



Fowey Primary School

Self Harm Policy

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1. Aims and Purpose of the Self Harm Policy

The aim of this document is to describe the School's approach to self-harm. This policy is intended as guidance for all staff including non-teaching staff and governors. This policy is designed to work alongside the Academy Child Protection and Safeguarding Policy. Further guidance and support can be found in the Cornwall Managing Self-Harm document.

The aims of the Policy are:

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

2. Definitions of Self Harm

2.1 On occasion, we may all act in ways that could be considered as harmful to ourselves. However, 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.

2.2 Why do young people self-harm

There are many reasons why young people resort to self-harm as a means of managing strong and painful feelings.

The reasons include some of the following factors:

- Some young people have a long history of not knowing how to regulate their own strong feelings – especially those feelings which they find internally threatening, distressing, difficult, overwhelming or shameful. This may be linked to their own family relationships and attachment histories. Self-harm offers a means of regulating emotions, which affords a temporary sense of release, relief and control.
- Linked to the above, some young people did not receive enough parental support in calming and soothing when distressed when they were younger, and this legacy compromises their capacity to manage strong and painful feelings as they develop. This is an increasing problem as they become more independent and are expected to manage their own distressing experiences and feelings.
- Other young people cannot rely on the help and support of friends and family when they are distressed; or they may not know how to communicate their strong feelings to friends and family.
- Some young people feel they have very little control over their circumstances and this leaves them with limited routes of expressing their frustrations and powerful feelings. Self-harm offers these young people a sense of control.
- Self-harm is also linked to other mental health problems in childhood and adolescence, such as anxiety and depression.
- Self-harm is more common among young people who live in families characterised by conflict, domestic violence, parental mental health (including parenting self-harming), and poor attachment histories.

2.3 A young person may self-harm because:

- It is a way of dealing with intense and painful feelings and provides a sense of relief afterwards. The strong feeling of relief (and even power at overcoming pain) may be a powerful driver to repeat self-harming.
- It is a way to communicate their distress, especially for young people who lack other routes to express themselves and to have this distress understood, accepted and attended to.
- It may be a way of exacting retaliation or punishment on those close to them, when they are left feeling hurt or unable to resolve negative feelings about others – especially if they feel that others are responsible for their distress. This process may operate unconsciously.
- It can be a way to influence or control others and it may, on occasion, be used to elicit care, affection or confirm love from those close to them. Young people with limited

resources for controlling their environment can use self-harm to influence the feelings and actions of others.

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

2.4 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 is self-harming. If you notice any change in a child or young person that concerns you, it is important to open up a conversation with that young person. You may notice higher levels of expressed distress, or increasing withdrawal in a young person. You may notice that a young person is wearing long, heavy clothes, even in warm weather, which may be a way of hiding signs of self-harm. If you do not feel able to open up a conversation, then ask an appropriate staff member (consider your Designated Safeguarding Lead, where appropriate) and follow your school's Safeguarding procedures. A change in behaviour, attitudes or attendance at school might be significant and should be followed up. Parents or school staff may identify that a young person's internet activity is a concern (eg accessing self-harm websites or groups). Parents may be the first to pick up on warning signs and they should be encouraged to discuss these with the school.

3. Risk Factors associated with Self Harm

There is not one type of person who self-harms. Some groups are more vulnerable than others but each case is individual. We know that there are factors that contribute to the risk of self-harm (Supporting Children at Risk of Suicide, 2013). These include:

3.1 Risk Factors

- Attempted suicide or self-harm by a family member.
- Low self-esteem; marked relationship difficulties.
- Mental health problems such as depression and anxiety.
- Marked family conflict (periods in Local Authority care, parental conflict, domestic violence, parental mental health problems).
- Ongoing marked family relationship problems.
- Past or present physical or sexual abuse, neglect or trauma.
- Family models of self-harm.
- Bullying, including cyber-bullying and homophobic bullying.
- Children and young people who experience poor emotion regulation, and have ineffective emotional regulation coping strategies. This may be linked to insecure attachment histories.

It is important to recognise that sometimes none of these risk factors may appear to be present. Some young people who harm themselves may appear well and from highly supportive backgrounds; they suffer internally and resort to harming themselves as a means of coping. Sometimes groups of young people influence each other by discussing self-harm – in a kind of contagion of self-harming behaviour. 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 sense of release, control and relief it offers to them.

The reality is that:

- Boys are affected by self-harm as well as girls but are less likely to tell anyone about it.
- It is not always 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.

3.2 Is there a link between suicide and self-harm?

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 – rather they have some hope that by communicating their distress something will be understood and someone will attend to them. It is a way of coping with strong and painful feelings and circumstances. However, it is not always clear from the severity of the self-harm what the intention of the young person is. If you discover that someone 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 you explore with them what their intentions are, and what it is that cannot be tolerated with the support of more healthy coping skills. In rare circumstances, the internal distress becomes so great that self-harming becomes increasingly dangerous and can become a real threat to life; or the way in which the young person harms themselves becomes more dangerous – either by accident or intent. This, of course, requires close monitoring.

4 Relationship of the Self-Harm Policy to other policy documents, in particular Safeguarding procedures and policies; Risk Assessment processes; and Confidentiality

4.1 The Self-Harm Policy is intended to complement the Safeguarding and Children Protection Policy. All procedures and Risk Assessment processes fall under the remit of the School's Safeguarding and Child Protection Policy.

4.2 Confidentiality: Please refer to our Safeguarding and Child Protection Policy in regards to Confidentiality. Pupils must be aware of what to expect if they disclose self-harm to a teacher or member of staff. All members of staff will refer any concerns or disclosure to the Designated Safeguarding Lead through the Safeguarding Referral procedure. Pupils must be made aware of this before a disclosure where possible.

5 Roles and Responsibilities for all Staff

5.1 Head Teacher

Head teachers have a pivotal role to play in developing positive mental health strategies in schools. They recognise the need to develop a whole school awareness of mental health and emotional health issues, including self-harm, and be supported to do so.

- Implement a PSHE programme as part of addressing the young people's emotional wellbeing and mental health needs.
- Support the prioritisation of self-harm training for school staff alongside other mandatory training.

- In collaboration with the school's Governing body and Designated Safeguarding Lead, the Head teacher will develop, implement and review a school self-harm policy using the guidance provided (or delegate this to an appropriate member of staff).
- 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.
- Ensure that all designated staff receive full and appropriate training regarding self-harm and are fully confident with the procedures to follow.
- Ensure that all staff, including teaching assistants and other non-teaching staff are made aware of, and understand, the self-harm policy, and receive training and support as appropriate.
- Ensure that good procedures are in place for record keeping, audit and evaluation of all activities in relation to self-harm in the school.
- Ensure that all staff know where they can access support if required.

5.2 Governing body

The governing body will work with school staff in order to:

- 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 the school senior leadership team, how awareness and understanding of self-harm should be promoted. This includes self-harm being covered in the school PSHE curriculum, extra-curricular presentation for parents, and training for all school staff.
- Consider issues of parental consent and whether parents/carers or guardians should be invited to learn more about self-harm.
- 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.
- Support the development of procedural policy for self-harm incidents occurring at school.
- Be clear about what behaviour cannot be accepted, and ensure that all pupils are aware and understand the guidance (for example, self-harming in front of other pupils or threats to self-harm as bargaining, may be deemed by the school as unacceptable).

5.3 All Staff and Teachers

- Review all self-harm guidance and policy documents, alongside Safeguarding policy documents, and be aware of guidance on communication processes.
- Refer any concerns to the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead through the referral process.
- Discuss an incident or disclosure of self-harm with a designated member of staff as soon as you become aware of the problem, and inform the pupil that you are doing this.
- Make it known to pupils that there are staff available to listen to them (and how they can be accessed).
- Remain calm, respectful, sensitive and non-judgemental at times of pupil distress.
- Do not adopt a dismissive or belittling attitude in relation to the reasons for a pupil's distress.
- Encourage pupils to be open with you and assure them that they can get the help they need, if they are able 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.
- Do not make promises you can't keep, especially regarding issues of confidentiality.
- Monitor the reactions of other pupils who know about the self-harm, and refer on to appropriate staff.
- Do not ask a pupil to show you their scars or describe their self-harm.
- Do not simply tell a pupil to stop self-harming – you may be removing the only coping mechanism they have.

5.4 Designated Self-Harm/Safeguarding Lead

- Ensure the implementation of the Self-Harm Policy, communicate with each other and report back to the Designated Safeguarding Lead at each stage of the process.
- Maintain up to date records of pupils experiencing self-harm, incidents of self-harm and all other concerns surrounding the issue.
- Communicate with the Designated Safeguarding Lead and other key staff, on a regular basis and keep them informed of all incidents and developments.
- Monitor the support provided 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. You may need to reflect upon, and update, your practice in relation to those who self-harm.
- Contact other organisations and key services in your area and find out what help and support is available for young people who self-harm.
- Liaise with the Designated Safeguarding Lead 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. Whenever possible adhere to the 'need to know' principle.
- 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 to best manage the situation.
- Be aware of when it is essential to liaise or share information with other professionals (such as social services, educational psychologists, GP, Primary Mental Health team, CAMHS).
- Respond to any mention of suicidal feelings or behaviour as a matter of urgency (see Appendix 1).
- Take care of your own emotional wellbeing and seek support/supervision as and when necessary.

5.5 Pupils

- Pupils should have access to leaflets and guidance about self-harm, including guidance for young people, which clearly sets out their rights, and what they should expect when they disclose their self-harm to professional staff. These leaflets are available in to download on the School Website.
- If young people are under emotional distress or talk about self-harming at school, encourage them to talk to a staff member as soon as possible.
- Ensure that young people are aware that the teachers and designated self-harm staff are there to help them. 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 wellbeing, he or she may have to break your confidentiality for your own safety.

- If young people are worried that a friend may be self-harming then encourage them to talk to a member of staff for support and guidance.
- Refer to the school website for Leaflet for Young People.

7. Pathways for immediate (including risk assessment) and ongoing response to self-harm

- All concerns and responses to self-harm must go through the Designated Safeguarding Lead and must be referred following the Safeguarding referral forms.
- All risk assessments to be undertaken by or alongside a member of the Safeguarding Team
- All incidents of Self-Harm or concerns raised will be recorded, audited, monitored and evaluated by the Safeguarding Team as per the Safeguarding and Child Protection Policy.
- Signposting for additional support for parents, siblings and peers is provided.
- Overleaf is the Immediate Intervention Flow Chart for Fowey Primary School.

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

1. Discover or informed of a self-harm incident

2. Assess the need for urgent action

Does the pupil require immediate medical care?

NO

YES

Heavy bleeding, overdose
OR
unconscious – call 999 for an ambulance*

3. Are YOU the right person to deal with this incident? Are you the Safeguarding Lead or self-harm designated member of staff?

YES

NO

Contact your
Safeguarding
Lead

Reassure the pupil and
decide on best course of
action

Discuss with Safeguarding
Lead to determine best
course of action

4. Decide on the best course of action based on the young person's injuries and emotional state? Is the young person in imminent danger?

YES

NO

Take the young person to
Accident and Emergency

Administer First Aid at school

5. Once the young person is stabilised, both physically and emotionally, you need to gather more information and plan ongoing support.

Refer to the ongoing support guidance

*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)