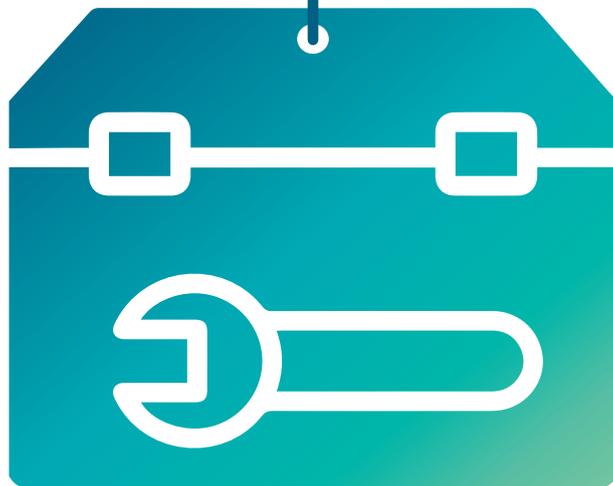


# Self-Harm

A MANAGEMENT TOOLKIT FOR  
EDUCATIONAL SETTINGS

2020



Children &  
Young People's  
Emotional  
Wellbeing Plan

2020

Health and Wellbeing  
**SUFFOLK**



 **Suffolk**  
County Council

# — Contents —

**1**

**Aim of the toolkit 3**

**2**

**What is self-harm? 4**

**3**

**Why do people self-harm and who is likely to be at risk? 5**

**4**

**Spotting the signs 7**

**5**

**Responding to an incident/  
suspected incident of  
self-harm**

- a) Assessing risk **9**
- b) Pathway of recommended actions **11**
- c) Confidentiality **13**
- d) Talking to children or young people who are self-harming - some conversation prompts **14**
- e) Dos and don'ts for talking to young people about self-harm **16**
- f) Talking to children or young people who are self-harming - some possible coping strategies **17**



**6**

**Other factors to consider 19**

**7**

**Roles and responsibilities 20**

**8**

**Advice and referrals 22**

**9**

**Useful information  
and contacts 24**

**10**

**Appendices 28**

- 1:** Leaflet for young people about self-harm
- 2:** Leaflet for parents and carers about self-harm
- 3:** Template letters for schools to use:
  - A) Template letter to parents following self-harm meeting
  - B) Template self-harm incident recording form
- 4:** What we know about self-harm in Suffolk: Healthwatch report
- 5:** Risk Management template



# 1

## Aim of the toolkit

**This toolkit is to support those working with school-age children and young people under 18 in educational settings and aims to:**

- Increase understanding and awareness of self-harm
- Support staff in being aware of risk factors and signs that are associated with self-harm
- Provide a toolkit for educational settings (and staff within them) for responding to students who self-harm
- Raise awareness in educational settings of what support is available locally in responding to self-harm, and when/how it can be accessed

**This toolkit has been developed by Suffolk schools, young people, Suffolk Parent Carer Network and other partners. We would like to thank and acknowledge Essex County Council for their generosity in sharing their original material to be adapted for Suffolk.**

The focus of this toolkit is to help you identify the sign of self-harm and how to respond to it as well as raising awareness of self-harm. Preventing self-harm occurring through promoting emotional health and wellbeing in educational settings is a key priority, but is not covered within the scope of this toolkit. This toolkit includes information about responding to self-harm, however, as usual, in the event of a medical emergency, call 999.

# 2

## What is self-harm?

The term "self-harm" is used to describe a wide range of behaviours. Self-harm is often understood to be a physical response to emotional pain. Some of the well-known forms of self-harm include scratching, cutting, burning or pinching, but there are many forms of self-harm, including abusing drugs and alcohol or struggling with an eating disorder<sup>1</sup>. Some people use the same type of self-harm all the time, others hurt themselves in a variety of ways at different times.<sup>2</sup> It's usually a way of coping with or expressing overwhelming emotional distress. Although some people who self-harm are at a higher risk of suicide, many people who self-harm don't want to end their lives<sup>3</sup>.



1. SelfHarm UK The facts: What is self-harm? Available online at <https://www.selfharm.co.uk/get-information/the-facts/what-is-self-harm> (accessed 2nd June 2020)
2. MIND. Self harm available online From <https://www.mind.org.uk/information-support/types-of-mental-health-problems/self-harm/about-self-harm/> (accessed 2nd June 2020)
3. NHS choices. Self Harm available online From <https://www.nhs.uk/conditions/self-harm/> (accessed 2nd June 2020)

# 3

## Why do people self-harm and who is at risk?

There are a range of different reasons why people self-harm. Some common reasons include:

### To deal with distressing experiences and difficult emotions.

Young people may use self-harm as a way of coping with distressing thoughts or emotions. Self-harm can occur at times when they feel overwhelmed, exposed, anxious, stressed, angry, unable to cope and/or unable to express themselves. Self-harm can lead to feelings of relief, calmness and of being in control. Some young people also self-harm to deal with feeling unreal, numb, isolated, or disconnected. Self-harm in these circumstances may lead to feelings of being more real, more alive, functioning and able to cope in the short term. Some young people may self-harm because physical pain seems more real and therefore easier to deal with than emotional pain.

### To keep people away.

Some young people self-harm with the intention of making themselves unattractive to others or to prevent others from getting close.

### To enlist help or concern.

For some young people, self-harm is a way of expressing their distress non-verbally. Self-harm should not be assumed to be "attention seeking behaviour" - however superficial it appears. **It is almost always a sign that something is wrong and needs to be taken seriously.** Avoid making judgements or assumptions about why someone has self-harmed.

### Who self-harms?

On the next page you will find some risk factors which may mean young people are more at risk of self-harm, particularly if they have a number of risk factors. Children and young people with fewer protective factors listed may be less at risk of self-harm. However some who self-harm may not have any of these risk factors, and may self-harm despite having protective factors (e.g. supportive adult relationships etc.).

	Risk factors	Protective factors
Characteristics of the individual child	<ul style="list-style-type: none"> <li>• Low self esteem</li> <li>• Poor coping, communication or problem solving skills</li> <li>• Difficult temperament</li> <li>• Mental distress or illness, e.g. anxiety/ depression</li> <li>• Alcohol/substance misuse</li> <li>• Impulsivity</li> <li>• Stress or worries about school work or peers</li> <li>• History of similar behaviour in the past</li> <li>• Past or current experience of abuse</li> <li>• Feeling isolated</li> <li>• Recent bereavement or loss</li> <li>• Worries around sexuality</li> <li>• Gender dysphoria<sup>4</sup></li> <li>• Chronic illness/disability</li> </ul>	<ul style="list-style-type: none"> <li>• High self esteem</li> <li>• Higher ability/attainment</li> <li>• Outgoing personality</li> <li>• Good coping skills</li> <li>• Positive school experience</li> <li>• Secure attachment</li> <li>• Resilience</li> <li>• Knowledge of where to seek support</li> </ul>
Features of the immediate context	<ul style="list-style-type: none"> <li>• Access to means of causing self-harm</li> <li>• Being alone</li> <li>• Social exclusion</li> <li>• Alcohol and drugs</li> </ul>	<ul style="list-style-type: none"> <li>• Access to social support</li> <li>• Social inclusion</li> </ul>
Family Factors	<ul style="list-style-type: none"> <li>• Family members who self-harm</li> <li>• Family conflict</li> <li>• Parental separation and divorce</li> <li>• Single parent family</li> <li>• Parental illness</li> <li>• Parental alcohol/drug misuse</li> <li>• Sexual/physical/emotional abuse or neglect</li> <li>• Poverty/low socio-economic status</li> <li>• Domestic violence</li> <li>• Pressure from family to achieve at school/ unreasonable expectations</li> </ul>	<ul style="list-style-type: none"> <li>• Supportive adult relationship</li> <li>• Harmonious family relationships</li> <li>• Low level of material or social hardship</li> <li>• Good role models within family</li> </ul>
Peer group	<ul style="list-style-type: none"> <li>• Arguments with friends</li> <li>• Bullying</li> <li>• Friends who self-harm</li> <li>• Loneliness/social isolation</li> </ul>	<ul style="list-style-type: none"> <li>• Stable and secure friendship group</li> </ul>
School/college	<ul style="list-style-type: none"> <li>• Pressure to perform well or to work outside ones comfort zone.</li> </ul>	<ul style="list-style-type: none"> <li>• Supportive and understanding adult</li> <li>• Inclusive/incorporative ethos</li> <li>• Strong commitment to PSHE mental health promotion</li> <li>• Establishment of peer support systems</li> </ul>
Wider culture and community	<ul style="list-style-type: none"> <li>• Minority status</li> <li>• Problems in relation to race, culture or religion</li> <li>• Problems regarding sexual orientation or identity</li> <li>• Media portrayals glamorise self-harm or suicide 'victims' and elicit 'copy-cat responses by vulnerable children and young people'</li> </ul>	<ul style="list-style-type: none"> <li>• Community support</li> </ul>

Table adapted from: Hertfordshire Children's Trust Partnership: Self-harm and suicidal behaviour guide for staff working with children and young people, 2010.

4. NHS choices Gender Dysphoria symptoms (last reviewed 12/4/16) available at <http://www.nhs.uk/Conditions/Gender-dysphoria/Pages/Symptoms.aspx> accessed 21/8/2017

# 4

## Spotting the signs of self-harm

**Self-harm may begin in response to a range of issues (see risk factors on page 6), including the below:**

- Family relationship difficulties (the most common trigger for younger adolescents)
- Difficulties with peer relationships e.g. break-up of relationship (the most common trigger for older adolescents)
- Bullying
- Significant trauma e.g. bereavement, abuse (sexual, emotional, physical abuse or neglect)
- Self-harm behaviour in other young people (contagion effect)
- Self-harm portrayed or reported in the media
- Difficult times of the year e.g. anniversaries
- Trouble in school or with the police
- Feeling under pressure from families, school or peers to conform/achieve
- Exam pressure
- Times of change e.g. parental separation/divorce/change in parental care/carers

### Things to look out for:

It may be hard to know if someone is self-harming as there may not be any warning signs. However some changes in behaviour that could occur include:

- Changes in eating/sleeping habits
- Increased isolation from friends/family
- Changes in activity and mood e.g. more aggressive or less engaged than usual
- Lowering of academic grades
- Talking about self-harming or suicide
- Drug or alcohol abuse
- Expressing feelings of failure, uselessness or loss of hope
- Giving away possessions
- Risk taking behaviour (substance misuse, unprotected sexual acts)
- Unusual desire to dress to cover the body

Of note, the relevance of individual signs and risk factors may vary according to the age of the child or young person.



# 5 Responding to an incident or suspected incident of self-harm



## — 5a. Assessing Risk —

When working with young people it is essential to develop an understanding of the level of risk that they present to themselves and to remember that this can change over time. It is ok to talk with young people about these issues; it will not make things worse. Developing a trusting and non-judgemental relationship with the child/young person is a good foundation for a more positive outcome.

### Factors that increase the risk<sup>5</sup>:

- Where the child is of primary school age and presents with self-harming behaviour, please consult with the designated safeguarding lead, and consider contacting your Primary Mental Health Worker (PMHW) for advice (see page 22)
- The use of alcohol or drugs when self-harming (this can increase recklessness and impulsiveness)
- Feelings of hopelessness about life (whether it be not caring about themselves or actively wanting to die)
- Methods of self-harm where there is a higher risk of accidental or unanticipated severe harm (e.g. frequent small overdoses may cause long-term harm)
- An increase in the frequency of self-harm or a feeling of having to do more to feel what they perceive to be the benefits<sup>5</sup>

If the child or young person is expressing a wish to die and says they have a plan of what to do they should be seen **urgently by the local emergency department who will access mental health services as appropriate.**

When you are supporting a child or young person who is self-harming, unless they are in obvious emotional crisis, ensuring that any immediate physical wounds are treated (by an appropriate member of staff) then kind and calm attention to the physical aspects and presentations will be required. It will help to have additional conversation with them about the non-physical aspects of self-harm.

### Questions of value in assessing severity of the injury include<sup>6</sup>:

- Where on your body do you typically self-harm?
- What do you typically use to self-harm?
- What do you do to care for your wounds?
- Have your wounds ever become infected?
- Have you ever seen a doctor because you were worried about a wound?<sup>6</sup>

5. Content adapted from: Brown B, Nutt L, Beavis J, Bird K, Moore V. Understanding and responding to children and young people who self-harm A guide for practitioners Cambridgeshire and Peterborough NHS foundation trust (Feb 2009)

6. Adapted from Wiltshire Children and Young People's Trust Model toolkit: Schools responding to incidents of self-harm (2013)

## Where in doubt or if concerned, seek medical attention as appropriate.

In general students are likely to fall into a spectrum of risk:

**Lower risk students:** little history of self-harm, a generally manageable amount of stress, and at least some positive coping skills and some external support

**Higher risk students:** more complicated profiles, report frequent or long-standing self-harm practices, use of high lethality methods, younger age, parental mental health problems and/or students who are experiencing chronic internal or external stress with few positive supports or coping skills.

Key points to be aware of:

- These risk factors and questions serve only as a guide to support staff and are by no means exhaustive. Assessing risk should be in collaboration with the young person and designated safeguarding lead. **Where there is any doubt about risk it is important to discuss with your school's Primary Mental Health Workers (PMHW) for further information (see contact details on page 22)**
- Where a child or parent is unwilling to engage with support services, a referral to the Emotional Wellbeing Hub should be considered, as refusal to engage may constitute a safeguarding issue.
- After assessing immediate risk, gaining further information from the child or young person may take place over a number of conversations and should occur at a pace comfortable for them.
- Remember, If you are concerned that the child or young person has experienced or is at risk of experiencing significant harm then it is necessary to follow your organisation's child protection procedures.

## — 5b. Pathway of — recommended actions



## If you discover or are informed about self-harm/suspected self-harm

1

### Deal with medical requirements

**Actions:**

- Locate student (if have not already)
- Is urgent medical attention required? (E.g. heavy bleeding/ overdose/ unconscious/ suicidal?)
- If urgent medical attention is required, call 999
- Administer first aid where required by appropriately trained personnel. Self-inflicted injuries should be treated with first aid as per the school policy
- Keep calm and be reassuring.

2

### Talk to child/young person and inform designated safeguarding lead

**Actions:**

- Inform school's designated safeguarding lead
- Talk to the child/young person to gather information (see prompt questions and information about talking to children or young people about self-harm on page 15)
- Explain confidentiality (see toolkit on page 13)
- Check with child/young person to see if they have spoken to anyone about their self-harm before e.g. GP/counselling services
- Discuss with child/young person options around speaking to parents (parental involvement should be encouraged unless there is a sound reason not to do so or if to do so would put the child or young person at risk of further harm)
- Where child or young person is known to social care, engage with social worker, though this should not delay next steps if necessary.

3

### Seek guidance from a Primary Mental Health Worker (if required)

**Actions:**

- If required, seek advice from your school's designated Primary Mental Health Worker (PMHW) (see further information on page 22)
- Contact the Emotional Wellbeing Hub helpline on 0345 600 2090, available Monday to Friday, 8am to 7:30pm. (Your designated school PMHW should always be contacted for advice first)
- The out of hours and weekend 24/7 helpline offering immediate support for mental health. The First Response helpline is available on 0808 196 3494.

4

### Continue conversation, log incident and agree next steps

**Actions:**

- Log incident and ensure designated safeguarding lead has been informed (see example incident recording form in Appendix 3)
- Ask child/young person what help they want/what they would find helpful
- Discuss best course of action with child/young person and relevant colleagues (e.g. designated safeguarding lead)
- Be lead by the child/young person and work with them to plan the support they feel they need
- Continue talking to child/young person; it may be useful to share resources for additional support and information with them (see useful contacts list and leaflet below)
- Consider, where appropriate, speaking to the child/young person about what they find helps them cope with difficult emotions (see information about coping strategies on page 17-18)
- Agree any ongoing support that can be offered by the school with the child/young person e.g. follow up appointment(s) or conversation(s)
- Where appropriate, follow safeguarding procedures

## — 5c. Confidentiality and — Information Sharing

- Individuals should be aware of and follow their own school guidelines about information and confidentiality when managing self-harm or suspected self-harm.
- It is important to have a conversation with the child or young person about confidentiality as early as possible as it may affect their help-seeking behaviour.
- This will include making the child or young person aware that where there are concerns about their safety, other people will need to be informed, but that wherever possible they will be made aware of this and their consent will be sought wherever possible too.
- Professionals should always take age and understanding into account when involving children and young people in discussions/decision making. Young people over the age of 16 are usually judged to be able to seek their own medical advice and treatment providing they are competent to do so. However it is best practice to involve parents as much as and wherever possible. Generally speaking, parental involvement should be encouraged unless there is a sound reason not to do so, or if doing so would put the child or young person at risk of further harm. The reasons behind decisions around confidentiality must be clearly documented.
- Safety always takes priority over confidentiality; do not make promises about confidentiality you cannot keep.
- The conversation can consider what actions a child or young person can take to minimise risk e.g. talking to a positive friend, counselling, speaking to a school nurse and/or parent(s)
- There should be a clear explanation about what is going to happen and why, and of the choices available
- Refer to Suffolk Safeguarding Partnership and their guide to self-harm in children and young people which can be found on their website:  
<https://www.suffolkscb.org.uk/safeguarding-topics/self-harm/>

### Ensure transparent communication

It is essential to maintain clear communication with the child or young person throughout all interactions explaining clearly what has been done, who has been told and next steps to be taken, all of which should be decided in collaboration with the child or young person as much as is possible. This should take into consideration the age and understanding of the child or young person.

## — 5d. Talking to children or young people who are self-harming: some conversation points —

Every child or young person is an individual and their experience of self-harm is going to be unique. Talking about self-harm is not easy, however the below prompts give some suggested phrases for guiding the conversation. The language, wording, choice of questions asked and general approach to the conversation may need to be adjusted according to the age and understanding, capacity and special educational needs of the child or young person. For example, an older student may prefer a more direct or upfront approach. The level of detail asked may need to be adjusted according to the individual situation and this may take place across several conversations.



Topic	Possible Prompt Questions
Confidentiality	<ul style="list-style-type: none"> <li>• “I appreciate that you may tell me this in confidence but it is important that I let you know that your safety will always be more important than confidentiality. If I am sufficiently worried that you may be feeling unsafe or at risk of hurting yourself, part of my job is to let other people who can help you know what’s going on. BUT I will always have that discussion with you before and let you know what the options are so that we can make these decisions together”</li> </ul>
Starting the conversation/ establishing rapport	<ul style="list-style-type: none"> <li>• “Let’s see how we can work this out together..... I may not have the skills to give you the help you need, but we can find that help for you together if you would like...”</li> <li>• Use active listening e.g. “Can I just check with you that I have understood that correctly?”</li> </ul>
The nature of the self-harm	<ul style="list-style-type: none"> <li>• “Where on your body do you typically self-harm?”</li> <li>• “What sort of self-harm are you doing...?”</li> <li>• “What are you using to self-harm?”</li> <li>• “Have you ever hurt yourself more than you meant to?”</li> <li>• “What do you do to care for the wounds?”</li> <li>• “Have your wounds ever become infected?”</li> <li>• “Have you ever seen a doctor because you were worried about a wound?”</li> </ul>
Reasons for self-harm	<ul style="list-style-type: none"> <li>• “I wonder if anything specific has happened to make you feel like this or whether there are several things that are going on at the moment?” E.g. peer relationships; bullying; exam pressure; difficulties at home; romantic relationship breakup; substance misuse; abuse.</li> </ul>
Coping strategies and support	<ul style="list-style-type: none"> <li>• “Is there anything that you find helpful to distract you when you feel like self-harming? Perhaps listening to music, playing on your phone, texting a friend, spending time with your family, reading, going for a walk.... etc.”</li> <li>• “I can see that things feel very difficult for you at the moment and I am glad that you have felt able to talk to me. Is there anyone else that you have found helpful to talk to before? Is there anyone else that you think maybe good to talk to? How would you feel about letting them know what’s going on for you at the moment?”</li> <li>• “How could we make things easier for you at school?”</li> <li>• “What feels like it is causing you the most stress at the moment?”</li> <li>• “What do you think would be most helpful?”</li> </ul>
Speaking to parents (where appropriate)	<ul style="list-style-type: none"> <li>• “I understand that it feels really hard to think about telling your parents but I am concerned about your safety and this is important. Would it help if we did this together? Do you have any thoughts about what could make it easier for you to talk to your parents?”</li> </ul>
Ongoing support	<ul style="list-style-type: none"> <li>• “Why don’t we write down what we have agreed as a plan together then you have a copy that you can look at if you need to remind yourself about anything. Sometimes when you are feeling low or really want to self-harm it is difficult to remember the things that you have put in place so this can help remind you.”</li> </ul>

# — 5e. Do's and don'ts —

## for talking to children or young people about self-harm

DO	DON'T
<p>✓ Make time. Talk to the child or young person about their self-harm showing an understanding and empathy towards the behaviour. Talking will not increase the chance that the child or young person will self-harm BUT not talking about it may make them feel unheard or alone</p>	<p>✗ Tell them to stop self-harming or give them an ultimatum</p>
<p>✓ Listen to what is being said and check your understanding, try to get to know exactly what is being communicated (see p11 for examples of conversation prompts under 'starting the conversation')</p>	<p>✗ Do not ignore self-harm however superficial it may seem to you, or assume someone else is already helping them</p>
<p>✓ Respond with concern rather than anxiety or distaste. Keep body language open. Try not to give specific emotional responses</p>	<p>✗ Do not make judgements or promises you can't keep</p>
<p>✓ Be interested in them as a person not just as someone who self-harms</p>	
<p>✓ Find out how they are feeling – are there ups and downs?</p>	
<p>✓ Are there underlying difficulties? e.g. bullying, difficulties in peer relationships, stress from exams, conflict at home</p>	
<p>✓ Ask about coping strategies - when are they most likely to self-harm? What have they found helpful in managing them?</p>	
<p>✓ Ensure that the individual is given the opportunity to direct the conversation, express their thoughts about self-harm and be involved in jointly agreeing plans for keeping safe and for further support</p>	
<p>✓ Act appropriately in line with policy of confidentiality – inform child or young person first before informing others</p>	
<p>✓ The child or young person may wish to have new strategies to manage some of their difficult feelings. Talking to someone or distracting themselves e.g. by listening to music, are common strategies (see page 18 for more information about coping strategies)</p>	
<p>✓ Speak to other agencies or nominated people within the school as appropriate and within the parameters of confidentiality</p>	
<p>✓ Look after yourself - ensure that you have someone to support you and talk things through</p>	

## — 5f. Talking to children or — young people who are self-harming: some possible coping strategies

Replacing self-harm with safer coping strategies can be a helpful way of responding to difficult feelings. Which coping strategies are appropriate for which children/young people are likely to vary by age and personal preference. Talking to the child or young person about what coping strategies work for them may be useful. By coping strategies we are referring to activities or interests, things that they could try that may be helpful in managing their emotions.



Topic	Examples of activities that could be used as coping strategies
<b>Calming/ stress relief/ distraction</b>	<ul style="list-style-type: none"> <li>• Going for a walk, looking at things and listening to sounds</li> <li>• Create something: drawing, writing, music, cooking, sculpture, painting, crafts</li> <li>• Going to a public place, away from the house</li> <li>• Keeping a diary or blog (the child/young person should consider how to protect themselves online)</li> <li>• Stroking or caring for a pet</li> <li>• Watching TV or a feel-good movie</li> <li>• Getting in touch with a friend</li> <li>• Listening to soothing music</li> <li>• Having a relaxing bath</li> <li>• Breathing exercises - Google 'Breathing exercise' to get a 1 minute breathing exercise. Try 5,4,3,2,1 Grounding Technique (<a href="https://www.thesource.me.uk/health/feeling-overwhelmed-or-suicidal">https://www.thesource.me.uk/health/feeling-overwhelmed-or-suicidal</a>) or for younger children visit <a href="https://copingskillsforkids.com">https://copingskillsforkids.com</a></li> <li>• Plan an activity or trip e.g. volunteering, cinema, park</li> <li>• Popping bubble wrap</li> <li>• Having a stress ball or finger fidget toy</li> <li>• Blowing bubbles</li> </ul> <p>The 30 Day What's Up Challenge is a resource for young people in Suffolk. It is 30 simple challenges which includes ideas and activities they can try to support their emotional wellbeing. The challenges are inspired by the 'five ways to wellbeing' which are known to support your emotional health. These are – 'Be Active', 'Give', 'Keep Learning', 'Take Notice' and 'Connect with others'. For further information go to <a href="https://www.thesource.me.uk/whatsup">https://www.thesource.me.uk/whatsup</a></p>
<b>Releasing or managing emotions e.g. aggression and anger</b>	<ul style="list-style-type: none"> <li>• Clenching an ice cube in the hand until it melts</li> <li>• Snapping an elastic band against the wrist</li> <li>• Drawing on the skin with a red pen or red paint instead of cutting</li> <li>• Sports or physical exercise, kick a football against a wall, go for a run.</li> <li>• Using a punch bag/pillows or other soft object</li> <li>• Listening to or creating loud music</li> <li>• Tearing up newspaper</li> <li>• Repetitive counting or writing</li> </ul>
<b>Restlessness</b>	<ul style="list-style-type: none"> <li>• Take some exercise e.g. walking, sports, gardening, bike ride</li> <li>• Sing or shout loudly</li> </ul>

The above coping strategies are compiled from a literature review carried out on this topic and are excerpts based on the following sources:

- Harmless, Coping Strategies, viewed (2017) available at <http://www.harmless.org.uk/ourResources/copingStrategies>
- University of Oxford(2017), Coping with Self-harm: A Guide for Parents and Carers, accessed at [https://www.psych.ox.ac.uk/research/csr/research-projects-1/coping-with-self-harm-brochure\\_final\\_copyright.pdf](https://www.psych.ox.ac.uk/research/csr/research-projects-1/coping-with-self-harm-brochure_final_copyright.pdf) viewed (2017)
- Wester, K. and Trepal, H. (2005), Working With Clients Who Self-Injure: Providing Alternatives, Journal of College Counselling, Vol. 8, Iss. 2, p. 180-189.
- Royal College of Psychiatrist Alternatives to self-harm and distraction techniques: Better services for People who self-harm, available at [www.rcpsych.ac.uk/auditSelfHarm.htm](http://www.rcpsych.ac.uk/auditSelfHarm.htm) (accessed 21/8/17)

# 6 Other factors to consider

## Should we encourage students to cover up visible scars/cuts/burns?

Some teachers may worry about other children/young people being distressed or influenced by another child or young person's scars. The decision whether to cover up scars or not should be led by the child or young person unless covering up is required from a first aid or medical/safety point of view.

## What does 'safe-harm' mean?

Staff may come across the concept of 'safe harm' or 'harm minimisation' where children or young people may have been given advice on how to self-harm in a safer manner eg using clean blades with advice not to share blades.<sup>7</sup> Though this is a recognised concept it should only be introduced to or discussed with the child or young person by an experienced clinician or specialist.

## Ongoing support and documentation

A risk management template has been provided (appendix 5) which includes a guide for documenting the management plan and ongoing support within the school setting. In addition, a template letter to parents following the self-harm meeting and a self-harm incident reporting form has been included as a possible guide for documentation (see appendix 3A and 3B)

7. Self Harm UK Harm minimisation available at [https://www.selfharm.co.uk/get/staying\\_safe/harm\\_minimisation](https://www.selfharm.co.uk/get/staying_safe/harm_minimisation) accessed 16/8/17

## Does this toolkit apply to children and young people with special educational needs and disabilities (SEND)?

Where children or young people with special needs or disability are self-harming the advice in this toolkit will likely need to be adjusted according to the individual. In addition to the possible reasons for self-harm listed earlier, there may be other reasons some children/young people with special educational needs and disability may self-harm. For example, some children/young people with severe learning disabilities may self-harm as a way of expressing pain from an underlying medical problem e.g. pain from an ear infection may be expressed by hitting the ear.

It is difficult to cover the broad range of individual special educational needs and disabilities in this tool kit however generally speaking, where the child/young person with special educational needs and disability is self-harming, staff should consider:

- Informing and seeking advice from the Emotional Wellbeing Hub or Ormiston Families Point-1 Service (if in Lowestoft or Waveney). By contacting Suffolk SENDIASS ([www.suffolksendiass.co.uk](http://www.suffolksendiass.co.uk)) Suffolk Local Offer ([www.suffolklocaloffer.org.uk](http://www.suffolklocaloffer.org.uk)) or Suffolk Parent Carer Network([spcn.org.uk](http://spcn.org.uk)) and SEND specialist such as SENDIASS/Suffolk Parent Carer Network
- Reviewing child Education Health and Care plan for advice
- Seeking medical advice maybe consider speaking to (SENCo) Special Educational Needs Coordinator or student support within your education setting
- In all cases, inform the designated safeguarding lead within your setting.

# 7 Roles and responsibilities within schools

## Headteacher

- All incidents of self-harm should be reported to the designated safeguarding lead regardless of perceived severity
- Lead whole school culture of positive mental wellbeing, including awareness of emotional wellbeing, mental health issues and self-harm, and be supported to do so
- Personal, Social, Health and economic Education (PHSE) – is an essential way to address the young people’s emotional wellbeing and mental health needs
- Support training for staff on emotional wellbeing and mental health issues including self-harm
- Ensure your school has a Mental Health Lead
- Develop and implement a school self-harm policy involving young people themselves, ensuring staff are aware of procedures to follow. Ensure all staff (including non-teaching) are aware of and understand the policy
- It is best practice to appoint one or more designated key staff to lead on emotional wellbeing (including self-harm)
- Provide practical and emotional support for key staff responding to self-harm
- Ensure that good procedures are in place for record keeping, audit and evaluation of activities in relation to self-harm in the school
- Ensure that all staff know where they can access support where required

### Reference:

Brown B, Nutt L, Beavis J, Bird K, Moore V. Understanding and responding to children and young people who self-harm A guide for practitioners Cambridgeshire and Peterborough NHS foundation trust (Feb 2009)

<p><b>All staff and teachers</b></p>	<ul style="list-style-type: none"> <li>• All incidents of self-harm should be reported to the designated safeguarding lead regardless of perceived severity</li> <li>• Be aware of all self-harm toolkit/policy documents (alongside safeguarding policy) and be clear who you need to inform if you are concerned about self-harm</li> <li>• Discuss an incident or disclosure of self-harm with the designated self-harm lead as soon as you become aware of it, and inform the student that you are doing this</li> <li>• Make it known to the student that there are staff available to listen to them (and how they can be accessed)</li> <li>• Review the toolkit about how to speak to children and young people about self-harm and confidentiality</li> </ul>
<p><b>Designated safeguarding lead</b></p>	<ul style="list-style-type: none"> <li>• Ensure that all students know who the designated safeguarding lead is that they can talk to if they are experiencing or thinking about self-harming or are aware of another student who is thinking about self-harming/has self-harmed</li> <li>• Ensure all students know where to access leaflets and support about coping with self-harm, as well as other emotional wellbeing issues.</li> <li>• Ensure you are aware of the Emotional Wellbeing Gateway website (<a href="http://www.emotionalwellbeinggateway.org.uk">www.emotionalwellbeinggateway.org.uk</a>) for information, advice and guidance on common mental health issues, signpost parents who are worried about their child's emotional wellbeing and mental health. And The Source website for young people (<a href="http://www.thesource.me.uk/wellbeing">www.thesource.me.uk/wellbeing</a>)</li> <li>• Ensure the implementation of the Self-Harm Policy</li> <li>• Maintain up to date records of students experiencing self-harm, incidents of self-harm, concerns surrounding the issue and support provided to students</li> <li>• Communicate, where appropriate, with the headteacher and/or other key staff, on a regular basis and keep them informed of all incidents and developments</li> <li>• Ensure you are confident and up to date in your understanding of self-harm including training where required</li> <li>• Be aware of what organisations and key services in your area can support young people who self-harm</li> <li>• Be aware of information sharing and confidentiality arrangements, including when it is essential to share information with other organisations</li> <li>• Inform the student's parents, if appropriate, and liaise with them as to how to best manage the situation</li> <li>• Respond to any mention of suicidal feelings or behaviour as a matter of urgency</li> <li>• Ensure that all first-aiders are well informed about self-harm.</li> <li>• Take care of your own emotional wellbeing and seek support/supervision as and when necessary</li> </ul>
<p><b>School governors</b></p>	<ul style="list-style-type: none"> <li>• Agree with the school senior leadership team how awareness and understanding of self-harm should be promoted, including in the curriculum, training and information for parents</li> <li>• Support the development of school policy around self-harm</li> <li>• Be assured that students are aware of who they can talk to at the school around self-harm and where to access leaflets and toolkit around coping with self-harm</li> </ul>

Table adapted from: Rentoul.L Practical toolkit for schools – supporting the school's self-harm policy. NHS Kernow 2015

## Staff self-care

Staff may find it difficult or upsetting when discussing issues relating to self-harm with children or young people. It is important for staff to look after themselves and seek help and support where necessary. Seek advice from a GP for further support. Some schools may have access to more specific programmes for staff support. Make sure you seek supervision and talk to the appropriate lead, remembering to keep information confidential where required. Your school may have a Mental Health First Aider you could talk to about your own health and wellbeing. Organisations can have training on how to train staff up as a Mental Health First Aider. Staff should not work beyond their limitations. Where staff wish to improve skills, knowledge and confidence with regards to helping children/young people who self-harm, further training is recommended.

# 8

## Advice and Referrals



If the child or young person's mental health symptoms are acute and carry a level of risk, then please seek urgent medical advice. Contact the First Response 24/7 helpline on 0808 196 3494.

The CFYP Wellbeing Under 18's Service (5 - 18-year olds) works with children, young people and families who are living with mild to moderate mental health difficulties in the Suffolk area. Intervention could be provided directly to young people around the age of 11 and above, to parents and carers, individually, within a group or via a Webinar.

### Primary Mental Health Workers (PMHW)

The PMHW service is part of the Child, Family and Young People Wellbeing service and when assessed as needed will work with colleagues to ensure the child / young person gets the clinical support that they require.

**PMHW are allocated to different geographical areas and each school has an allocated PMHW. The PMHW service offers:**

- Advice and consultation to professional i.e Early help Teams, Schools
- Assessments
- Training to other professionals
- Short term direct work with children and families.

#### **How to contact the service:**

You can contact the PMHW Service on 01473 296110 if you wish to discuss support for your school. Each school has an allocated PMHW which can be contacted during weekdays for any mental health concerns of pupils.

## The Emotional Wellbeing Hub

The Emotional Wellbeing Hub provides access to Child and Adolescent Mental Health Services (CAMHS) services, providing a simple process for schools, professionals, families and young people to make a referral or get advice about wellbeing and mental health services.

The Emotional Wellbeing Hub offers telephone advice and a referral point for anyone who is concerned about the emotional wellbeing or mental health of a child or young person aged 0-25 years, in East and West Suffolk. (Please note if your school is based in Lowestoft or Waveney you should contact the Ormiston Families Point 1 Service which is the equivalent service for this area.)

### The Emotional Wellbeing Hub Service provides:

- An online referral form process for professionals who are concerned about a child or young person's emotional wellbeing and mental health which can be accessed through the Emotional Wellbeing Gateway website (see below).
- A consultation helpline for expert advice about emotional wellbeing and mental health issues relating to children and young people aged 0-25 years.
- A multi-agency team of emotional wellbeing practitioners to identify the right course of action for successful intervention with a child or young person experiencing poor mental health.
- Young people can also contact the Emotional Wellbeing Hub helpline or make a self-referral if they are worried about their emotional health.

### How to contact the service:

Staff, professionals and young people can contact the Emotional Wellbeing Hub on: 0345 600 2090, Monday to Friday 8am – 7.30pm for consultation or advice prior to a referral. Referrals can be made online via the Emotional Wellbeing Gateway website at: [www.emotionalwellbeinggateway.org.uk](http://www.emotionalwellbeinggateway.org.uk). For Waveney area Ormiston Families Point 1 Service on 0800 977 4077 Monday to Friday 8am – 7pm, Email: [Point1-support@ormistonfamilies.org.uk](mailto:Point1-support@ormistonfamilies.org.uk) For other mental health support services in Waveney, visit: [www.justonenorfolk.nhs.uk/mentalhealth](http://www.justonenorfolk.nhs.uk/mentalhealth).

Where staff are unsure about what action to take for a child or young person who is self-harming, consultations are available via this service.

Please note the Emotional Wellbeing Hub is not a crisis helpline. If it is an emergency you should call 999.

For out of hours and weekends, contact the First Response 24/7 helpline which offers immediate support for anyone with mental health difficulties. Call 0808 196 3494.



## Psychology and Therapeutic Services (P&TS)

P&TS are an experienced team of Child, Adolescent, Community and Educational Psychologists, Family Systemic Psychotherapist, Assistant Psychologists and Inclusion Facilitators who work with children and young people aged 0-25, across Suffolk.

The service works with groups of students to deliver interventions and projects, and offers an Emotional Literacy Support Assistant (ELSA) training programme to schools to support the emotional needs of their pupils.

The ELSA training is given to teaching assistants and learning support assistants, and covers emotional literacy and awareness, self-esteem, active listening and communication skills, understanding and managing anger, social skills, friendship skills and therapeutic stories, in which to help staff build supportive relationships with children and young people experiencing emotional difficulties.

### **To contact the service:**

If you have any questions about this service, please call 01473 264700 or email [IF@suffolk.gov.uk](mailto:IF@suffolk.gov.uk)

To submit a referral for support to the P&TS team complete either their Educational Psychologists' referral form or the Inclusion Facilitators' referral form which can be downloaded from the Suffolk County Council website:

[www.suffolk.gov.uk/children-families-and-learning/pts/accessing-our-service](http://www.suffolk.gov.uk/children-families-and-learning/pts/accessing-our-service)



# 9

## Useful Information and Contacts

Staff should be aware that when generally searching about self-harm online, some sites that come up may be pro self-harming. Therefore care is required with online sites. The resources below are recommended for further help and resources:

Resource/service	Contact information
<b>PMHW Service</b>	Primary Mental Health Worker based on your school's area. You can contact the PMHW Service on 01473 296110 if you wish to discuss support for your school.
<b>Emotional wellbeing Hub</b>	The Emotional Wellbeing Hub provides access to CAMHS services, providing a simple process for schools, professionals, families and young people to make a referral or get advice about wellbeing and mental health services. Call 0345 600 2090 or Visit <a href="http://www.emotionalwellbeinggateway.org.uk">www.emotionalwellbeinggateway.org.uk</a> or <a href="http://www.thesource.me.uk/hub">www.thesource.me.uk/hub</a> (for young people)
<b>Ormiston Families Point 1 Service</b>	Point 1 provides an advice and referral service for young people experiencing mental health and emotional wellbeing problems for those based in the Lowestoft and Waveney area. Call 0800 977 4077 <a href="http://www.point-1.org.uk">www.point-1.org.uk</a>
<b>Wellbeing Service</b>	Provides a range of support and self-help advice to people with common emotional wellbeing and mental health issues, such as low mood, depression or stress. Call 0300 123 1503 <a href="https://www.wellbeingnands.co.uk/suffolk/">https://www.wellbeingnands.co.uk/suffolk/</a>
<b>School Nursing Team</b>	provide advice and support for any concerns that you may have about your child's/ children's health and wellbeing. Monday to Friday 9am -5pm call on 03456 078866 or email on <a href="mailto:childrenshealth@suffolk.gov.uk">childrenshealth@suffolk.gov.uk</a> . Chathealth texting service is available for young people aged 11 to 19 years old. Texts are responded to by a member of the school nursing team between 9am and 4:30pm Monday to Friday. (excluding bank holidays). You can text them on 07507 333356.
<b>Suffolk Safeguarding Partnership</b>	Suffolk Safeguarding Partnership website has policies, including prevention of youth suicide <a href="https://www.suffolkscb.org.uk/safeguarding-topics/self-harm/">https://www.suffolkscb.org.uk/safeguarding-topics/self-harm/</a>
<b>Suffolk: MASH Social care team</b>	Suffolk MASH receives and processes all safeguarding referrals of children and adults at risk of harm and abuse. Customer First on 0808 800 4005. MASH Consultation Line on 0345 606 1499

Resource/service	Contact information
<b>Emotional Wellbeing Gateway/Infolink Families Directory</b>	The Emotional Wellbeing Gateway website provides information, advice and guidance pages on common mental health issues. It is also an online directory of local services and community groups to support professionals, young people and families. <a href="http://www.emotionalwellbeinggateway.org.uk">www.emotionalwellbeinggateway.org.uk</a>
<b>Psychology &amp; Therapeutic Services</b>	The Psychology & Therapeutic Services offer an ELSA training programme to schools. Call 01473 264700 <a href="https://www.suffolk.gov.uk/children-families-and-learning/pts/elsa/">https://www.suffolk.gov.uk/children-families-and-learning/pts/elsa/</a>
<b>The Source - for young people</b>	The Source is a website that provides information, advice and sources of support to young people in Suffolk about a range of topics, including emotional health and wellbeing. <a href="http://www.thesource.me.uk/wellbeing">www.thesource.me.uk/wellbeing</a>
<b>Kooth</b>	Kooth provides free, safe anonymous online counselling for 11 to 18-year olds. They also have a range of self-help materials for young people. <a href="http://www.kooth.com">www.kooth.com</a>
<b>Chathealth</b>	Chathealth is a service where a young person can text a school nurse to ask for confidential health advice. Text 07507 333356 (available Mon-Fri 9.30am to 4.30pm).
<b>SENDIASS</b>	Provides an information, advice and support service to children and young people with Special Educational Needs and Disabilities (SEND). <a href="http://www.suffolksendiass.co.uk">www.suffolksendiass.co.uk</a>
<b>PACT</b>	Parents and Carers Together supports parents and carers of children and young people with mental illness, diagnosed or not; empowering and advising with experience and empathy. <a href="http://www.parentsandcarerstogether.co.uk/">www.parentsandcarerstogether.co.uk/</a>
<b>Moodwise</b>	Moodwise is a new website developed by Public Health Suffolk, designed to help young people find services and digital tools that can support their emotional wellbeing and mental wellbeing. <a href="http://www.moodwise.co.uk">www.moodwise.co.uk</a>
<b>CAT Network</b>	Children & Young People's Action & Transformation (CAT) Network is for young people who would like to share their experiences of mental health to help improve emotional wellbeing support services in Suffolk. Schools and young people can contact the CAT Network on 07713 093 090 or email: <a href="mailto:cat.group@suffolk.gov.uk">cat.group@suffolk.gov.uk</a> . For more details visit <a href="http://www.thesource.me.uk/health">www.thesource.me.uk/health</a>
<b>Suffolk Young People's Health Project (4YP)</b>	A local charity, which provides and coordinates services that improve the social, emotional, and physical health and wellbeing of young people in Suffolk, aged 12-25 01473 252607 <a href="http://www.4yp.org.uk">www.4yp.org.uk</a>
<b>Young Minds</b>	Young Minds Crisis Messenger Service: 24/7 mental health crisis support. Young people in emotional distress can Text 85258 A national charity working towards improving wellbeing and mental health of children and young people Young Minds Parent Helpline: 0808 802 5544 (Mon-Fri 9.30am-4pm) <a href="http://www.youngminds.org.uk">www.youngminds.org.uk</a>
<b>Samaritans</b>	A national charity aimed at providing emotional support to anyone in emotional distress 116 123 (freephone 24 hour helpline) <a href="http://www.samaritans.org">www.samaritans.org</a>

Resource/service	Contact information
<b>Mind</b>	Mind - Understanding Self-harm booklet: www.mind.org.uk/media/5133002/mind_und_self-harm_singles_4-web.pdf Provide advice and support to anyone experiencing mental health problems www.mind.org.uk
<b>Rethink</b>	A national mental health charity offering information, advice and support about mental health issues www.rethink.org
<b>Harmless</b>	A national voluntary organisation for those who self-harm, their families and professionals www.harmless.org.uk
<b>Papyrus/HOPELineUK Helpline</b>	HOPELineUK A national UK strategy aimed at the prevention of young suicide. 0800 068 41 41 www.papyrus-uk.org
<b>SelfHarm.co.uk</b>	SelfharmUK is a project dedicated to supporting young people impacted by self-harm, providing a space to talk, ask any questions and be honest about what's going on in their life. www.selfharm.co.uk
<b>Epic friends</b>	Advice for young people on ways to help friends who may be self-harming www.epicfriends.co.uk
<b>Lifesigns</b>	An online, user-led voluntary organisation, to create understanding about self-injury and provide information and support to people of all ages affected by self-injury. www.lifesigns.org.uk
<b>Childline</b>	Trained counsellors who can talk to anyone aged under 19 about any issue they are going through. www.childline.org.uk/
<b>Anne Freud</b>	The Anne Freud 'Schools in Mind' is a free network for school staff to share practical, academic and clinical expertise regarding the wellbeing and mental health issues that affect schools. www.annafreud.org/schools-and-colleges/
<b>Family Lives</b>	A charity which supports parents with all aspects of family life www.familylives.org.uk/about/
<b>The Wish Centre</b>	A charity which provides advice and online support for young people to support recovery from self-harm, violence, abuse and neglect. www.thewishcentre.org.uk
<b>Beat Eating Disorders</b>	The leading charity for advice and support about eating disorders. Helpline 0808 801 0677 Studentline 0808 801 0811 www.beateatingdisorders.org.uk
<b>Togetherall (formerly Big White Wall)</b>	Togetherall (Big White Wall) provides a safe, anonymous online community where you can talk about what you're going through, and share experiences with people who feel the same as you. There is also a library of articles, tips and courses to help you understand how you are feeling. Trained counsellors, called Wall Guides, are online 24/7 to keep the service safe. www.bigwhitewall.com
<b>MindEd</b>	MindEd is a free educational resource website on children and young people's mental health for families, health professionals and teachers. The site is written and quality assured by experts in child and adolescent mental health. www.minded.org.uk

## Support for staff:

### Education Support

Education Support are the only UK charity dedicated to improving the health and wellbeing of the entire education workforce.  
Hotline 08000 562 561  
[www.educationsupport.org.uk](http://www.educationsupport.org.uk)

### GP

For additional support or referral to counselling/mental health services, please contact your GP

## Support resources for adults/parents who are self-harming

### GP

Local GP should be able to point towards appropriate help services/resources

### Mind

Provide advice and support to anyone experiencing mental health problems  
[www.suffolkmind.org.uk](http://www.suffolkmind.org.uk)  
[www.mind.org.uk](http://www.mind.org.uk)

### NHS choices

Information and signposting to support services for those who self-harm  
<https://www.nhs.uk/conditions/self-harm/>

### Recommended books about self-harm

Can I Tell You About Self-Harm?: A Guide for Friends, Family and Professionals. By Jonathan Singer Pooky Knightsmith

The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma. By Bessel van der Kolk

The Whole-Brain Child: 12 Proven Strategies to Nurture Your Child's Developing Mind. By Dr Tina Payne Bryson, Dr. Daniel Siegel

# 10

## Appendices

### — Appendix 1: —

#### **'I feel like hurting myself!'** **Advice and support if you or a friend are self-harming**

Reference: My friend is self-harming, what can I do to help?' adapted from 'Supporting Children and Young People who Self-Harm: Guidelines for School Staff (2009): Northamptonshire Children and Young People's Partnership'.

### — Appendix 2: —

#### **Self-Harm -A guide for parents and carers**

# — Appendix 3: —

## Templates for schools to use

### A: Template letter to parents following self-harm meeting

Date:

Dear (parent / carer)

I am writing to you following our meeting to discuss the concerns about \*\*\*\*\*. Thank you for meeting with me – I do realise how concerning this situation must be for you and it is important that we work together to support \*\*\*\*\*.

To confirm our discussion, Input where appropriate, suggestions below.

- Summarise the discussion from meeting – include detail of self-harming and any specific concerns raised
- Outline agreed actions (including advice to access other services – GP / Emotional Well-being and Mental Health Service)
- Outline what support has been/will be put in place in school
- Confirm arrangements for future communication with parent/carer
- Sign-post to any resources to support parent / carer

We will always continue to provide support to \*\*\*\*\* in school. If you gain any more information or changes with regards to the self harming, please could you let us know as soon as possible So that we can all work together to support \*\*\*\*\*.

We will continue to communicate with you if we have any further concerns but, meanwhile, if there is anything else we can do to help please do not hesitate to contact me.

Yours sincerely,

Copies to:

## B: Template Self-harm incident recording form

Child/young person's name:	
Age:	Gender:
Year:	Special needs: Y/N
Staff member completing form:	Position:
Date of report:	Number of previous reported incidents:
Incident description	
Time and context of occurrence:	
Action taken by school:	
Were parents contacted (if not, why not?)	
<p>Was advice sought from your schools allocated Primary Mental Health Worker?          Y/N. If Yes please give details as follows:          name of PMHW contact:          Contact number:          Advice Given:</p>	
<p>Have the young person or the family sought advice or made a referral to the Emotional Wellbeing Hub ?          Y/N. If yes, please give details as follows:          Date and status of referral          Advice given:</p>	
Issues discussed:	
Has a risk assessment been undertaken?	
Recommendations/actions agreed:	
Follow up:	
Signature:	provide information

Adapted from: Northamptonshire Children & Young People's Service Hospital and Outreach Education Northamptonshire Toolkit for supporting children and young people presenting with Self-Harming Behaviours, or Intent to Self-Harm, Northamptonshire County Council, Nene CCG, Northamptonshire Healthcare NHS Foundation Trust, NHS Corby CCG, LGSS, Northamptonshire Young Healthy Minds Partnership (2014).

# — Appendix 4: —

## **What do we know about self-harm in Suffolk: Healthwatch Report**

'My Health, Our Future' is a Healthwatch Suffolk project exploring the mental health and emotional wellbeing of children and young people (aged 11 - 19) attending schools and colleges across the county. To date, the project has recorded views from over 26,000 young people.

As part of this project, young people are asked about their views on a range of important topics including (amongst many others) self-harm, self-esteem, body image, stress, bullying and their experiences online.

<https://healthwatchesuffolk.co.uk/wp-content/uploads/2020/02/Self-Harm-Short-Report-2019-LQ-1.pdf>

# — Appendix 5: —

## Risk Management Plan for schools managing young people with self-harming behaviours:

Date plan completed:	
Date updated:	
Date to be reviewed:	
Is this part of a One Plan /SEN support?	

What is the self-harm behaviour? (Please tick / add in other relevant information)	
• Drug or alcohol use	
• Restricted eating	
• Cutting, scratching, burning or other	
• Absconding	
• Exposing self to risks	
• Other, give details	

Are the parents / carers aware and involved in the management plan?	
• Name of parents / carers:	
• Contact details:	
• How frequently are school staff in contact with parents / carers to liaise in relation to support?	
• Views of parents / carers:	

It is essential that the young person has a support network within school and that staff allocated to offer this can do so reliably. Consideration therefore needs to be given to who is available to offer this and how this person will receive their support. It would be preferable if this member of staff has some training in supporting young people who self-harm.

**Does the young person have a support person within school who he/she is able to communicate with? (this should be an adult not peer or prefect)**

• Name of support person:	
• How often is the contact?	
• Who will provide this if support person not available?	
• Any notes of what support is most helpful and any special arrangements (e.g. time out card, daily check-ins)	

**Does the young person have friends who are aware of the self-harm and are supportive?**

• Are these relationships consistent?	
• How are the friends managing this supportive role?	

**Is the young person's GP aware and is the young person receiving any treatment or medical support?**

• Name of GP and contact details:	
-----------------------------------	--

**Is the young person known to CAMHS?**

• Name of care co-ordinator and contact details:	
--	--

**Is the young person receiving counselling?**

• Name of organisation providing counselling:	
• Name of counsellor and contact details:	

**Are any other agencies involved in supporting this young person and/or their family?**

• Name of organisation and key worker:	
--	--

**Is the young person in Care or subject to a 'Child Protection' or 'Child in Need' plan?**

Any notes made between supporting agencies and young person and family in relation to management of the self-harming behaviour:	
Any changes of behaviour that may need to be monitored and communicated to those involved in supporting the young person:	
Any activities within school which will need additional support, should be avoided or may act as a trigger of self-harm behaviour (consideration needs to be given to sensory needs when a young person has special educational needs):	
Any known specific dates that may trigger distress for the young person (e.g. anniversary of a significant loss):	

This information should be treated confidentially. However, the young person's safety is paramount and therefore it is necessary to liaise with those involved with the care of the young person as appropriate to ensure his/her safety.

Plan taken from Essex County Council: Suicide prevention toolkit for schools (2015)