

SELF-HARM POLICY

Review: March 2023

Ratified by the Board: March 2023

Authors: JS and SS School Psychologist

Date of next review: June 2025

Table of Contents

1. AIM.....	1
2. DEFINITION	1
3. TYPICAL SELF-HARM BEHAVIOURS: (INFORMATION FROM NHS).....	1
4. WHAT MAKES A YOUNG PERSON VULNERABLE TO SELF-HARM	1
5. REASONS FOR SELF-HARM.....	2
6. POSSIBLE FUTURE PROBLEMS	2
7. PROCEDURES	2
7.1. HOW THE SCHOOL WILL HELP SUPPORT PUPILS WITH SELF-HARM.....	2
7.2. HOW THE SCHOOL WILL RESPOND WHEN A CONCERN IS RAISED	2
7.3. THE RECOMMENDED CHAIN OF ACTION IS AS FOLLOWS:.....	3
8. PREVENTING THE SPREAD OF SELF-HARM WITHIN THE SCHOOL.....	3
9. NAMED CORE TEAM	4
10. SCHOOL POLICY ON CONFIDENTIALITY	4
11. MANAGEMENT OF OTHER RELEVANT CIRCUMSTANCES	4
12. DOCUMENTATION	4
13. STAFF SUPPORT	4
14. ROLES OF RESPONSIBILITY	5
15. IMPLEMENTING AND REVIEWING THE POLICY	5

1. AIM

This Policy sets out clear guidelines on the school's procedures for dealing with those who self-harm whilst the student is in school and is for students, their parents/carers and staff. It is consistent with the school's overall values and aims. The Policy is intended to students, parents/carers and staff.

2. DEFINITION

Self-harm is a term used when someone injures or harms himself or herself on purpose (also called self-injury or deliberate self-harm) rather than by accident. Common examples include cutting, hitting, scratching or burning. Attempted suicide is the most serious form of self-harm.

3. TYPICAL SELF-HARM BEHAVIOURS: (INFORMATION FROM NHS)

- Self-cutting
- Taking an overdose
- Hitting or bruising
- Burning skin
- Keeping themselves covered
- Intentionally taking too little or too much medication
- Hanging
- Suffocation
- Being withdrawn or isolated from friends and family
- Low mood, lack of interest in life or depression
- Blaming themselves for problems or expressing feeling of failure, uselessness, hopelessness or anger

Some injuries caused by self-harm may need medical attention.

4. WHAT MAKES A YOUNG PERSON VULNERABLE TO SELF-HARM

- Depression
- Anxiety
- Low self-esteem
- Hopelessness
- Poor problem-solving
- Impulsivity
- Eating disorders
- Drug or alcohol abuse
- Bullying
- Mental health difficulties in the family
- Poor parental relationships
- Drug/alcohol misuse in the family
- Unreasonable expectations
- Conflict between young person and parents
- Excessive punishments or restrictions
- Family history of self-harm
- Abuse
- Neglect

- Difficulties in peer relationships
- Peer rejection
- Abuse
- Availability of methods of self-harm
- Friends who self-harm
- Media and internet influences

5. REASONS FOR SELF-HARM

Self-harm can serve several different functions:

- to manage extreme emotional upset
- to reduce tension
- to provide a feeling of physical pain to distract from emotional pain
- to express emotions such as hurt, anger or frustration
- a form of escape
- an effort to regain control over feelings or problems
- an attempt to punish themselves or others
- to elicit care from others
- to identify with a peer group
- self-harm can also be a suicide attempt

6. POSSIBLE FUTURE PROBLEMS

- Self-harm can be a serious problem. Repeated self-harm is common following a first episode
- Depending on the method, self-harm can lead to serious physical damage, including permanent scarring, the medical effects of a dangerous overdose, etc.
- Self-harm may be linked to other problems, such as depression, anxiety, eating disorders or drug and alcohol use, for which specific treatment may be required
- Individuals who have self-harmed are at higher risk of suicide than other young people, although the risk is still low

*For these reasons, it is important where possible to tackle self-harming behaviour early.

7. PROCEDURES

7.1. HOW THE SCHOOL WILL HELP SUPPORT PUPILS WITH SELF-HARM

The school will help pupils who self-harm by developing a common understanding through training to inform and educate students, their families and staff. There will be long-term strategies to enhance self-esteem and develop emotional literacy. Students will be made aware of the Policy and who the named staff and student members are if there wish to report a concern. Also, the school will protect students from self-harm by focusing on prevention strategies (e.g., helping students develop healthy coping strategies, connect meaningfully with peers and adults, deal with peer pressure etc). Therefore, students and staff will be offered workshops and training by specialists.

7.2. HOW THE SCHOOL WILL RESPOND WHEN A CONCERN IS RAISED

If a student wishes to disclose that they self-harm the staff member(s) to approach are their teachers, Year Group Leaders, School Psychologist and DSL. These members will record all incidents and discuss

with the student the chain of command.

A similar route will be taken if a friend discloses self-harm.

There will be a time scale for the designated staff member to take the various steps below:

7.3. THE RECOMMENDED CHAIN OF ACTION IS AS FOLLOWS:

- Student is spoken to re concerns (by nominated teacher)
- Parents/carers are informed (and also referred to the school nurse/counsellor/child protection officer)
- Parents/carers are invited to school for a meeting with senior staff
- Parents/carers are recommended to seek consultation with family GP and to inform the school of the outcome within a nominated period of time
- School is given permission by parents to have feedback from the GP
- If no follow up occurs with the GP and the school remains concerned, the school may arrange an appointment with the school doctor/other specialists that may be associated with the school. In situations of extreme concern the school is also able to refer directly to CAMHS
- Follow up meetings are arranged between the parents/carers and senior staff so that progress can be assessed and any targets reviewed
- Nominated staff member from a named core team will act as a link with the student
- Timetable changes such as suspension from lessons that require extent of self-harm to be revealed to the others (for example) PE) are likely to occur
- Any student who self-harms at school may be suspended until they are to contain this behaviour at school
- Disciplinary steps will be taken by school if found with implements that are used to cause self-harm (razors, knives, blades, etc) at school which may include suspension
- Based on medical feedback the suitability of the student's continued attendance at school will be assessed
- Contagion will be managed by staff keeping an eye on the peer group and other potentially vulnerable young people in the year, by continued education on the fact that self-harm is an expression of distress rather than a risk behaviour that should be 'tried out'
- Steps may be taken to ensure that parents of the year group are informed (without naming) and that they monitor their children
- In the case of self-harm with suicidal intent immediate steps will be taken to inform the child protection officer, the parents and the GP and the student's attendance to school will only be permitted after medical feedback and continued support established.

8. PREVENTING THE SPREAD OF SELF-HARM WITHIN THE SCHOOL

To prevent the spread.

- Wounds, injuries, and scars should not be openly displayed
- Provision of long-sleeved PE kits may be necessary for those who self-harm.
- The designated staff member will try and identify 'high status' peers who may be self-harming and offer them support and similar restrictions as above.
- The school will be clear about how it would deal with any incident of self-harm that occurred in school. This includes a clear statement about what action will be taken if an implement of self-harm is brought into the school, a student is known to have harmed or where the student may be deliberately coercing others. A general rule will be to ban self-harm from occurring in school

with the issue of a warning followed by suspension of a student's attendance from school should self-harm continue.

9. NAMED CORE TEAM

Names and roles of people involved may be listed. The team will be based on appropriate experience, seniority and training. Pupils will be informed as to whom to approach.

Junior School	Senior School
Designate Safeguarding Lead (DSL): Naomi Theocharides	Designate Safeguarding Lead (DSL): Yiannis Georgiou
Mental Health Lead: Nasia Joseph	Mental Health Lead: Artemis Theofanous
School nurse: Anastasia Polycarpou	School nurse: Katerina Kastana
Pastoral lead:	Pastoral lead: Yiannis Georgiou
CPD lead: Eleni Kallitsi	CPD lead: Eleni Kallitsi
School psychologist: Nasia Joseph	School psychologist: Artemis Theofanous
SENCO: Maria Carneiro Leao	SENCO: Marina Pittas

10. SCHOOL POLICY ON CONFIDENTIALITY

Our school Policy will inform parents/carers if we feel that a pupil is at risk to themselves or to others. We will inform the pupil that the information will be passed on and about the content of the information.

The school may, in the first instance, encourage the pupil to tell their parents/carers or with the support of a member of the core team. The school may also need to pass on the information to some of the staff. The pupil and their parents/carers will be informed and the reasons why such staff need to know.

If concerns about a pupil have been raised by a friend/s, it should be decided with the pupil what feedback is given to the friends about the action the school will be taking on their behalf. The school will also make sure that any friends presenting needs will be supported. In the case of friends presenting with concerns their parents may need informing and again the need to know Policy in terms of confidentiality will be used.

11. MANAGEMENT OF OTHER RELEVANT CIRCUMSTANCES

The school will consider managing the return of a pupil to school after a period of in-patient treatment or period of time off school in a way that is as supportive to the individual student but also supportive of the rest of the pupils.

12. DOCUMENTATION

A complete record of all incidents, course of actions and dates will be made.

13. STAFF SUPPORT

The designated staff member will have a duty to keep up to date with information regarding self-harm and forms of support available. Staff who have been involved with a pupil who self-harms may need support and will be offered this opportunity through a number agreed ways with the school. These

may include discussion with another experienced staff member, [stem4 teacher support](#), counselling.

14. ROLES OF RESPONSIBILITY

The Head Teacher has a responsibility to appoint a designated member of staff for dealing with incidents of self-harm (this is often the DSL). The head teacher and governing body should ensure the Policy is in place, communicated to staff and implemented. Staff at all levels and pastoral leaders should be offered training and updated on the Policy.

15. IMPLEMENTING AND REVIEWING THE POLICY

Parents, students and staff should all be aware there is a Policy and of its content. Parents and carers should work in partnership with school to support students who self-harm. Students need to be aware that they can be confident any disclosure of sensitive information will be supported and dealt with efficiently and sensitively. The Policy should be reviewed and reference to other policies, whether they be other mental health issues such as eating disorders or policies such as child protection, behaviour, health and safety and special educational needs available as reference.

END