



**Ravenshall**

all different | all equal | all important

# **Policy Guidance for Pupils Who May Self-harm**

**Reviewed January 2018**

## Introduction

The main aim of this guidance is to provide support for staff working in school supporting children and young people who are either self-harming or at risk of self-harm or suicide. This will ensure a consistent, caring and appropriate response.

The guidance aims to support school staff to feel confident, informed and able to support children and young people most at risk.

The guidance will ensure that staff know whom they should inform, which agency should be contacted and what steps need to be initiated if deliberate self-harm is witnessed or suspected.

This will ensure a coordinated response which includes provision of adequate support for the pupil, other pupils who have witnessed or know about the self-harm, and members of staff who may be experiencing significant shock or distress following a pupil's disclosure or the discovery of self-harm.

The guidance outlines processes for managing self-harm in schools, in a crisis situation and where a pupil is not in immediate need of medical attention or on return to school following a crisis situation.

The guidance outlines best practice and identifies tools, techniques and practical ideas.

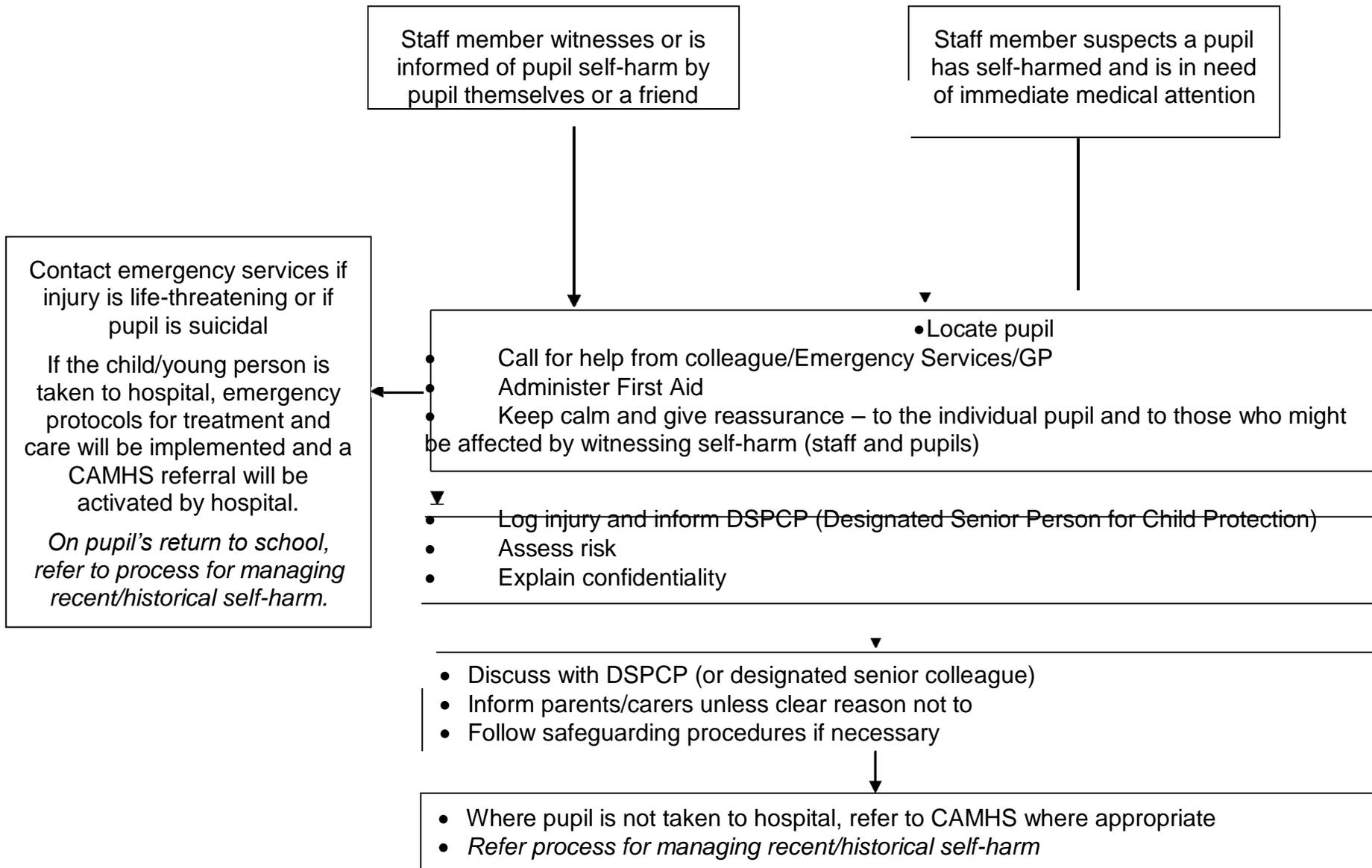
The following principles underpin this policy:

- Duty of care is, as always, paramount.
- The child or young person is central to the whole process and should be given appropriate priority by all involved.
- All school colleagues will adhere to a consistent response to and understanding of self-harm.
- The emotional wellbeing and mental health of the child and young person must be supported and harm minimised.
- The child or young person will be supported to access service(s) which will assist the child or young person with opportunities and strategies for hope and recovery from the effects of self-harming and the risk of future harm minimised.

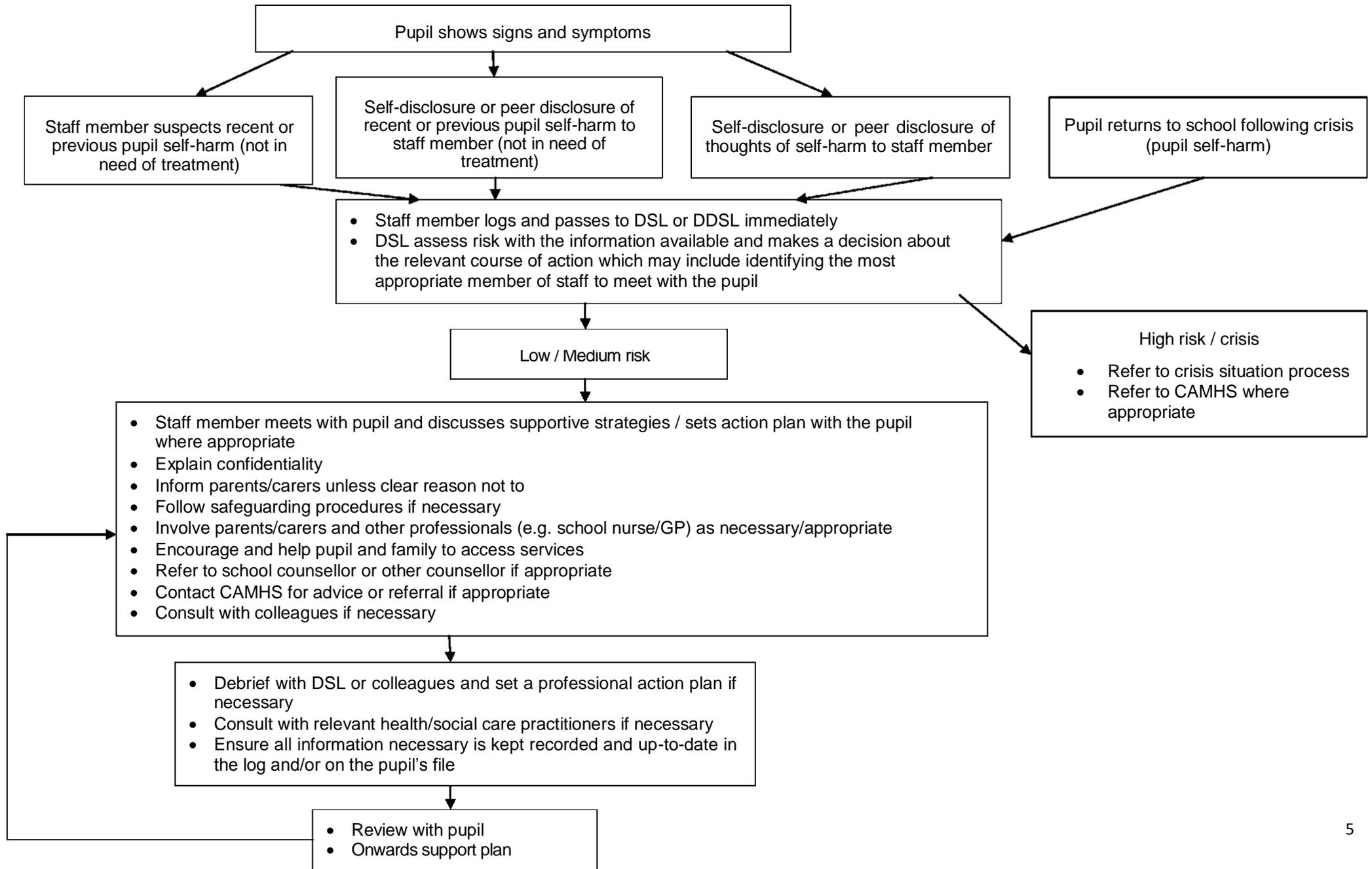


## Flow charts

### Process for managing self-harm in schools in a crisis situation



## Process for managing self-harm in schools (not in need of urgent medical treatment & return to school)



## Multi-agency self-harm guidelines

This policy should be read in conjunction NICE guidelines which may be found here :  
<https://www.nice.org.uk/guidance/cg133>

Self-harm is defined by the National Institute of Clinical Excellence Guidelines (2004) as an “expression of personal distress, usually made in private, by an individual who hurts him or herself”. Essentially, self-harm is any behaviour where the intent is to cause harm to oneself.

The Multi-Agency guidelines are a framework for use by all agencies in Wiltshire who work with children and young people to “promote a safe, timely and effective response to children and young people who harm themselves or are at risk of harming themselves”.

The Multi-Agency guidelines include:

- A definition of self-harm and a non-exhaustive list of behaviours that people might consider to be self-harm
- Information about why some people self-harm
- Signs and symptoms of self-harm
- Strategies for effective listening skills, distraction activities and coping with distress using self-soothing
- A number of appendices including a checklist for schools, sample letter to parents, sample incident form, fact sheets and contact numbers

These guidelines should also be read in conjunction with other relevant guidelines currently in place in your school. Staff should ensure they are aware of school procedures and relevant policies.

## Identifying self-harm

There are several ways in which a staff member might discover that a pupil is self-harming. A staff member may witness or be informed of pupil self-harm by the pupil themselves or a friend. A staff member may suspect a pupil has self-harmed which may be in need of immediate medical attention, or may be recent or historical. A pupil might self-disclose self-harm, recent or previous, or a friend may disclose information. A pupil may disclose thoughts of self-harm or a friend may disclose this.

Signs and symptoms are sometimes absent or easy to miss. It is not uncommon for individuals who self-harm to offer stories which seem implausible or which may explain one, but not all, physical signs. If a pupil says they are not self-harming or evades the question, you can keep the door open by reminding them that you are always available to talk about anything, should they so wish. Try to stay connected to the pupil and look for other opportunities to ask, particularly if there are continuing signs that your suspicion is correct.

Below is a non-exhaustive list of some of the behaviours that some people might consider to be self-harm:

- Scratching or picking skin
- Cutting body
- Tying something around body
- Inserting things into body
- Scouring/scrubbing body excessively
- Hitting, punching self
- Pulling out hair
- Over/under eating
- Excessive drinking of alcohol
- Taking non-prescription drugs
- Burning or scalding body
- Hitting walls with head
- Taking an overdose or swallowing something dangerous
- Self-strangulation
- Risky behaviours such as running into the road

As most self-harm is privately or secretly carried out it can be hard to notice that a young person is self-harming but some signs to look out for are:

- Changes in clothing to cover parts of the body, e.g. wearing long sleeved tops
- Reluctance to participate in previously enjoyed physical activities, particularly those that involve wearing shorts or swimsuits, for example
- Changes in eating and/or sleeping habits
- Changes in consumption of drugs/alcohol
- Changes in levels of activity or mood
- Increasing isolation from friends/family

## Confidentiality

Professionals should adhere to their own school guidelines regarding information sharing and confidentiality. The child/young person must be involved wherever possible and consulted on his/her views.

Professionals should always take age and understanding into account when involving children and young people in discussions and decision making.

There should be clear explanations about what is going to happen and the choice and rationale for certain courses of action.

It is important not to make promises of confidentiality that you cannot keep.

Professionals should tell a child/young person when they may have to share information without their consent.

Information given to professionals by a pupil should not be shared without the child/young person's permission except in exceptional circumstances. Such exceptional circumstances will include:

- A child is not old enough or competent enough to take responsibility for themselves
- Urgent medical treatment is required
- The safety and wellbeing of a child/young person is at risk or there is the possibility of harm to other (i.e. child protection or suicide)
- By virtue of statute or court order
- For the prevention, detection or prosecution of serious crime

If there is reasonable professional concern that a child may be at risk of harm this will always override a requirement to keep information confidential. If a child or young person reveals they are at risk, the practitioner should follow the [KSCB guidelines](#) immediately.

## Assessing risk

There is a need to initiate a prompt assessment of the level of risk self-harm presents.

Unless the pupil is in obvious emotional crisis, kind and calm attention to assuring that all physical wounds are treated should precede additional conversation with the pupil about the non-physical aspects of self-harm. Questions of value in assessing severity might include:

- Where on your body do you typically self-harm?
- What do you typically use to self-harm?
- What do you do to care for the wounds?
- Have you ever hurt yourself more severely than you intended?
- Have your wounds ever become infected?
- Have you ever seen a doctor because you were worried about a wound?

Collecting basic information is also important in determining the need for engagement of outside resources. Questions might include aiming to assess:

- history
- frequency
- types of method use
- triggers
- psychological purpose
- disclosure
- help seeking and support
- past history and current presence of suicidal ideation and/or behaviours

In general pupils are likely to fall into 1 of 2 risk categories:

### Low risk pupils

Pupils with little history of self-harm, a generally manageable amount of stress, and at least some positive coping skills and some external support.

### Higher risk pupils

Pupils with more complicated profiles – those who report frequent or long-standing self-harm practices; who use high lethality methods, and/or who are experiencing chronic internal and external stress with few positive supports or coping skills.

The TAF or Early Help assessment can also be used as a framework to help practitioners assess children and young people's additional needs for services earlier and more effectively.

If the assessor and/or young person agree a referral to CAMHS is needed, a referral should be sent the same day (See page DSL for CAMHS contact details).

## Logging incidents

It is vital to keep a log of all incidents of self-harm, this should be completed on the school's 'Blue form'.

## Supporting the child or young person

“Supporting someone who self-harms can be very difficult and challenging. It can create many feelings, including fear, anger, frustration, helplessness and sadness.

It is very important that people supporting the young person are in turn supported (e.g. by friends, colleagues and managers) to help them to deal with their feelings.

The most important thing is to take the concerns of the young person seriously no matter how petty or frivolous they may appear.”

*Multi Agency Guidelines for Professionals Working with Children and Young People Who Self-Harm, January 2012.*

An information sheet for young people who self-harm is included on the next page along with a list of useful websites and phone numbers on the following page

### Information sheet for young people on self-harm

#### ***What is self-harm?***

Self-harm is where someone does something to deliberately hurt him or herself. This may include: cutting parts of their body, burning, hitting or taking an overdose.

#### ***How many young people self-harm?***

A recent large study in the UK found that about 7% (i.e. 7 people out of every 100) of 15-16 year olds had self-harmed in the last year.

#### ***Why do young people self-harm?***

Self-harm is often a way of trying to cope with painful and confusing feelings. Difficult things that people who self-harm talk about include:

- Feeling sad or feeling worried
- Not feeling very good or confident about themselves
- Being hurt by others: physically, sexually or emotionally
- Feeling under a lot of pressure at school or at home
- Losing someone close; this could include someone dying or leaving

When difficult or stressful things happen in someone’s life, it can trigger self-harm. Upsetting events that might lead to self-harm include:

- Arguments with family or friends
- Break-up of a relationship
- Failing (or thinking you are going to fail) exams
- Being bullied

Often these things build up until the young person feels they cannot cope anymore.

Self-harm can be a way of trying to deal with or escaping from these difficult feelings. It can also be a way of showing other people that something is wrong in their lives.

## ***How can you cope with self-harm?***

Replacing the self-harm with other safer coping strategies can be a positive and more helpful way of dealing with difficult things in your life.

Helpful strategies can include:

- Finding someone to talk to about your feelings (this could be a friend or family member)
- Talking to someone on the phone (you might want to ring a help line)
- Sometimes it can be hard to talk about feelings; writing and drawing about your feelings may help.
- Scribbling on and/or ripping up paper
- Listening to music
- Going for a walk, run or other kinds of exercise
- Getting out of the house and going somewhere where there are other people
- Keeping a diary
- Having a bath/using relaxing oils e.g. lavender
- Hitting a pillow or other soft object
- Watching a favourite film

## **Getting help**

In the longer term it is important that the young person can learn to understand and deal with the causes of the stress that they feel. The support of someone who understands and will listen to you can be very helpful in facing difficult feelings.

- At home - parents, brother/sister or another trusted family member
- In school- school counsellor, school nurse, teacher, teaching assistant or other member of staff
- GP- you can talk to your GP about your difficulties and he/she can make a referral for counseling

## **Useful help lines and websites include: -**

Young Minds                      Tel: 0808 802 5544 [www.youngminds.org.uk](http://www.youngminds.org.uk)

Papyrus HOPELineUK              Tel: 0800 068 414 [www.papyrus-uk.org](http://www.papyrus-uk.org)

The Samaritans                      Tel: 08457 90 90 90 [jo@samaritans.org.uk](mailto:jo@samaritans.org.uk)

MIND Info line                      Tel: 0845 766 0163

National Self Harm Network

PO Box 16190

London NW1 3WW [www.nshn.co.uk](http://www.nshn.co.uk)

## ***My friend has a problem - How can I help?***

- You can really help by just being there, listening and giving support.
- Be open and honest. If you are worried about your friend's safety, you should tell an adult. Let your friend know that you are going to do this and you are doing it because you care about him/her.
- Encourage your friend to get help. You can go with them or tell someone they want to know.
- Get information from telephone help lines, website, library etc. This can help you understand what your friend is experiencing.
- Your friendship may be changed by the problem. You may feel bad that you can't help your friend enough or guilty if you have had to tell other people. These feelings are common and don't mean that you have done something wrong/not done enough.

- Your friend may get angry with you or say you don't understand. It is important to try not to take this personally. Often when people are feeling bad about themselves they get angry with the people they are closest to.
- It can be difficult to look after someone who is having difficulties. It is important for you to find an adult to talk to, who can support you. You may not always be able to be there for your friend and that's OK.

**9.1. More websites and phone numbers (A-Z)**

Tel: Helpline for 15 –24 year old males 0800 58 58 58  
7 days a week 5pm –3am  
Website: [www.thecalmzone.net](http://www.thecalmzone.net)

**Childline** 24 hr helpline 0800 1111

**Health and Wellbeing/Mental Health**

Website: [www.thesite.org/health](http://www.thesite.org/health)

**National Self-Harm Network** (support for individuals who self harm and their families)

PO BOX 16190

London

NW1 3WW

Tel: Helpline Thur-Sat 7pm-11pm, Sun 6.30pm-10.30pm 0800 622 6000

Website: [www.nshn.co.uk](http://www.nshn.co.uk)

**Papyrus** (support young people and those who live with them) Telephone HOPELinkUK  
0800 068 4141

Website: [www.papyrus-uk.org](http://www.papyrus-uk.org)

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**Samaritans** 24 hour helpline 08457 90 90 90

**Young MINDS** 020 7336 8445

102 – 108 Clerkenwell Road

London EC1M 5SA

E-mail [Youngminds@Ukonline.co.uk](mailto:Youngminds@Ukonline.co.uk)

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Website: [www.youngminds.org.uk](http://www.youngminds.org.uk)

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Young MINDS Parents Information Service 0808 802 5544

## Engaging families

Where appropriate, the pupil should be encouraged to call his or her parents to talk about what has happened. The DSL should also talk to the parent/carer. In the event that a pupil is reluctant to contact his or her parents, school staff must take responsibility and alert parents that their child may be at risk of harming him or herself in the future.

It is recommended that the school provides parents with both community and web-based resources for understanding and effectively addressing self-injury.

The school should expect to see a wide range of reactions from parents/carers. Some will respond quickly and favourably, but others may need more time and help in coping with their thoughts and feelings.

*What if parents feel guilty?* Parents may think their child is self-harming because of something that they did or did not do as a parent. If parents seem to be struggling with guilt or frustration, it may be helpful to remind them that they can also get counselling for themselves at this time.

*What if parents are dismissive?* The school's role is to encourage parents to be more responsive to their child's needs.

*What if the parents are cross?* The school's role is to encourage parents to try and understand what their child might be going through, recognize that their child is suffering, and approach their child from a non-judgemental stance.

*How should we deal with parents that have extreme reactions?* The school's role is to gently suggest that the parents seek outside counselling/support services.

*How can we encourage collaboration?* Schools must encourage parents and pupils to see and use school staff as resources.

*What if the parents are absent or unable to act as a resource and advocate for their child?* The school must take the initiative and act as an advocate for the pupil.

Whilst it is important to validate parent's reactions, it is worth remembering that certain parental attitudes towards self-harm can promote, trigger or maintain the behaviour.

## **Fact sheet for parents /carers on self-harm**

It can be difficult to find out that someone you care about is harming him or herself. As a parent / carer you may feel angry, shocked, guilty and upset. These reactions are normal, but what the person you care about really needs, is support from you. They need you to stay calm and to listen to them. The reason someone self-harms is to help them cope with very difficult feelings that build up and which they cannot express. They need to find a less harmful way of coping.

### ***What is self-harm?***

Self-harm is any behaviour such as self-cutting, swallowing objects, taking an overdose, hanging or running in front of cars etc. where the intent is to deliberately cause harm to self.

### ***How common is self-harm?***

Over the last forty years there has been a large increase in the number of young people who harm themselves. A recent large community study found that in 15-16 year olds, there has been a significant increase in the number of young people had self-harmed in the previous year.

### ***Is it just attention seeking?***

Some people who self-harm have a desire to kill themselves. However, there are many other factors which lead people to self-harm, including a desire to escape, to reduce tension, to express hostility, to make someone feel guilty or to increase caring from others. Even if the young person does not intend to commit suicide, self-harming behaviour may express a strong sense of despair and needs to be taken seriously. It is not just attention seeking behaviour.

### ***Why do young people harm themselves?***

All sorts of upsetting events can trigger self-harm. Examples include: arguments with family members, break up of a relationship, failure in exams or bullying at school. Sometimes several stresses occur over a short period of time and one more incident can be the final straw.

Young people who have emotional or behavioural problems or low self-esteem can be particularly at risk from self-harm. Suffering a bereavement or serious rejection can also increase the risk. Sometimes young people try to escape their problems by taking drugs or alcohol. This often only makes the situation worse. For some people self-harm is a desperate attempt to show others that something is wrong in their lives.

### ***What can you do to help?***

Try to:

- Keep an open mind
- Make the time to listen
- Help them find different ways of coping
- Go with them to get the right kind of help as quickly as possible

Some people you can contact for help, advice and support are:

- Your family doctor
- School Health Nurse/Health Visitor
- Young Minds Parents Information Service                      Tel: 0808 802 5544
  
- The Samaritans    Tel: 08457 90 90 90
- MIND Information line    Tel: 0845 766 0163
- Youth Access    Tel: 0208 772 9900

### **CAMHS criteria (primary and specialist)**

The Primary Mental Health Service (CAMHS) offers time limited interventions to address the emotional and mental health needs of children and young people at an early stage with the aim of reducing longer term mental health problems. A first line intervention should have taken place prior to a referral to CAMHS, for e.g. school counselling, health visitor, school nurse.

Specialist CAMHS provides assessment and treatment of serious mental health disturbances and associated risks for children, young people and families where specialist interventions are required. Consideration will be given to presentation of serious mental health concerns and their severity, complexity, duration and pervasiveness,

A Single Point of Access (SPA) CAMHS Referral should be completed for all CAMHS referrals.

