



BACKGROUND AND RATIONALE

Governors should ensure they have clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems. (Keeping Children Safe in Education, 2022).

Recent research indicated a sharp rise in the numbers of young people in the UK who engage in self-harming behaviours, and that this figure is higher amongst specific populations, including girls, and young people with special educational needs. Self-harming can be prevalent in friendship groups, and in some social sub-cultures. Specific instances linked to social media apps have also been noted.

A high number of children and young people on the autistic spectrum self-harm.

School staff can play an important role in preventing self-harm and also in supporting students, peers, and parents/carers and families of students who are engaging in self-harm.

This policy has been put in place to ensure that we have a consistent approach from staff who deal with students who self-harm. It is designed so that those students seeking help will feel secure in knowing how we can deal with them, and to give staff a structure for dealing with self-harm. This policy is designed to support all staff.

AIMS OF THE POLICY

As a school we have a responsibility to meet the needs of our students, and it is important that we all know how to best approach the issue of self-harm. This policy aims to:

- To increase understanding and awareness of self-harm
- Alert staff to warning signs and risk factors
- Outline the ways in which we may provide support to students who self-harm, their peers and their parents or carers.

This policy must be read in conjunction with our Child Protection & Safeguarding policy.

SCOPE

The policy applies to all students, staff, parents/carers and families; members of the Governing Body in addition to visiting professionals who work with students at Limpsfield Grange.

DEFINITION OF SELF-HARM

Self-harm is a sign that a young person is experiencing significant emotional distress (see NICE guidelines). Self-harm is any behaviour where the intent is to deliberately cause harm to ones' own body, without causing death. Examples of self-harm can include:

- Cutting scratching scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs
- Swallowing hazardous materials or substances
- Burning or scalding
- Pulling out hair or eyelashes
- Banging or hitting the head or others parts of the body
- Scouring or scrubbing the body excessively
- Biting parts of the body
- Under medicating (insulin)

Self-harm can also be linked to high risk behaviours including:

- Controlled eating patterns such as anorexia, bulimia or overeating
- Indulging in high risk behaviours such as car dodging
- Indulging in high risk sexual behaviours
- Destructive use of alcohol or drugs
- Suicidal ideation or attempts
- Unwanted emotions such as anger and frustration can be reasons for self-harm, which provides an unhealthy but often cathartic release for pent up feelings.
- In the autistic community self-harm can also become a fixed pattern of behaviour, or a way for a young person to show others how they feel.

Some young people plan to self-harm in advance, others do it suddenly. Some young people self-harm only a few times, but others do it regularly, and it can become an entrenched pattern of behaviour.

For many young people self-harming is very private and is a form of release that does not attract the attention of others. It can take place in private, be dealt with in private and then covered up with clothing.

Other terms that are used to describe self-harming are deliberate self-harm; self-inflicted harm; self-injury; deliberate self-injury. It is important within the context of Limpsfield Grange that we use the term self-harm cautiously. Sometimes students within our cohort will engage in sensory seeking behaviours such as skin picking or scratching which are not a form of self-harm.

It is important that staff use calm contained language with the students around these behaviour and that we do not mislabel sensory seeking behaviour as self-harm.

WHAT CAN MAKE A YOUNG PERSON SELF-HARM?

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

Individual factors

- Depression
- Anxiety
- The need for control
- Poor communication skills
- Low self-esteem or self-worth
- Poor problem solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse
- Having a friend who self-harms
- Eating disorders
- Feeling powerless

Family factors

- Unreasonable expectations
- Neglect
- Physical abuse
- Emotional abuse
- Sexual abuse
- Poor parenting
- Family arguments, breakdown or poor family relationships
- Familial depression, self-harm or suicide

Social Factors

- Loneliness or social isolation
- Difficulties in making relationships
- Being bullied
- Rejection by peers
- Feeling under pressure due to school or exams
- Feeling the need to socially conform
- Exposure to self-harm via social media

Self-harming can make the young person concerned feel more in control and can reduce their feelings of tension and distress. If they feel guilty it can be a way of punishing themselves and relieving their guilt. Some young people feel better immediately after self-harming and then feel guilty about what they have done.

POTENTIAL WARNING SIGNS

School staff may become aware of warning signs which indicate that a student is experiencing difficulties that may lead to thoughts of self-harm. These warning signs should always be taken

seriously and staff who observe any of these warning signs must share their concerns with the Designated Safeguarding Lead (or Deputy).

Possible warning signs include:

- Changes in eating or sleeping habits
- Changes in behaviour
- Increased isolation from friends or family, becoming more socially withdrawn
- Changes in activity and mood, for example becoming more aggressive or introverted
- Lower academic achievement
- Talking or joking about self-harm or suicide
- Evidence of abusing alcohol or drugs
- Expressing feelings of failure, uselessness or loss of hope

Those who are most likely to harm themselves badly:

- Use a dangerous or violent method of self-harm
- Self-harm regularly
- Are socially isolated
- Have a psychiatric illness

WHAT CAN I DO IF I KNOW THAT SOMEONE IS SELF-HARMING?

Young people benefit from a non-judgemental approach from a person who is able to listen to them, foster a good relationship with them and encourage them to establish positive relationships with services (Royal College of Psychiatrists).

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 the self-harm such as anger; sadness; shock; disbelief; guilt; hopelessness; disgust and rejection. However, in order to offer the best help a student to it is important for staff to maintain a supportive, professional and open attitude. Students who talk to staff about their self-harm are showing a great deal of courage and trust, and they should be reassured that they will be helped and supported without being judged.

If a young person self-harms in school then a member of the Residential Team must be alerted via the walkie talkie, to administer first aid. The member of staff with the young person should remove any equipment that they consider to be dangerous if possible. They must stay with the young person until the member of the Residential Team arrives, and together the members of staff will make an immediate plan to ensure the young person's safety.

Staff will discuss some or all of the areas below with the student who has self-harmed:

- If they have taken any substances or injured themselves;
- Find out what is troubling them;
- Explore how imminent or likely self-harm might be;
- Find out what help or support the child or young person would wish to have;
- Find out who else may be aware of their feelings.
- How long have they felt like this?
- Are they at risk of harm from others?
- Are they worried about something?
- What have they been doing that helps?
- What are they doing that stops the self-harming behaviour from getting worse?
- What can be done in school or at home to help them with this?
- How are they feeling generally at the moment?
- What needs to happen for them to feel better?

If the self-harm is significant, the DSL or one of the Deputy DSL should be notified immediately either over the walkie talkie or in person. They will assess the level of risk that the young person poses to themselves, and will make a plan for immediate support of the young person.

Where the self-harm causes serious injury or is in the form of an overdose the emergency services must be called and parents informed immediately.

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.

We encourage students who have self-harmed to not display their wounds or injuries and to talk to a member of staff if they are upset or stressed.

If staff are emotionally affected by an incident of self-harm or a disclosure about self-harm, they are encouraged to talk to their line manager so that appropriate support can be provided for them. Staff may also seek further support from counsellors (see VLC's Employee Mental Wellbeing Policy).

RECORDING INCIDENTS OF SELF-HARM

All incidents of self-harming should be reported to the DSL (or Deputy) as a matter of urgency.

It is paramount that students understand that staff have to share information regarding self harm with appropriate people in school. All members of staff must share information about self-harming behaviours with the Designated Safeguarding Lead (DSL) (or Deputy), using a Green Form. A course of action and support will be decided upon and implemented.

Unless the self-harm is linked with problems at home that place the young person at risk of harm, the Designated Safeguarding Lead (or Deputy) will notify the parents/carers of the student who has self-harmed, as well as other professionals as appropriate.

We encourage students to report fellow students if they think they are at risk of self-harming or of suicide by speaking to a member of staff.

We encourage parent carers and families to work in partnership with the school and share any information about their daughter's self-harming behaviours at home and to support the school's policy on self-harm.

USEFUL WEBSITES:

- www.childline.org.uk
- www.youngminds.org.uk
- <https://www.map.uk.net/get-help/mental-health-andwellbeing/>
- <https://www.selfharm.co.uk/>
- www.harmless.org.uk
- <http://epicfriends.co.uk/>
- www.lifesigns.org.uk
- www.recoveryourlife.com

Apps:

- <https://calmharm.co.uk/>
- <http://self-healapp.co.uk/>
- <https://www.nhs.uk/apps-library/distract/>
- <https://www.nhs.uk/apps-library/chill-panda/>
- <https://www.nhs.uk/apps-library/meetwo/>
- <https://www.nhs.uk/apps-library/thrive>
- <http://www.self-healapp.co.uk/>

Helplines

- Local to Surrey CYP Haven www.cyphaven.net
- Extended Hope 01483 517898
- National ChildLine 0800 1111 www.childline.org.uk
- Family Lives 0808 800 2222 www.familylives.org.uk
- Samaritans 116 123 (24/7) www.samaritans.org
- Beat 0808 8010 677 www.beateatingdisorders.org.uk
- NHS 111
- Catch22 08006226662 www.catch-22.org.uk

- Young Minds Crisis Messenger text YM to 85258 (24/7)