins with an egg from a woman's body.	P / D / E	
Y6	Spring	3	Describe the basic stages of pregnancy.	P / D / E	
Y6	Spring	4	Describe birth as part of the human life cycle.	P / D / E	
Y6	Spring	5	Recognise that there are different ways families come to have children: biological parenthood, adoption, fostering, IVF, surrogacy (age-appropriate light touch).	P / D / E	
Y6	Spring	6	Recognise that all family structures — including those with same-sex parents, single parents, kinship carers, foster and adoptive parents — can provide love and care.	P / D / E	
Y6	Summer (term 1)	1	Recognise that sex is something adults choose to do, usually within loving relationships.	P / D / E	
Y6	Summer (term 1)	2	Explain that no one should ever touch their private parts without consent and that under-16s cannot legally consent to sex.	P / D / E	
Y6	Summer (term 1)	3	Recognise that sex is not the only way to have a baby (links back to adoption, IVF, surrogacy).	P / D / E	
Y6	Summer (term 1)	4	Recognise that adults have ways to prevent pregnancy (contraception) — mentioned factually without detailed teaching of methods at primary.	P / D / E	
Y6	Summer (term 1)	5	Identify where to get more information about sex and relationships as they get older (school staff, GP, NHS website).	P / D / E	
Y6	Summer (term 1)	6	Recognise that these are adult topics and they do not need to act on this information now.	P / D / E	
Y6	Summer (term 2)	1	Recognise that puberty changes will continue through KS3.	P / D / E	
Y6	Summer (term 2)	2	Recognise that relationships may change in new ways as they get older — including friendships changing, the possibility of romantic feelings, and that these can be towards people of any sex.	P / D / E	

Year	Term	#	Must-teach outcome	Status	Evidence ref / 1:1
Y6	Summer (term 2)	3	Anticipate that online life will become more significant and that KS3 will cover online safety in more depth.	P / D / E	
Y6	Summer (term 2)	4	Identify trusted adults they can talk to in their new KS3 setting.	P / D / E	
Y6	Summer (term 2)	5	Recognise that some sensitive content at KS3 will be taught in different settings (whole class, small group, 1:1).	P / D / E	

Sources and cross-references

- Department for Education (July 2025). Relationships Education, Relationships and Sex Education (RSE) and Health Education — Statutory guidance, effective September 2026.
- PSHE Association (2020, updated 2024). Programme of Study for PSHE Education, Key Stages 1–5.
- Internal: KS2 PSHE Curriculum Mapping (More Than Ed, 2025/26) — the integrated curriculum coverage.
- Internal: Everyday Practice → RSHE 2026 (More Than Ed, April 2026) — the audit of how trauma-informed SEMH practice delivers against the statutory framework. Provides the preparatory work referenced in column 4.
- Internal: KS2 RSHE 2026 Verification Items — the three items requiring wording verification.
- Internal: PSHE & RSHE Policy (April 2026) — the statutory policy, including withdrawal arrangements.
- Suggested teaching resources: NSPCC PANTS; e-Bug; British Red Cross; FPA primary materials.