

MANAGING SELF-HARM AND SELF- INJURY POLICY



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1. Introduction

There are many reasons why children and young people try to harm or injure themselves, and once they start, it can become a compulsion. This is why it is so important to spot self-injury as soon as possible and do everything you can to help.

Self-injury behaviour is characterised as low-level lethality actions that alter or damage bodily tissue without suicidal intent. It is a morbid form of help-help which provides rapid relief from distressing symptoms such as mounting anxiety, racing thoughts and rapidly fluctuating emotions. It is a way of coping and so whatever the reason, it should be taken seriously.

School staff can play an important role in preventing self-injury and also in supporting students, peers and parents of students currently engaging in self-injury.

2. Scope

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

3. Aims

To increase understanding and awareness of self-injury. To alert staff to warning signs and risk factors. To provide support to staff dealing with students who self-injure. To provide support to students who self-injure and their peers and parents/carers.

4. Definition of Self-Injury

Self-injury is any self-injurious behaviour where the intent is to deliberately cause harm to one's own body without suicidal intent. Examples of self-injurious behaviour are: - Cutting, scratching, scraping or picking skin. - Burning or scalding - Hair-pulling. - Banging or hitting the head or other parts of the body - Scouring or scrubbing the body excessively.

5. Definition of Self-Harm

Self-harm is when somebody intentionally damages or injures their body (NHS 2021) with possible suicidal intent -Examples of self-harming behaviours are: - Strangulation, Cutting, Swallowing inedible objects. - Taking an overdose of prescription or non-prescription drugs. - Swallowing hazardous materials or substances - starvation

6. Risk Factors

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

Individual Factors:

- Depression / anxiety.
- Poor communication skills.
- Low self-esteem.
- Poor problem-solving skills.
- Hopelessness.
- Impulsivity.
- Drug or alcohol abuse/misuse.
- Having additional needs/SEND

Family Factors

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

Social Factors

- Difficulty in making relationships / loneliness.
- Being bullied or rejected by peers.
- Interest in social networking/websites that focus on self-injury, self-harm or suicide

STORM training enables understanding of the full range of risk factors and the level of risk associated with them.

7. Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing difficulties that may lead to thoughts of self-injury or suicide. These warning signs should always be taken seriously and staff observing any of these warning signs should seek further advice from the Designated Safeguarding Lead (DSL) in the school or their Deputy/Deputies (DDSL): Sarah-Jayne Collins (DSL), Cheryl Brake and Claudette Brinkhurst (DDSLs) Ruth Pitt (AHT) and Jane Weatherston (Foundation lead) Our safeguarding Governor is Mrs Claire Prynne.

Possible warning signs include:

- Covering up by wearing long sleeves all the time, especially in the summer
- Unexplained bruises, cuts, burns or bite marks
- 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-injury, self-harm or suicide.
- Abusing drugs or alcohol.
- Expressing feelings of failure, uselessness or loss of hope.
- Changes in appearance & behaviour
- Avoiding friends & family, staying in their room

8. Staff Roles in working with students who self-injure

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-injure in a student such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. 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. Staff will not judge.

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.

Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-injury/harm should consult the Designated Safeguarding Lead (DSL) or their Deputy/Deputies (DDSL): (DDSL): Sarah-Jayne Collins (DSL), Cheryl Brake and Claudette Brinkhurst (DDSLs) Ruth Pitt (AHT) and Jane Weatherston (Foundation lead)

Following the report, the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead will make an assessment of the level of risk and decide on the appropriate course of action. This may include:

- Contacting parents / carers.
- Completing a STORM assessment
- Contacting the relevant statutory agencies e.g. Children, Young People and Families or the Police.
- Arranging other professional assistance e.g. doctor, nurse, etc.
- Consulting with another agency, e.g. CAMHS or the Educational Psychology Service
- 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.

If a student has self-harmed in school a first aider should be called for immediate help.

If a STORM assessment has been completed, the following must happen:

- A written record must be recorded and signed by the assessor
- Information must be shared with DSL/DDSL
- Information must be shared with parent and any other agencies involved
- Information uploaded to CPOMs

9. Further Considerations

Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times.
- An action plan Safety plan as agreed with student
- Concerns raised.
- Details of anyone else who has been informed.
- Notes of supervision or consultation

The above information should be stored on CPOMS. A copy being readily accessible for relevant staff.

It is important to encourage students to let a member of staff know if one of their peers is in trouble, upset or showing signs of self-injury. Friends can worry about betraying confidences so they need to know that self-injury can be very dangerous and that by seeking help and advice for a friend they are taking responsible action & being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

The peer group of a young person who self-injures may value the opportunity to talk to a member of staff either individually or in a small group. Any member of staff wishing for further advice on this should consult the Designated Lead for Safeguarding or their Deputies.

When a young person is self-injuring it is important to be vigilant in case close contacts with the individual are also self-injuring. Occasionally schools discover that a number of students in the same peer group are injuring themselves.

Where a young person has been self-injuring and the protective factors that have been put in place are outweighed by the remaining risks, advice should be sought from the 'Gateway' team in Children, Young People and Families Services to determine whether or not the threshold for formal child protection intervention has been met. The school should also make contact with the CAHMs Crisis Team.

10. Link Documents

See also section 7 within the Child Protection and Safeguarding Policy.

11. Review of Policy

This Policy will be reviewed on a bi-annual basis or in light of updated national/local guidance, whichever is the sooner.

