

Loving God - Caring for Each Other - Achieving Excellence Self-Harm Policy

1. Introduction

Recent research indicates that up to one in ten young people in the UK engage in self-harming behaviours, and that this figure is higher amongst specific populations, including young people with special educational needs. This has serious implications for any given classroom situation. School staff can play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm.

- One in six children aged five to 16 were identified as having a probable mental health problem in July 2021, a huge increase from one in nine in 2017. That's five children in every classroom (i).
- The number of A&E attendances by young people aged 18 or under with a recorded diagnosis of a psychiatric condition more than tripled between 2010 and 2018-19 (ii).
- 83% of young people with mental health needs agreed that the coronavirus pandemic had made their mental health worse (iii).
- In 2018-19, 24% of 17-year-olds reported having self-harmed in the previous year, and seven per cent reported having self-harmed with suicidal intent at some point in their lives. 16% reported high levels of psychological distress (iv).
- Suicide was the leading cause of death for males and females aged between five to 34 in 2019 (v).
- Nearly half of 17-19 year-olds with a diagnosable mental health disorder has self-harmed or attempted suicide at some point, rising to 52.7% for young women (vi).

Source: Mental Health Statistics: Young Minds. www. Youngminds.org.uk

2. Scope

This document describes the school's approach to self-harm. This policy is intended as guidance for all staff, including non-teaching staff and governors.

3. **Aims**

- To promote clarity, confidence and consistency in our reaction to self-harm.
- To increase understanding and awareness of self-harm.
- To alert staff to warning signs and risk factors.
- To provide support to staff dealing with students who self-harm.
- To provide support to students who self-harm and their peers and parents/carers.

4. Definition of Self-Harm:

Self-harm, as defined in the NICE guideline, is an expression of personal distress, usually made in private, by an individual who hurts him or herself. The nature and meaning of self-harm, however, vary greatly from person to person.



In addition, the reason a person harms him or herself may be different on each occasion, and should not be presumed to be the same.

NICE: National Institute for Clinical Excellence.



Examples:

- Cutting, scratching, scraping or picking skin.
- Swallowing inedible objects.
- Taking an overdose of prescription or non-prescription drugs.
- Swallowing hazardous materials or substance.
- · Burning or scalding.
- Hair-pulling.
- Banging or hitting the head or other parts of the body.
- Scouring or scrubbing the body excessively.

5. Risk Factors

The following risk factors, particularly in combination, may make a young person particularly vulnerable to self-harm:

Individual Factors:

- Depression/anxiety.
- Poor communication skills.
- Low self-esteem.
- Poor problem-solving skills.
- Hopelessness.
- Impulsivity.
- Drug or alcohol abuse.
- Eating disorder.

Family Factors

- Unreasonable expectations.
- Neglect or physical, sexual or emotional abuse.
- Poor parental relationships and arguments.
- Depression, self-harm or suicide in the family.
- Unemployment.

Social Factors

- Difficulty in making relationships/loneliness.
- Being bullied or rejected by peers.

6. Warning Signs

School staff may become aware of warning signs, which indicate a student is experiencing difficulties that may lead to thoughts of self-harm or suicide. These warning signs should **always** be taken seriously and staff observing any of these warning signs should seek further advice from the appropriate HoY, who will then inform the DSL (Designated Safeguarding Lead) to discuss a pathway of support (see flow chart).

Possible warning signs include:

- Changes in eating/sleeping habits (e.g. student may appear overly tired if not sleeping well).
- Increased isolation from friends or family, becoming socially withdrawn.



- Changes in activity and mood e.g. more aggressive or introverted than usual.
- Lowering of academic achievement.
- Talking or joking about self-harm or suicide.
- Abusing drugs or alcohol.
- Expressing feelings of failure, uselessness or loss of hope.
- Changes in clothing e.g. becoming a 'goth'/'emo'.

7. Staff Roles in Working with Students who Self-harm

Students may choose to confide in a member of school staff if they are concerned about their own welfare, or that of a peer. School staff may experience a range of feelings in response to self-harm, however, in order to offer the best possible help to students it is important to try and maintain a supportive and open attitude – a student, who has chosen to discuss their concerns with a member of school staff is showing a considerable amount of courage and trust.

Students need to be made aware that it may not be possible for staff to offer complete confidentiality. If you consider a student is at serious risk of harming themselves then confidentiality cannot be kept. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Following the report, the HoY will decide on the appropriate course of action. This may include:

- Contacting parents/carers.
- Arranging professional assistance e.g. doctor, nurse, social services.
- Arranging an appointment with a counsellor.
- Immediately removing the student from lessons if their remaining in class is likely to cause further distress to themselves or their peers.
- In the case of an acutely distressed student, the immediate safety of the student is paramount and an adult should remain with the student at all times. Another responsible person should be sent for help.
- If a student has self-harmed in school, a first aider should be called for immediate help.

8. Further Considerations

Children who self-harm require emotional and sometimes medical support. Specialist health care providers such as counsellors can offer targeted advice and specific help. While teachers do not have final responsibility for the care of a child who self-harms, there are ways they can help.

Simply being available, whenever possible, to talk to a child who self-harms can make all the difference, as feelings of isolation are often part of the problem. Work with these students in particular on communication skills, and focus on the following:

 Let them know that self-harm is very common and that individuals who do it are by no means alone.



 Make sure that they know who they can go to in your local area for expert help. Initially offer contact numbers of Childline/ www.youngminds.org.uk

Document APS-SH2020/March 2023 adopted by Admission and Pupil Support Committee
Date 3 rd March 2023
Signed (Chair)J Swift
Print NameJonathan Swift
Date of next reviewMarch 2024



Useful Websites:

Suggested links from the Royal College of Psychiatrists.

 Childline Offers advice and a freephone helpline for young people up to the age of 19:

www.childline.org.uk

• Connecting with People: This site includes free online training material, articles plus clinical practice tools:

www.connectingwithpeople.org

Internet matters Guidance for parents on internet safety:

www.internetmatters.org

• MIND Advice on suicidal feelings and supporting someone else:

www.mind.org.uk/information-support/a-z-mental-health

 MindEd Short (20–30 minutes) online learning sessions to help adults identify mental health problems in children and young people:

www.minded.org.uk

 Mindfull.org A new service for 11- to 17-year-olds that provides support, information and advice about mental health and emotional wellbeing:

www.mindfull.org

NHS Choices

www.nhs.uk/conditions/Self-injury/Pages/Introduction.aspx

 Papyrus A charity to help prevent youth suicide, with website including useful information and publications:

www.papyrus-uk.org

 Samaritans Helps people of all ages in distress, including those who are suicidal, through telephone support:

www.samaritans.org (tel. 08457 90 90 90)

 Selfharm.co.uk A young person friendly site for sharing positive experiences of coping:



http://selfharm.co.uk/home

• TheSite A recovery-oriented website with suggestions of support:

www.thesite.org/healthandwellbeing/mentalhealth/selfharm

• YoungMinds A charity promoting needs for young people with mental health problems, with useful information and resources:

www.youngminds.org.uk/for_children_young_people/ whats_worrying_you/self-harm

 XenZone is a provider of online mental health services for children, young people and adults. Kooth, from XenZone, is an online counselling and emotional well-being platform for children and young people, accessible through mobile, tablet and desktop and free at the point of use.

www.kooth.com

 Place2Be provides mental health counselling support and training to schools to improve the emotional wellbeing of pupils, families, teachers and staff.

www.place2be.org.uk/

• Counselling. At Tameside, **Oldham** and Glossop **Mind** we offer counselling to all residents of Tameside and Glossop aged 16 or over.

www.togmind.org

Ref: http://www.rcpsych.ac.uk/files/pdfversion/CR192.pdf



Flowchart of Good Practice

