

Document Control

This document is issued, controlled and impact assessed by the Senior Leadership Team.

The latest version of the procedure will be maintained on the School Website.



Purpose

In keeping with our values, vision and aims, this policy aims to address the issue of self-harm:

- How to deal with pupils who self- harm and how to offer support in the short and long-term.
- To provide support depending upon the individual needs of the pupil.
- To help all pupils improve their self-esteem and emotional literacy.
- How to support staff members who come into contact with people who self-injure.
- How to prevent self-harm from spreading within the school.
- To have clear guidelines for staff who needs to be informed, when parents and outside agencies must be contacted.
- Education about self-harm for pupils and staff.

What is self-harm?

Self-harm is any deliberate, non-suicidal behaviour that inflicts physical harm on someone's own body and is aimed at relieving emotional distress. It can include cutting, scratching, burning, banging and bruising, overdosing (without suicidal intent) and deliberate bone-breaking/spraining.

Research indicates that up to one in ten young people in the UK engage in self-harming behaviour (Samaritans) and the ratio is 3:1 girls to boys. The Mental Health Foundation/ Camelot Foundation (2006) suggest that there are "probably two young people in every secondary classroom who have self-harmed at some time". (The Truth about Self-harm, London MHF/CF).

Self-harm is an emotive and challenging issue for all concerned. Self-harm can affect people from all family backgrounds, religions and cultures. School staff can play an important role in preventing self-harm and also in supporting pupils who are engaging in self-harm behaviours, their peers and parents. Self-harm can be a short-term behaviour that is triggered by particular stresses and resolves fairly quickly, or it may be part of a long-term pattern of behaviours that are associated with more serious emotional / mental health issues. School staff should be aware that where there are multiple underlying risk factors the likelihood of further self-harm is greater.

Risk factors associated with self-harm:

- Mental health disorders including depression and eating disorders.
- Drug / alcohol abuse, and other risk-taking behaviour.
- Recent trauma e.g. death of relative, parental divorce.
- Negative thought patterns, and low self-esteem.
- Bullying / Cyber Bullying / Abuse sexual, physical and emotional.
- Sudden changes in behaviour and academic performance.
- Family relationship difficulties (the most common trigger for children and younger adolescents)
- Difficulties with peer relationships, e.g. break-up of relationship (the most common trigger for older adolescents)
- Significant trauma e.g. bereavement, abuse



- Self-harm behaviour in other students (contagion effect)
- Self-harm portrayed or reported in the media
- Difficult times of the year, e.g. anniversaries
- Trouble in school or with agencies such as the police
- Feeling under pressure from families, school or peers to conform / achieve
- Exam pressure

Individual factors:

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

Family factors:

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

Social Factors:

- Difficulty in making relationships / loneliness
- Persistent bullying or peer rejection
- Easy availability of drugs, medication or other methods of self-harm.

Suicide:

While self-harm and suicide are separate, those who self-harm are in emotional distress, and those who end their lives are also in emotional distress. It is vital that all emotional distress is taken seriously to minimise the chances of self-harm, and suicide. All talk of suicide and warning signs must be taken extremely seriously. If a pupil expresses a wish to end their life or has suicidal thoughts the member of staff must:

- Accompany the pupil immediately to speak to the relevant on-site safeguarding lead.
- The safeguarding lead will speak with the pupil about their suicidal thoughts and feelings.
- The safeguarding lead will contact parent / carer to inform them of the situation and ask that
 they collect the pupil and take them up to seek medical advice. If outside agencies are involved
 then the lead professional will be informed.



- At no time should the pupil be left unsupervised and reassurance should be given that support will be put into place for them.
- Upon returning to school, close monitoring strategies should be put into place. Teaching staff should be made aware of the situation.
- It may be that the Hospital will refer the student to the CAHMS team, however this should be checked by the relevant safeguarding lead and if this has not been done a referral should be submitted as soon as possible.

Relationship to other policies

This policy is to be applied and interpreted within the context of the Child Protection, SEND, Social and Health Education, Health and Safety, and Behaviour Policies.

Warning Signs

School staff are often in the best position to witness the warning signs which may indicate a pupil is experiencing difficulties that could lead to thoughts of self-harm or suicide. If staff are able to identify the warning signs, they can also play a key part in helping the pupil to begin the process of breaking the cycle of self-harm.

Possible warning signs include:

- Increased isolation from friends or family, becoming socially withdrawn.
- Lowering of academic achievement.
- Significant changes in appearance, wearing different clothing, changing image
- Accessing information on-line relating to self-harm including forums and YouTube.
- Reluctance to take part in activities when arms / legs would be visible. This can include PE lessons or not removing clothing in hot conditions.
- Changes in eating / sleeping habits (e.g. young person may appear overtly tired if not sleeping well).
- Changes in activity and mood e.g. more aggressive or introverted than usual.
- Talking or joking about self-harm or suicide.
- Abusing drugs or alcohol.
- Expressing feelings of failure, uselessness or loss of hope.
- Displaying evidence of self-harm e.g. cuts to forearms or head banging.

The Cycle of Self-Harm

If a person inflicts pain on themselves, their body produces endorphins. These are natural pain relievers and can give temporary relief from distress and induce a feeling of peace. This can become an addictive sensation which in turn makes it difficult for the person to stop the self-harm behaviours.



Self-harming can cause physical pain, but the person may report that this is easier to manage than the emotional pain which led to the self-harm in the first instance. The cycle also results in the person feeling a sense of shame or guilt.

Within the school setting staff can encourage a pupil who is self - harming to replace the self-harm behaviours with safer / coping activities, issue information on Self-Harm for Young People and refer to the school nurse and/or advise the DSL or their deputy.

Roles and Responsibilities of Head of School, other Staff, and Trustees:

The Head of School will:

- Appoint a designated teacher to be responsible for self-harm matters, and liaise with them. This
 might be the same persons as the child protection managers.
- Ensure that the designated person(s) receive appropriate training about self-harm. Ensure that self-harm policy is followed by all members of staff.

The Trust will:

- Decide whether self-harm education should be in the school curriculum, and how it should be addressed.
- Ensure that education about self-harm neither promotes nor stigmatises.
- Look at provisions for people who self-harm, such as long-sleeved uniforms, and time out of lessons when under intense stress.

All Staff and Teachers are expected to:

- Listen to pupils in emotional distress calmly and in a non-judgemental way.
- Report self-harm to the designated staff member(s) for self-harm.
- Be clear of the timescale in which this is expected.
- Not make promises (e.g. assuring confidentiality) which can't be kept.
- Reassure pupils that in order to seek health and happiness people need to know about their problems so that they can help.
- Guide pupils towards seeking health and happiness.
- Promote problem-solving techniques and non-harmful ways to deal with emotional distress.
- Enable pupils to find places for help and support Provide accurate information about self-harm.
- Widen their own knowledge about self-harm and mental health disorders.
- Be aware of health and safety issues such as first-aid and clearing up if a self-injury incident take place at the Endeavour Academy.
- Be aware of their legal responsibilities when they can help, and when they cannot.

The Designated Staff Member will:

- Keep records of self-injury incidents and all concerns will be logged on CPOMs.
- Follow the procedures in place for a pupil who is expressing suicidal thoughts / feelings.
- Liaise with multi-agencies about help available for people who self-harm.
- Keep up-to-date with information about self-harm.
- Liaise with Head of School and Senior Designated Person for child protection.



- Contact parent and arrange a suitable meeting, involve the pupil in this process.
- Inform the parent(s) about appropriate help and support for their child which is available.
- Monitor the pupil's progress following an incident.
- Know when people other than parents (e.g. social workers, educational psychologists) need to be informed.
- Know when to seek help to deal with their own feelings and distress.

Pupils will be expected to:

- Not bring any dangerous objects in to school which could inflict injury on themselves or others
- Not display open wounds / injuries. These must be dressed appropriately.
- Talk to the appropriate staff member if they are in emotional distress.
- Alert a teacher if they suspect a fellow pupil of being suicidal or at serious risk of harm to themselves, and know when confidentiality must be broken.

Parents will be encouraged to:

- Endorse the school's approach to self-harm education and pastoral care.
- Work in partnership with the Endeavour Academy.
- Work with the agencies involved in order to support the child.

Date for Review – this policy should be reviewed in line with school policy.

Breach of this policy may lead to action being taken under the School's formal Disciplinary Procedure. Any employee, who feels they have been treated in a manner contrary to the spirit of this policy, should seek recourse in accordance with the School's Grievance or Dignity at Work procedures.



Appendix 1:

Dos and Don'ts: Advice for staff

DO

<u>Stay Calm</u> – Do not show anxiety, disapproval or disgust. Be prepared to be shocked and mindful of the possible severity of the incident.

<u>Listen</u> – Just being listened to can be a great support and bring real relief to someone; particularly if they have never spoken to anyone about their self-harming before.

<u>Listen intently</u> – Calmly ask any relevant questions – try and build rapport with the young person, whilst you ascertain what is happening for them, the severity, frequency and duration of the self-harm.

<u>Listening does not just require ears</u> - Observe the young person's non-verbal clues – look at their body language – does what they say and what you see match up? What is the underlying mood state – is it anger? Sadness? Frustration?

<u>Think carefully before you act</u> – What is in the best interest of the young person? Remember that most episodes of self-harm have nothing to do with suicide. However, the easiest way to differentiate between suicide and self-harm is by asking the young person what was their intention behind the self-harm behaviours.

<u>Treat a suicide intention as an emergency</u> – Do not leave the young person alone or in a vulnerable environment – get help and support as soon as possible and remain calm.

DON'T

<u>Panic</u> – Unfortunately many young people self-harm – it is a complex issue and each young person will have a different reason or story behind their behaviour – panicking will not help the young person feel safe and contained.

<u>Send the young person away</u> – make some time for them – either help them find other ways of coping or help them to get the right kind of support.

Be judgemental – keep an open mind about the behaviour and don't refer to it as "attention seeking".

<u>Work Alone:</u> you may still see a young person alone, but you will need to offload with an appropriate staff member or colleague from another agency.

<u>Don't</u> give them your mobile number or house number – or get into texting the young person. It is more appropriate and professional for you to help the young person identify their supportive network, than for you to take this upon yourself. Self-harming behaviours can be extremely concerning, but you cannot offer objective support when enmeshed within the young person's difficulty.



Appendix 2: Useful links and support agencies

MIND: www.mind.org.uk/information-support/types-of-mental-health-problems/self-harm

NSPCC: www.nspcc.org.uk/preventing-abuse/keeping-children-safe/self-harm

Papyrus: www.papyrus-uk.org

YAM: www.y-a-m.org

NHS: www.nhs.uk/conditions/self-harm/getting-help

CAMHS: www.youngminds.org.uk/find-help/your-guide-to-support/guide-to-camhs