



# MANAGING SELF-HARM POLICY

**SUMMER 2025**

# **I. INTRODUCTION**

This Policy describes Discovery MAT schools' approach to self-harm. This policy is intended as guidance for all staff including non-teaching staff and those in a position of governance.

Discovery MAT schools:

- Each have a Helping us Thrive (HUT) with SEN TA's who are emotionally available adults that are available for pupils throughout the day. Interventions may be planned but support can also be on demand.
- Have STORM (Skills Training On Risk Management Children and Young People) trained staff. The STORM definition of self-harm includes self-injury and behaviours with suicidal intent.
- Have access to Mental Health and Trauma Informed practitioners.
- Staff are routinely trained in Trauma informed practices.
- Currently access MAST therapy and EP services.

## **2. AIMS**

This Policy aims to address the issues of self-harm, including:

- Definition of self harm
- Risk factors
- Warning signs
- The role of staff
- Further considerations
- Further support available

## **3. DEFINITION OF SELF-HARM**

- Self-harm is when someone deliberately hurts or injures themselves.
- It is a continuum ranging from a behaviour which has strong suicidal intent to behaviour which is part of a coping mechanism.
- It can be used to describe cutting, scratching, burning, taking overdoses, punching, substance abuse, self-poisoning, unsafe sex etc.

## **4. RISK FACTORS**

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

**Factors preceding self-harm:**

- Mental health issues (for example depression, anxiety etc).

- Physical ill health
- Poor communication skills.
- Low self-esteem.
- Poor problem-solving skills.
- Hopelessness.
- Impulsivity.
- Drug or alcohol abuse/misuse.
- Having additional needs/SEND.
- Trauma/ACE (adverse childhood experiences)
- Neglect or physical, sexual or emotional abuse.
- Poor parental relationships and arguments.
- Depression, self-harm or suicide in the family.
- Difficulty in making relationships / loneliness.
- Being bullied or rejected by peers.
- Interest in social networking/websites that focus on self-harm or suicide

This list is not exhaustive. There are many reasons why a child may choose to self-harm and it is important to remain curious to ensure the preceding factors are understood and the right support is given.

## **5. WARNING SIGNS**

School staff may become aware of warning signs which indicate a pupil 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).

Possible warning signs include:

- Changes in eating / sleeping habits (e.g. pupil may appear overly tired if not sleeping well).
- Increased isolation from friends or family, becoming socially withdrawn.
- Reluctance to participate in previously enjoyed physical activities
- 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 appearance to cover parts of the body (such as wearing long sleeved tops)

## 6. STAFF ROLES IN WORKING WITH PUPILS WHO SELF-HARM

Pupils 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 in a pupil such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. However, to offer the best possible help to pupils it is important to try and maintain a supportive and open attitude – a pupil who has chosen to discuss their concerns with a member of school staff is showing a considerable amount of courage and trust.

Pupils need to be made aware that it may not be possible for staff to offer complete confidentiality. **If you consider a pupil 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 pupil puts pressure on you to do so.

Any member of staff who is aware of a pupil engaging in or suspected to be at risk of engaging in self-harm should consult the DSL or their DDSL.

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

- Contacting parents / carers.
- Contacting the relevant statutory agencies e.g. Gateway, 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 pupil 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 pupil, the immediate safety of the pupil is paramount and an adult should remain with the pupil at all times. If a pupil has self-harmed in school a first aider should be called for immediate help. If a pupil is seriously harmed then they must receive medical support immediately (i.e. a doctor, hospital, ambulance etc).**

## 7. FURTHER CONSIDERATIONS

Any meetings with a pupil, their parents or their peers regarding self-harm should be recorded on Behaviour Watch, under Child Protection, writing the details in the comments section. This must include:

- Dates and times.
- An action plan/risk assessment.
- Concerns raised.
- Details of anyone else who has been informed.
- Notes of supervision or consultation

It is important to encourage pupils to let a member of staff know if one of their peers is in trouble, upset or showing signs of self-harming. Friends can worry about betraying confidences so they need to know that self-harm 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-harms 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 DSL or DDSL.

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

Where a young person has been self-harming and the protective factors that have been put in place are outweighed by the remaining risks, advice should be sought from the 'Gateway' team to determine whether the threshold for formal child protection intervention has been met.

## 8. LINK DOCUMENTS

See also Schools Safeguarding and Child Protection Policy and Mental Health and Wellbeing Policy.

Further information is available from:

- **Childline** - provides a free national helpline for young people, offering confidential advice on a range of problems: 0800 1111
- **LifeSIGNS (Self Injury Guidance and Network Support)** – An online, user-lead voluntary organisation to raise awareness about self-injury and provide information and support to people of all ages affected by self-injury.
- **National Self-Harm Network** – UK charity offering support, advice and advocacy services to people affected by self-harm directly or in a care role.
- **YoungMinds** – provides information and advice on child mental health issues and a parents helpline 0800 802 5544.
- **NHS Direct** – a helpline with health advice provided by NHS nurses: 0845 46 47 =.
- **Samaritans** – a telephone helpline and email service for anyone who is feeling upset, worried or suicidal: 0845 790 9090.
- **School nurses** – schools can also contact and consult with their designated school nurses to consider making a referral to CAMHS.
- **First Response** – provides support 24 hours a day, seven days a week to people of all ages: 01274 221181.