

Managing self-harm

Practical guidance for schools

November 2014



Children and Families

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Overview

Self-harm in school

Self-harm in school-aged children and young people is a very real issue that all schools need to take seriously. Self-harm is increasingly recognised as an issue schools have to deal with and therefore it is important that all school staff have a general understanding of self-harm, signs to look out for and what to do if they become aware that a pupil is self-harming.

“Self-harm in middle and high school students should not be minimised or dismissed as “attention seeking” or “just a fad”. When people take the radical step of harming their bodies, they should be taken seriously and the sources of their stress addressed.” (Walsh, 2006, p.38).

Aim of this short guide for schools

This document has been developed in response to a request for guidance for schools on self-harm from the Ealing Safeguarding Children Board (ESCB) Education Sub-group and should be read in conjunction with the ESCB Supporting Young People at Risk of Suicide Guidance and Pan London Safeguarding Guidance.

As with bullying policies, all schools should have a self-harm policy. Every establishment is different and the policy you create will be unique to your school in order that it best serves your staff, pupils and parents.

Please use this guidance to help you consider what factors you wish to include in your policy and ways to implement it effectively. It is important that all staff know how to respond to self-harm systematically and strategically, including knowing when to inform a pupil's parent and which teachers are informed.

It also aims to:

- Increase understanding and awareness of self-harm
- Alert staff to warning signs and risk factors
- Provide guidance for staff dealing with students who self-harm
- Help senior leaders consider how to support staff that have to deal with self-harm, ensuring they too can deal with the feelings this evokes.

However, it is not within the scope of this document to go into detail about specific difficulties that may be associated with self-harm, or its links with emotional or mental health concerns such as drug taking or drinking alcohol in excess which require specific interventions.

What is Self-harm?

We all act in ways on occasion that could be considered as harmful to ourselves. Self-harming is when someone chooses to inflict pain on themselves in some way. It includes, but is not limited to cutting, overdosing (self-poisoning), hitting, burning or scalding, pulling hair, picking or scratching skin, self-asphyxiation, ingesting toxic substances, fracturing bones. Some young people harm themselves in less obvious, but still serious ways such as taking drugs, having unsafe sex, or binge drinking. Some simply starve themselves (Royal College of Psychiatrists 2012). It is usually a sign that something is wrong. (Young Minds 2014).

It can feel to other people that these things are done calmly and deliberately – almost clinically. But we know that someone who self-harms is usually in a state of high emotion, distress and unbearable inner turmoil. Some people plan to self-harm in advance, for others, it happens on the spur of the moment. Some people self-harm only once or twice, but others do it regularly - it can be hard to stop.

What self-harm is not

• Attention Seeking

For many children and young people self-harm is a way to communicate emotional distress. Self-harm is a behaviour, and behaviours are a way of communicating feelings. Therefore self-harm is one way of communicating high levels of distress and is often an expression of need for hard-to-manage feelings to be validated and understood. However, like any behavior, self-harm may be used to seek help for unmet needs. It is important to understand what these needs are and how they might be met. It is important to remember that the needs are legitimate; the young person may need to find more functional ways to get them met. It could be that there is a problem at home, an issue of bullying, and they feel no one is listening to them or hearing them.

• Cultural norms

There is not one 'type' of person who self-harms. Some groups are more vulnerable than others but each case is individual. Whilst self-harm may be used to attract attention to unmet needs, self-harm is not about seeking attention per se. It is not a way of fitting in. These sort of prejudices and misconceptions about self-harming behaviour may lead people to believe they 'know' who self-harms and why. However, each person is unique and will have found the practice of self-harm by their own route, and rely on it at times of stress due to the release and relief it offers them.

The reality is that:

- Boys are affected by self-harm as well as girls but are less likely to tell anyone about it
- Self-harm is not attention seeking behaviour or a 'fashion fad'
- It is not easy for a young person to stop self-harming behaviour
- Young people from all walks of life can be affected by self-harm, regardless of their social or ethnic background.

Is there a link between suicide and self-harm?

If a person is self-harming it can be very upsetting. People often think that self-harm is closely linked to suicide, however the vast majority of people who self-harm are not trying to kill themselves. It's their way of coping with difficult feelings and circumstances, and people who self-harm say their behaviour is about trying to stay alive and coping, rather than killing themselves.

It is not always clear from the apparent severity of the self-harm what the intention of the young person is. If you find that someone you know is self-harming, it gives you a real opportunity to help them deal with the underlying problems they are wrestling with. Therefore, it is important that each individual's intent when hurting themselves is explored.

It is possible that some incidents of self-harm may go too far and accidentally end up as suicide. But in essence, the two are very different, with different intended outcomes.

Risk Factors

There are many factors that contribute to the risk of self-harm. Some of the issues most commonly identified include:

- Attempted suicide or self-harm by a family member
- Low self-esteem
- Mental health problems such as depression
- Family conflict (periods in Local Authority care, parental separation)
- On-going family relationship problems
- Family circumstances (parental criminality / poverty / step children / single parents / more than 5 children in the family)
- Past or present physical or sexual abuse
- Family models of self-harm
- Bullying, including cyberbullying and homophobic bullying

(Supporting Children at Risk of Suicide, 2013).

It is important to recognise that none of these risk factors may appear to be present. Sometimes it is the outwardly happy, high achieving person with a seemingly stable background who is suffering internally and hurting themselves in order to cope.

Why children and young people self-harm

Young people can feel they have very little control over their circumstances and this leaves them with limited routes of expressing their frustrations and feelings.

"When I first started self-harming, it helped me through a difficult time in my life. It was so effective at making me feel better, more powerful in a way, and like I didn't need anyone else at all to talk to or to talk to me. I could face down that teacher who kept telling me to take my nose stud out. Anytime anyone upset me at school or at home I always had my little secret friend to help me." Chloe, aged 15 (Childline, 2007).

There are many reasons why a young person may harm themselves. These reasons are best understood by considering the perspective of the child or young person. A young person may self-harm because:

- It is a way of dealing with intense and negative feelings and provides a sense of 'relief' afterwards
- It is a way to communicate distress, especially for young people who lack other routes to express themselves and to have this distress validated
- It is a way to exact 'revenge' or 'punishment' on those close to them when they are left feeling hurt or unable to resolve negative feelings about others
- It can be a way to influence or control others and it may, on occasion be used to elicit affection or confirm love from those close to them.

Young people with limited resources for controlling their environments can use self-harm to influence the feelings and actions of others.

"I don't think they love me. They argue all the time and my dad sometimes hits out at me" Chrissie, aged 14 (Childline 2007).

This can frequently leave professionals and carers feeling manipulated. It is important to remember that self-harm usually communicates something that a child or young person is unable to say through usual means. Understanding this 'communication gone wrong' may go some way to assist in reducing or preventing recurrence.

"I cut myself when I am angry. It hurts, but it helps my anger" Lisa, aged 11 (Childline 2007).

Warning signs

There may be no warning signs, and often people who self-harm go to great lengths to conceal their injuries so it can be hard to know for sure if a person does self-harm.

If you notice any change in a child or young person that concerns you it is important to open up a conversation with that child or young person. If you do not feel able to do this ask an appropriate staff member (consider your Child Protection (CP) Lead where appropriate) and follow your school's safeguarding procedures.

A change in their behaviour, attitudes or presence at school (are they absent or not engaging, which is unlike them) can be significant and should be followed up.

Intervention and response

How should school deal with self-harm?

The school policy must contain the protocol of how to deal with self-harm in school. It will need to include how and when a pupil's parents are informed, which staff are informed and how to support staff dealing with incidents of self-harm.

There needs to be a designated member of staff to manage and co-ordinate the school's response to self-harm. This will usually be the designated CP Lead. However, if a young person self-harms at school and you are the person who finds the young person, you need to consider if you need to take immediate action. Follow the 'Immediate Intervention Flow Chart' (Appendix 2) to assess what action to take.

If you are the CP Lead, staff will refer cases of self-harm to you to deal with. After the initial incident and once you are happy that the young person is safe, both physical and emotionally, you will need to gather more information and plan ongoing support for the young person. Follow the 'Ongoing Support' guidance (Appendix 3) to decide what subsequent action to take.

It is important that all staff are clear what their responsibilities are and who they can/must speak to when self-harm is disclosed or suspected. Therefore both the flow-chart and guidance need to be shared with all staff.

Disclosures and Confidentiality

Pupils must also be aware of the policy and know what to expect if they disclose their self-harm to a teacher or member of staff. Confidentiality will, no doubt, be a key concern for pupils, and they need to know that it will not be possible for their support member of staff to offer complete confidentiality.

It can be very challenging to decide whether to break a young person's confidentiality and disclose self-harm to their parents, or to other important adults in a young person's network. However, a young person who is hurting him or herself is often struggling to manage intense distress without enough support and/or is struggling to communicate this. Very often a reluctant young person can be persuaded to tell (or let you tell) their parents what has been happening. Where this is not the case, there are no hard and fast rules, but **ask yourself the following questions:**

- **Who else can you discuss this incident with?**

Discuss this incident with your CP Lead. However, if you are the CP Lead, make sure that you have access to trusted colleagues who can help you think difficult decisions through. For particularly difficult situations get advice from the LA Child Protection Advisers (Appendix 7). You may also want to consider initiating an EHAP (Early Help Assessment and Plan) if you identify early signs of self-harming behaviour and/or the incident has not met the Ealing safeguarding threshold. (See Appendix 7).

- **Will you put the young person at greater risk by telling their parents?**

If you are concerned about the safety of the young person at any point you must strongly consider discussing with/referring to Ealing Children's Integrated Response Service (ECIRS) (Appendix 7).

- **What is the young person's family situation?**

It is important to remember that if you do disclose, give a young person as much control as possible over the process; for example do they want to tell their parents themselves, do they want to be present when you talk to them? Ensure that you follow up with the young person after this conversation to check the impact of this conversation on the young person.

General advice for school staff dealing with disclosures

- Listen actively to the pupil and try not to show them if you are angry, frustrated or upset. Focus on responding in a non-judgemental way, try to validate their feelings and understand their experience
- Learn about the difference between suicide and self-harm – come to a training session specifically for school staff
- If someone tells you they self-harm it could be a sign that they trust you and are willing to share this very personal problem
- An important part of beginning to manage self-harm effectively is feeling heard. Some people just want to be heard and empathised with. You may need to balance this with gently asking some important questions
- Self-harm is not the only way for people to deal with emotional distress. Try to encourage the pupil to seek alternative coping mechanisms. However, do not expect them to be able to stop self-harming
- If your school has a counsellor you may be able to put the pupil in touch with them as a first step to getting additional support. The school nurse may be another professional who can be a first port of call (Appendix 6)
- It is never a good idea to send the pupil home as they will be in distress and the issue needs to be dealt with sensitively, allowing the pupil time and space to talk and be listened to
- Be aware that social media is sometimes used by young people to enquire about ways to self-harm or to share details or images of their self-harming.

Things to remember

- Anyone from any walk of life or any age can self-harm, including very young children
- Self-harm affects people from all family backgrounds, religions, cultures and demographic groups
- Self-harm affects both males and females
People who self-harm often keep the problem to themselves for a very long time which means opening up to anyone about it can be difficult
- You can't tell someone who self-harms to simply 'stop' – it is not that easy!

Appendix 1

Roles and responsibilities

Head teacher

- In collaboration with the school's Governing body develop and implement a school self-harm policy using the guidance provided
- Ensure staff, parents and pupils are aware of their roles and responsibilities when implementing the policy across the school
- Appoint one or more designated key staff to be responsible for all incidents relating to self-harm. This could be a teacher and / or a school nurse
- Ensure that all designated staff receive full and appropriate training regarding self-harm and are fully confident with the procedures to follow
- Provide practical and emotional support for key staff dealing with self-harm
- Ensure that all staff, including teaching assistants, lab technicians and other non-teaching staff are made aware of, and understand, the self-harm policy.

Governing body

- Provide pupils with open access to information about self-harm and details of who to go to for help and support
- Decide, in collaboration with SLT whether self-harm should be covered in the school PSHE curriculum and/or as an extra-curricular presentation for parents
- Consider parental consent and whether parents / guardians should be invited to learn more about self-harm for themselves
- Review special permissions for pupils who self-harm, for example time out of the classroom during emotional distress and permission to wear long sleeves for sports
- Create a procedural policy in case of self-harm incidents occurring at school
- Could it be made clear to pupils that they should go to a key worker at times of emotional distress rather than resorting to self-harm in school, for example
- Be clear about what behaviour will not be tolerated and ensure all pupils are aware and understand your rules (for example, self-harming in front of other pupils or threats to self-harm as bargaining or manipulation may be deemed unacceptable).

All Staff and Teachers

- Review all duty of care documents and be aware of communication processes
- Make it known to pupils that you are available to listen
- Remain calm and non-judgemental at all times
- Avoid dismissing a pupil's reasons for distress as invalid
- Encourage pupils to be open with you and reassure them that they can get the help they need if they are willing to talk
- Endeavour to enable pupils to feel in control by asking what they would like to happen and what help they feel they need etc
- Do not make promises you can't keep regarding such things as confidentiality
- Encourage all pupils to seek health and happiness in their lives every day
- Discuss and promote healthy coping mechanisms and suggest ways in which pupils can be empowered to make positive changes in their lives
- Provide and encourage access to exterior help and support where possible
- Monitor the reactions of other pupils who know about the self-harm
- Avoid asking a pupil to show you their scars or describe their self-harm
- Avoid telling a pupil to stop self-injuring - you may be removing the only coping mechanism they have
- Report the matter to a designated key member of staff as soon as you become aware of the problem, and inform the pupil that you are doing this.

Designated key staff member(s)

- Ensure the implementation of standard policy, communicate with each other and report back to the head-teacher at each stage
- Maintain up-to-date records of pupils experiencing self-harm, incidents of self-harm and all other concerns surrounding the issue
- Communicate with the head-teacher on a regular basis and keep them informed of all incidents and developments
- Monitor the help, support and progress of the pupils in your care and maintain communication with them

- Ensure you are fully confident in your understanding of self-harm and seek additional information and / or training if you feel it necessary
- Contact other organisations and key services in your area and find out what help and support is available for young people who self-harm – you may want to initiate an EHAP (Ealing’s Early Help Assessment and Plan)
- Liaise with the head-teacher and pupil to decide if any other members of staff who have contact with the pupil should be made aware of the self-harm and underlying concerns
- Ensure that all first-aiders are well informed about self-harm
- Inform the pupil’s parents if appropriate and liaise with them as to how best manage the situation
- Be aware of when it is essential for other professional bodies to be informed, such as social services or educational psychologists, GP, CAMHS (see Appendix 3 and 4)
- Report any mention of suicidal feelings or behaviour as a matter of urgency
- Take care of your own emotional well-being and seek support as and when necessary.

Pupils

- Ensure all wounds are cared for properly and bandaged appropriately
- When talking to teachers or friends about your self-harm, focus on the emotional reasons behind your distress and not just on the self-harm itself
- Avoid talking graphically about your injuries to other pupils or describing the methods you use
- Never encourage anyone to try self-harm themselves
- When under emotional distress or feeling the urge to self-injure at school, talk to a teacher or staff member as soon as possible
- Discuss any additional support you feel you may need while you are going through emotional distress
- Be aware that the teachers and designated self-harm staff are there to help you. The more you can talk to them the better able they will be to give you the support and help you need. However, as with all cases where your safety is at risk and your teacher is concerned in a serious way about your safety or well-being, he or she may have to break your confidentiality for your own safety

- If you are worried that a friend may be self-harming then do talk to a teacher for support and guidance
- If you are concerned that a friend may be suicidal, or has mentioned suicide, then alert a teacher straight away.

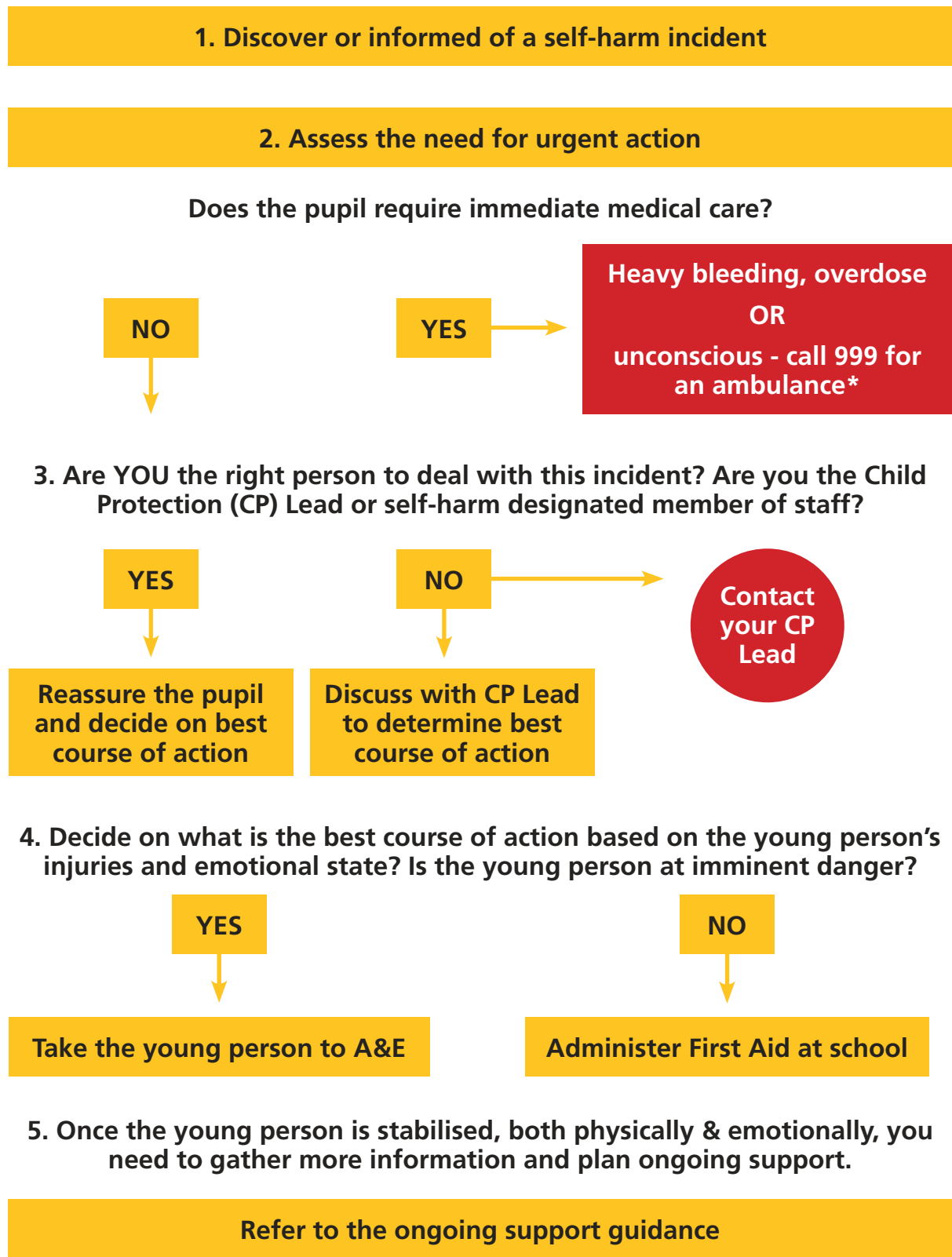
Parents

- Understand and endorse your school’s self-harm policy
- Educate yourself regarding self-harm and discuss the subject with your child
- If your child is self-harming, work closely with the school and take an active role in deciding the best course of action for your child
- Keep the school informed of any incidents outside of school that you feel they should know about
- Take care of yourself and seek any emotional support you may need in dealing with your child’s self-harm.

Appendix 2

Listen, talk to and include the young person throughout the process

Immediate Intervention Flow Chart for _____ School



*NICE guidance suggests all cases of children or young people under the age of 16 that attend A&E after harming themselves should be admitted to a paediatric ward for assessment (WLMHT & Ealing Children's Social Care 2013).

Appendix 3

Ongoing Support Guidance – for CP Lead to follow

It is important to assess the young person at regular intervals as things may change. It is good practice to keep a record of these meetings, and record any information you gather during discussions with the young person and their parents. If other professionals are involved you may want to consider initiating an EHAP (Appendix 7).

To make certain the young person has the opportunity to talk and be taken seriously you may want to use the following series of questions to help you understand the episode and gather essential information to know how best to respond:

1. About the self-harm

- What was used to self-harm?
- When did it take place and where?
- What time of day/night?
- What did the young person do?
- Who was around at the time?
- Who did they tell?
- What did they do?

2. Degree of intent and risk of further self-harm

Along the scale below, what communication was intended by the young person?



- How long has the young person been thinking about harming themselves?
- Was the act impulsive or part of a long standing plan?
- What were they thinking at the time of the event?
- Who know that they were feeling so bad? What would you have wanted them to do?
- What did they expect to happen as a result of the event?

3. What other vulnerabilities affect the self-harming behaviour?

Trauma	family violence, child abuse, bullying
Life events	parent divorce, exams, bereavement
Cultural factors	identity, sexuality, language
Social support	friendship/relationship breakdown, isolation
Family	mental health of parents, domestic violence

4. Who knows about the young person's self-harming behaviour?

- Who knows the pupil has/is self-harming?
- How does the young person feel about this?
- How have parents/carers been engaged?
- What support has been provided to the young person and their parent/carer?

5. What services need to be involved?

- Has a referral been made previously?
 - School nurse – complete and submit a 'Teacher Concern' form
 - GP (can make a CAMHS referral) – complete and send a 'Consent to share information' form to GP (Appendix 6)

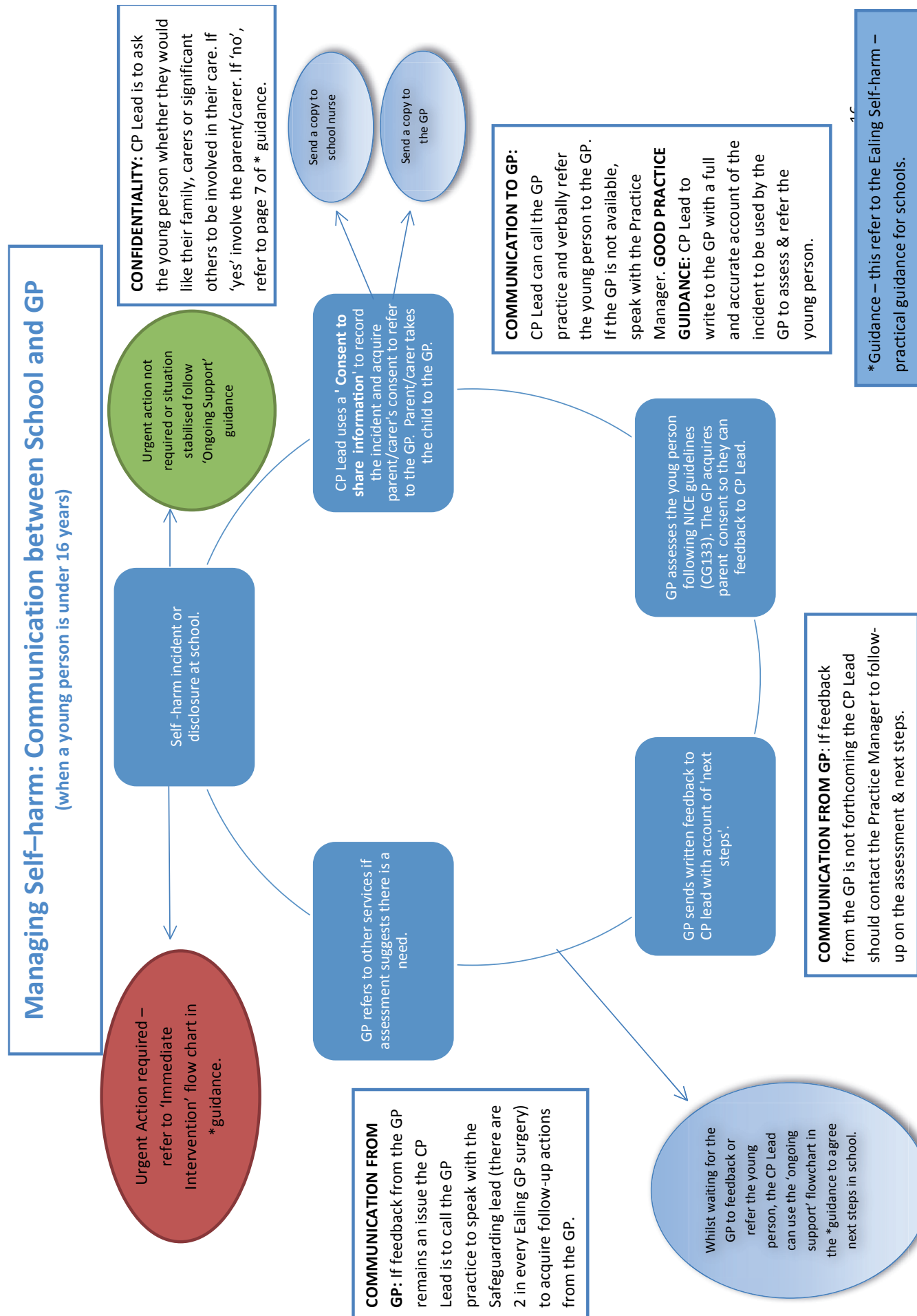
You can use the 'GP and School Communication Cycle' (Appendix 4) to guide discussions with the GP practice to ensure effective sharing of information between the parent, GP and school.

- ECIRS (Ealing Children's Integrated Response Service) - call this service anytime to refer an urgent or non-urgent self-harm incident. They will assess each case and refer accordingly (Appendix 7).

6. Reassess regularly

- Is follow-up required?
 - Follow up with the School Nurse and GP
 - Review where on the 'GP and School Communication Cycle' you are, and what should be done next. (Appendix 4).

Appendix 4



Appendix 5

Key content for your school Self-Harm Policy

- A. Aims/Purpose of the policy
- B. Definitions - what is self-harm/what isn't self-harm?
- C. Risk factors associated with self-harm
- D. Who/what was consulted?
- E. Relationship to other policies:
e.g. link to Child Protection, SEN, social and health education, health and safety, and behaviour policies
- F. Roles and responsibilities of head teacher, other staff, and governors
- G. Implementation methods
- H. Arrangements for monitoring and evaluation
- I. Date established by governing body
- J. Date for full implementation

Appendix 6

Multiagency Referral / Consent to Share Information

Please provide the following details

Date:

School:

Name of Child/Student:

Date of Birth:

Address:

Telephone Number:

Summary of self-harm concerns / input requested:

Please indicate consent for information sharing between professionals:

GP:

Name:

Practice:

Contact details:

School Nurse:

Name:

Contact details:

Other

Name:

Profession:

Contact details:

Name and signature of referrer:

Contact details:

CONSENT:

I consent to information sharing between the professionals named above:

Name:

Relationship to child:

Signature:

Appendix 7

Useful Local Contacts

- Family Information Service (FIS) - to get copies of EHAP (Early Help Assessment and Plan)
020 8825 5588
- Ealing CAMHS
020 8354 8160
- Ealing Children's Integrated Response Service (ECIRS)
020 8825 8000 (24 hour)
- Local Authority Child Protection Advisers
020 8825 8268/9332/9316/6404
- Local Authority Designated Officer (LADO)
020 8825 8930
- Ealing Youth Counselling and Information Service
020 8825 9155
- Ealing School Nursing Service – Duty Desk
 - o Acton/Central Ealing/Hanwell
020 88383 8756
 - o Southall
0203 313 7880
 - o Northolt/Greenford/Perivale
0203 313 7518

