



Milford Haven School

Self-Harm Policy

For review by: Assistant Headteacher
Approved by: Milford Haven Governor
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Introduction

Milford Haven school is committed to safeguarding and promoting the welfare of pupils and expects all staff and volunteers to share this commitment. We endeavour to provide a safe and welcoming environment where pupils are respected and valued. We are alert to the signs of self-harming and follow our procedures to ensure that pupils receive effective support and protection. The school works in partnership with other children's services.

The procedures contained in this policy apply to all staff and governors.

1. Context and purpose

This policy has been put in place to ensure that we have a consistent approach from staff who deal with pupils who self-harm. School staff can play an important role in preventing self-harm, building resilience and supporting pupils, peers and parents of students currently engaging in self-harm.

2. Associated Guidance and Documentation

1. Guidance for professionals working with children and young people who self-harm
2. Milford Haven School Safeguarding Policy 2021
3. Milford Haven School Behaviour Policy (the power to search and confiscate prohibited items)
4. Educational Wales Guidance – Responding to issues of self harm and thoughts of suicide in young people.
5. Wales Safeguarding procedure's
7. Anti-Bullying Policy

3. Definition of self-harm

The nature and meaning of self-harm varies greatly from young person to young person and the reason or trigger for each action may differ on each occasion. Essentially though, self-harm is any behaviour where a person intentionally sets out to harm themselves. This may be an impulsive act or may be planned. Self-harm is a term that is used to describe a range of actions and behaviour.

It is important to be aware of signs that a student is self-harming. Below is a non-exhaustive list of some of the behaviours that some people might consider to be self-harm:

- Scratching or picking skin
- Cutting body

- Tying something around body
- Inserting things into body
- Scouring/scrubbing body excessively
- Banging/hitting/bruising the head or other parts of the body
- Pulling out hair
- Over/under eating
- Excessive drinking of alcohol
- Taking non-prescription drugs
- Burning or scalding
- Hitting walls with head and/or fist
- Taking an overdose or swallowing something hazardous
- Self-strangulation
- Risky behaviours such as running into the road
- Inappropriately using aerosols
- Episodes of alcohol/drug/substance misuse

4. Risk factors

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

Individual Factors:

- Depression/anxiety/mental health issues
- Poor communication skills
- Low self-esteem
- Poor problem-solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse
- Sexual identity

Family factors:

- Unreasonable expectations
- Neglect or physical, sexual or emotional abuse
- Lack of support at home
- Poor parental relationships and arguments
- Depression, self-harm or suicide in the family
- Loss, separation and bereavement
- Domestic violence
- Drug/alcohol misuse

Social Factors:

- Difficulty in making relationships/loneliness
- Being bullied or rejected by peers
- Easy availability of drugs, medication or methods of self-harm
- School issues

5. Why does self - harm happen?

During adolescence, pupils may encounter particularly painful emotional events for the first time.

They often do not know where to go for help and have not developed sufficient problem-solving skills to overcome these difficulties on their own.

As a result, they experience feelings of helplessness and hopelessness, which can lead them to self-harm or attempt suicide.

The three most common reasons why a young people self-harm are:

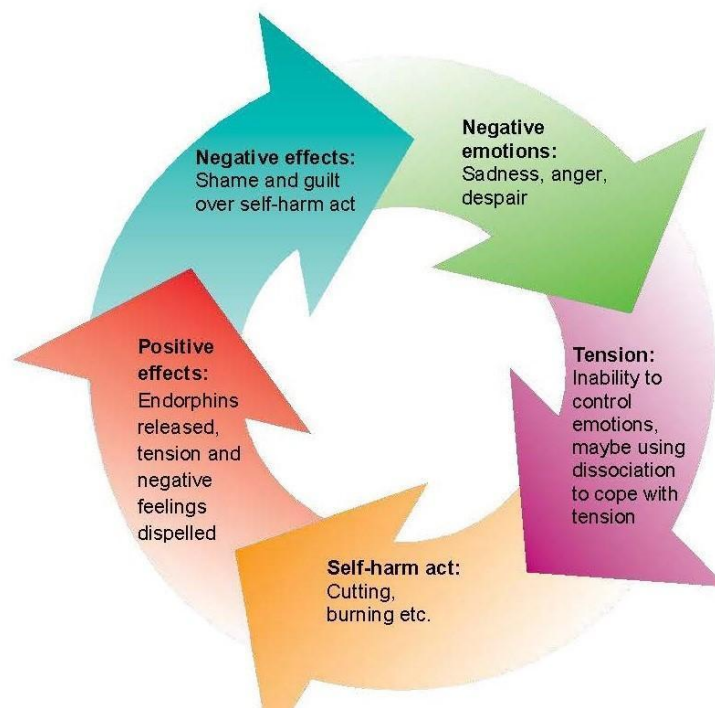
- Tension relief - a number of young people are unable to deal with their unpleasant feelings and find self-harm as a way of relieving stress and tension.
- Self-punishment – Young people who self-harm often have low self-esteem and feel that they are worthless or bad people who should be punished.
- To express distress - For some young people, self-harm is a way of showing others how bad they are feeling. They may use this as a way of reaching out to get help.

Other explanations from young people about why they self-harm include:

- That physical pain is easier to control than emotional pain
- It is a way of coping with past and current events
- Rarely, it can be a way of becoming a part of a group
- Some students may only self-harm once or twice in response to a particular difficulty, however, it can also become a regular activity that is hard to stop and may indicate more serious and longstanding emotional distress.

6. The cycle of self – harm

When a young person inflicts pain upon himself or herself the body responds by producing endorphins, a natural pain reliever that gives temporary relief or a feeling of peace. The addictive nature of this feeling can make self-harm difficult to stop. Young people who self-harm still feel pain, but some say the physical pain is easier to stand than the emotional/mental pain that led to the self-harm initially.



7. How can staff identify signs of self-harming?

All staff at Milford Haven School are expected to be vigilant and report concerns to the Designated Safeguarding Lead or Child Protection teacher, if they notice the following signs:

- Changes in clothing to cover parts of the body, e.g. wearing long sleeved tops
- Reluctance to participate in previously enjoyable physical activities, particularly those that involve wearing shorts or swimsuits.
- Changes in eating and or sleeping habits
- Changes in consumption of drugs/alcohol
- Changes in levels of activity or mood
- Increasing isolation from friends/family

Self-harm occurs more frequently in pupils with Additional Learning Needs. In those with severe learning disabilities, self-harm can form part of the pupil's profile of behaviour (for example, a pupil with autism biting his/her arms repeatedly). Any change in the frequency, severity or site of self-harm in these pupils is a cause for concern. Self-harm may be the only way a pupil with communication difficulties can display her/his emotional distress.

Self-harm in younger pupils is unusual but not unknown, so it is really important to be aware that behaviours such as hair pulling, small surface cuts, head banging and self-grazing/scratching may be signs of self-harm.

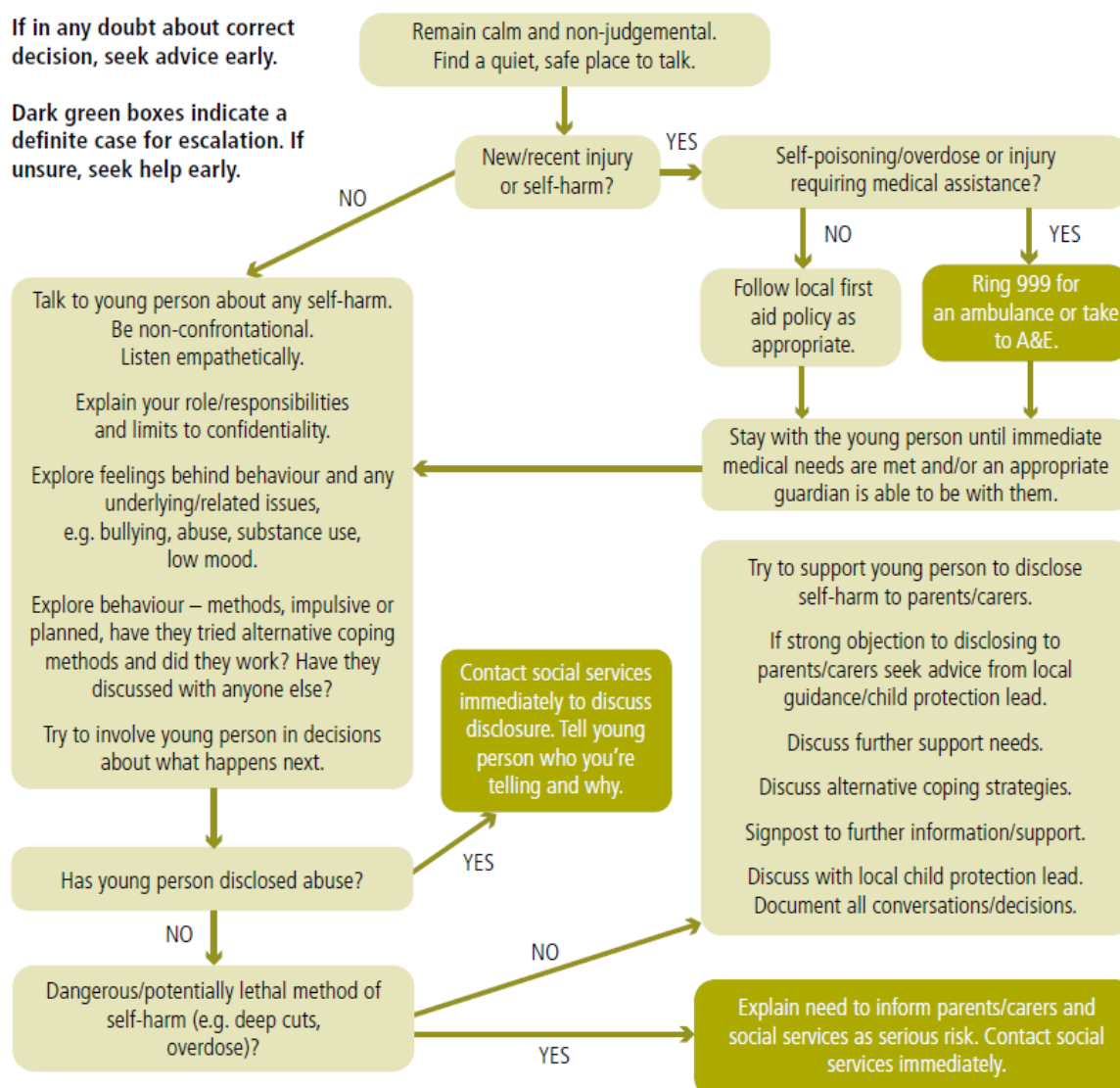
8. Suicidal thoughts and self-harm

Self-harm by cutting is not usually associated with suicidal thoughts but as described previously, it can be thoughts or behaviours used as an expression of distress or to relieve distress.

Suicidal ideation (a term often used by mental health practitioners) is where a young person expresses a genuine desire to die. Thoughts of hopelessness such as "I wish I was dead" are common. It is therefore important to explore the meaning behind the words the young person says.

This can be because a pupil has a serious depression with low self-esteem, low mood, inability to see that his/her situation could improve, nothing to live for and no chance of ever being happy.

Suicidal ideation is rare. If staff encounter a pupil who demonstrates these thoughts, they should immediately follow the protocols outlined below.



Frequent suicidal ideation with or without self-harm is a cause for referral for specialist assessment to consider a diagnosis of depression or other conditions, risk and treatment options.

9. School procedures when a pupil self-harm

Any member of the school staff who knows a pupil who may be thinking of self-harming must report this to the Designated Safeguarding Lead (DSL) or Child protection teacher or by using Edukey or in person if severe.

10. What to do if a child discloses thoughts of self-harm and /or superficial injury

Keep calm and give reassurance to the pupil.

- Focus on the pupil, not the behaviour or reasons for it and remember that the pupil may be reluctant to talk about self-harm.

- It is important not to make promises of confidentiality even though the pupil may put pressure on you to do so.
- Report the disclosure immediately to the Designated Safeguarding Lead (DSL) using Edukey
- The DSL will request for a member of staff to inform the pupil's parents/carers of the situation and be actively involved in the handling of the situation unless there is some overriding reason not to. The decision not to involve parents/carers should be taken in consultation with the DSL.
- The DSL will then liaise with the relevant Head of House. The Child Protection & LAC officer will take the lead in completing the Emotional Health referral online questionnaire and following the harm guidelines found in Appendix A, B and C for creating a plan of support for the pupil.
- Some instances of self-harm are Safeguarding issues. In this case the procedures laid out by the school's Safeguarding Policy must be followed by the DSL. There must be no promise of confidentiality made to the pupils and they must be told that the DSL will be informed.
- If there are no Safeguarding concerns and it is not deemed a referral to CAMHS is required, then the following procedures may be considered as part of the self-harm action plan:

1. A Support Plan e.g. identified key adult
2. An Early Help Assessment could be completed.

Referral to:

- School Counsellor
- Emotional Health Wellbeing
- Social Care
- Youth workers
- School nurse
- Other support agencies

It may be necessary to hold a multi-agency meeting with those involved to discuss the way forward.

The lead person will report all of the actions taken using Sims.

Example of typical Sims entry

- a) Confirm parent/carer contact
- b) Details of incident/underlying issues (fact based)
- c) Outcome of self-harm assessment (Appendix B)
- d) Level of support and details of strategies put in place from list of self-harm strategies (Appendix C)

Overview of self-harm Strategies (Appendix C and D)
Level 1 Level 2 Level 3 Level 4

Overview of self-harm Strategies (Appendix C and D)			
Level 1	Level 2	Level 3	Level 4
Complete the First Stage Support Plan	Complete a Support Plan and referral to school counsellor	Complete an Emotional health referral	School nurse to complete the an urgent CAMHS referral
Provide basic information about self-harming	Provide basic information about self-harming	Provide basic information about self-harming	Provide basic information about self-harming
Create and give the student a copy of the safety plan	Create and give the student a copy of the safety plan	Create and give the pupil a copy of the safety plan	Create and give the pupil a copy of the safety plan
Arrange a follow up meeting	Arrange a follow up meeting	Arrange a follow up meeting	Arrange a follow up meeting
	Make the House tutor and teachers aware of how they are feeling	Make the House tutor and teachers aware of how they are feeling	Make the House tutor and teachers aware of how they are feeling
		Submit an Emotional Health referral	School Nurse or Emotional Health & Wellbeing Team or School Counsellor to make an urgent telephone CAMHS referral

5. A copy of the risk assessment (Level 4)
6. Copies of all documentation for 4 and 5 should be uploaded to Edukey
7. Details of any further support put in place for the young person e.g. school nurse or school counsellor

11. A pupil engages in serious self-harm with/without suicidal ideation, requiring medical treatment e.g. injury or overdose (however small).

Required action is the same as above but also includes:

- If a member of staff finds that a pupil is in possession of dangerous equipment then a member of the Safeguarding team should be contacted
- If physical harm has been done the pupil should be taken to the First Aid Room for medical assessment and care. If appropriate, emergency services may be called by the First Aid officer.
- If the pupil is in hospital - a CAMHS Referral may be activated by the hospital and a referral to Emotional Health & Wellbeing team will be made by the school.

12. Confidentiality

Confidentiality is a key concern for pupils; however, Milford Haven School's Safeguarding Policy states pupils need to know that it is not possible to offer unconditional confidentiality. If you consider that a pupil is at risk of seriously harming him/herself or others then confidentiality cannot be kept. It is important not to make promises of confidentiality that you cannot keep, even though the pupil may put pressure on you to do so. If this is explained at the outset of any meeting the pupil can make an informed decision as to how much information s/he wishes to divulge.

13. How to help a pupil who self - harms

Continued support for a pupil who self-harms will normally be undertaken by a member of the pastoral team (Head of House or Child Protection & LAC officer) or an external specialist. It may be that a pupil identifies an alternative member of staff who they wish to support them. The protocols in Appendix A, B and C should be used by a Head of House to support the young person when directed to do so by the DSL.

The two main skills to employ when exploring these issues are effective listening skills and honest talking, for example:

- Let the pupil know you care and that s/he is not alone.
- Help the pupil express his/her emotions.
- Be an active listener; use your eyes as well as your ears to truly pay attention to what someone is saying or not saying. Watch the pupil's facial expression and the posture that accompanies the words s/he is speaking. These will all give clues as to how someone is truly feeling.
- Empathise with the pupil – imagine walking in his/her shoes.
- Be positive about what the pupil is saying without being dismissive.
- Know when to listen and when to talk.
- Do not try to solve the problem or say the "right" thing.
- Don't give advice too quickly or evaluate how the pupil is feeling and defining their experiences for them.

- Be aware of what you can and cannot do to help, and be prepared to discuss this with the pupil sensitively. Do not make promises you cannot keep.
- Use open questions rather than closed ones to help the pupil explore his/her concerns.
- Encourage and support the pupil to talk to others, such as parents/carers or other professionals.
- Encourage and support the pupil in seeking appropriate help.
- Do make sure you have an opportunity to “debrief” if necessary, following a disclosure.
- Do not attempt to keep information to yourself, but share it with an appropriate colleague

Tips for developing an action plan together

It is important that pupils feel that their concerns are being taken seriously and that they have an element of control over the process. A jointly negotiated action plan is a useful way of providing this. Action plans need to have achievable targets and agreements about whom to involve and other possible next steps. Pupils may benefit from being encouraged to establish more positive daily routines (eating, sleeping etc) or may need to establish a greater social network, for example, by taking on a new activity.

Distraction activities

Replacing the cutting or other forms of self-harm with safer activities can be a positive way of coping with the tension. What works depends on the reasons behind the self-harm.

Activities that involve the emotions intensely can be helpful.

Examples:

- Contacting a friend, family member or helpline.
- Going for a walk/run or other forms of physical exercise.
- Getting out of the house and going to a public place e.g. a cinema.
- Reading a book.
- Keeping a diary.
- Looking after an animal.
- Listening to music or singing along.
- Going shopping.
- Cooking/eating your favourite meal.

Coping with distress using self-soothing

- Using stress management techniques such as relaxation or massage.
- Having a bubble bath.
- Stroking a cat or other animal.
- Going to the park and looking at the things around you (birds, flowers, trees).
- Listening to the sounds as you walk.
- Listening to soothing music.

Sometimes it can be helpful to find other ways of discharging emotion which are less damaging than self-harm:

- Clenching ice cubes in the hand until they melt.

- Writing, drawing and talking about feelings.
- Writing a letter expressing feelings, which need not be sent.
- Going into a field and “screaming”.
- Hitting a pillow /soft object.
- Listening to loud music
- Physical exercise

An important part of prevention of self-harm is having a supportive environment which is focused on building self-esteem and encouraging healthy peer relationships. An effective anti-bullying policy and a means of identifying and supporting pupils with emotional difficulties is an important aspect of this. It is helpful to identify the support people in a pupil’s life and how to get in touch with them.

Examples are friends, family, school teacher, counsellor. Knowing how to access a crisis line is also important. In the longer term a pupil may need to develop ways of understanding and dealing with the underlying emotions and beliefs. Regular counselling/therapy may be helpful. Support from family members or carers are likely to be an important part of this. It may also help if the pupil joins a group activity such as a youth club, a keep fit class or a school-based club, which will provide opportunities for them to develop friendships and feel better about themselves. Learning stress management techniques, ways to keep safe and how to relax may also be useful.

14. Support organisation

- If you want more information, these links might be useful:
- Child line: 0800 1111 (Freephone 24 hr helpline) www.childline.org.uk
- Samaritans: 08457 90 90 90
- Young Minds: 0808 802 5544 www.youngminds.org.uk
- National Self-Harm Network: 0800 622 6000 www.nshn.co.uk
- **MIND Cymru** 0300 123 3393
- **Meic** 0808 80 23456
- National Self-Harm Network: 0800 622 6000 www.nshn.co.uk
- No Panic: www.nopanic.org.uk
- Kooth: www.kooth.com
- Free online support from **Kooth** (www.kooth.com)
- Information about **CAMHS** from
(<https://cavuhb.nhs.wales/our-services/children-young-people-family-health-services/cypf-emotional-wellbeing-mental-health/child-and-adolescent-mental-health-services-camhs/>)
- Calm Harm www.stem4.org.uk/calmharm
- Apps: Available from the Apps store - **Calm Harm, Headspace, Stay Alive, distrACT**

Appendix A – How to help a pupil who self-harms

Talking with pupils about self-harm is not always easy. It is difficult to talk about and many people worry that if they talk about self-harm, they might make things worse.

There is **NO EVIDENCE** to suggest that talking about self-harm will encourage young people to harm themselves. In fact, feedback from pupils is that they want to talk. However, this needs to be done sensitively since our responses can sometimes be seen as uncaring.

SLEEP is an acronym to help you remember 5 important steps when talking with Pupils about self-harm

- **S**top
- **L**isten
- **E**mpathise
- **E**xplore what they are saying
- **P**lan what you will do

Stop and make time to talk

- Remember that if a pupil approaches **you** it is **you** that they want to talk with.
- The pupil may not find it easy to talk so they need to be given time. Don't try to have a rushed conversation.
- If you are in the middle of doing something or are busy then let the pupil know that you will make a time to talk with them. Make a time there and then so that they know you are taking them seriously.
- Give the pupil your undivided attention. Show them that they are important and that you care.
- Make sure that where you meet is private so that you can have an open and honest conversation without interruption.

Listen to what the student is saying

- Listen carefully to what the pupil is saying. Listening signals that you care and will encourage them to talk.
- They may feel embarrassed or ashamed of what they have done so be patient and give them time.
- You don't have to jump in and try and fix things. Just listen to what the young person is saying

Empathise with how they are feeling

- Pupils need to know that you understand how they are feeling.
- **DO NOT** be judgemental or shocked by what they say. This will signal that it is not OK to talk about these things and they may be less open.
- Empathise with how they are feeling. Acknowledge that they are feeling distressed and that they must be feeling really bad.
- Reassure them that things can change. They have made an important step by talking with you today.

Explore what the young person is saying

- Be curious and explore what the pupil is really saying
- Pupils might say that "they wish they were dead". These words are frightening but they do not necessarily mean that the student person is suicidal.
- Often students say these things because they are feeling hopeless or frustrated and don't know what to do. Check this out and explore what the student means.

- The **harmLESS** questions provide a way of exploring this.

Plan what you will do

- The final stage is to agree the next steps. In the majority of situations this can be agreed collaboratively with the pupil.
- You need to decide who you need to talk with in order to keep the pupil safe. A pupil may not always want their parents or carers to know but if they are **at risk of seriously hurting themselves their parents need to know**.
- Tell the pupil that you are concerned about their safety. **Because you are worried about them the DSL will need to speak with their parents/carers so that they can help the student to keep safe.**

Appendix B - Assessing self-harm and planning support

harmLESS provides a series of questions you can ask the young person. **The questionnaire and linked responses are designed to be completed online. The questionnaire can be found at: <https://www.harmless.nhs.uk/assessment/>**

This questionnaire should only be completed if a member of staff is directed to do so by the DSL or Child protection teacher or Safeguarding & LAC officer.

How they answer these questions will inform a plan about the type of support they might require.

If at the end of this you are still unsure or worried about a pupil then phone the Emotional Health team.

HarmLESS Questions

How long have you had thoughts of wanting to hurt yourself?

Less than 2 weeks

More than 2 weeks

Have you **actually** harmed yourself?

Yes

No

Have you **recently** harmed yourself?

Yes

No

Have you harmed yourself **more** than once?

Yes

No

Have you ever thought that **life** is not worth living?

Yes

No

Have you made any plans to **end** your life

Yes

No

Have you ever **secretly** tried to end your life?

Yes

No

Is anyone **supporting** you at the moment?

Yes

No

Appendix C- Creating a Safety plan with the pupil

A completed questionnaire will produce one of the four responses below. A support plan will be created for each pupil and will be linked to one of the levels below.

Level 1 – First Step. It seems as if this student has thoughts of self-harm but has not actually acted on them

Level 2 – Support. It seems as if this student has harmed themselves but is not actively planning to end their life.

Level 3 – Emotional Health referral. It seems as if this student is regularly harming themselves but does not have any active plans to end their life

Level 4 –CAMHS referral. It seems as if this student is actively planning to end their life or has made a past serious suicide attempt.

Appendix D – Safety Plan

Pupil name:	
Date	
Year group	
Name of person completing form:	
Head of House	
House tutor	

I will **let your parent/carers know** how you are feeling.

--

I will **let your house tutor and teachers know** how you are feeling

--

If **you were worried** about yourself, you could talk with:

Friends

Safe adult

Professionals

If you were very worried about your safety or had hurt yourself:

These are some things that could help you to keep safe:

Talk to GP

Between 9:00am – 5:00pm, Monday to Friday, talk with your GP

After 5:00pm or at the weekends, telephone 111

Go to the Accident & Emergency Department

Any time contact Childline (0800 1111 or www.childline.org.uk)

If you are feeling that you might hurt yourself, these things might **help you to ride out this feeling**:

- Distracting activities (e.g. music, gaming, reading)
- Mood lifting activities (e.g. watch comedy, play instrument, internet)
- Physical activities (e.g. walking, running, cycling, dance)
- Social activities (e.g. text or talk to friends, social media)
- Other activities (e.g. playing with pets, hobbies, cooking)
- Download apps (e.g. Calm NHS app, Fluid 2)

1.

2.

3.

Information and advice about support from

- If you want more information, these links might be useful:
- Child line: 0800 1111 (Freephone 24 hr helpline) www.childline.org.uk
- Samaritans: 08457 90 90 90
- Young Minds: 0808 802 5544 www.youngminds.org.uk
- **MIND Cymru** 0300 123 3393

- **Meic** 0808 80 23456
- National Self-Harm Network: 0800 622 6000 www.nshn.co.uk
- No Panic: www.nopanic.org.uk
- Kooth: www.kooth.com
- Free online support from **Kooth** (www.kooth.com)
- Information about **CAMHS** from
(<https://cavuhb.nhs.wales/our-services/children-young-people-family-health-services/cypf-emotional-wellbeing-mental-health/child-and-adolescent-mental-health-services-camhs/>)
- Calm Harm www.stem4.org.uk/calmharm
- Free apps: **Calm Harm, Headspace, Stay Alive,**

We will meet again to review how you are feeling on :

Name of member of staff:

Copy for pupil and Edukey

Appendix E Risk Assessment

RISK ASSESSMENT

	School:	Assessed By:
	Task	Date:
		Re-assessment date:

Risk = severity x likelihood	Severity of harm		
	(1) Slight (All other injuries and illnesses)	(2) Serious (Over 3 day injury or serious illness)	(3) Major (Death or major injury)
Likelihood of occurrence			
(1) Low (Harm will seldom occur)	Low (1)	Low (2)	Medium (3)
(2) Medium (Harm likely to occur)	Low (2)	Medium (4)	High (6)
(3) High (Harm certain to occur)	Medium (3)	High (6)	High (9)

HAZARD - RISK	WHO MIGHT BE HARMED AND HOW?	EXISTING CONTROL MEASURES	RISK (severity x likelihood)	WHAT MORE NEEDS TO BE DONE TO CONTROL THE RISK?	BY WHOM? BY WHEN?

Glossary

Self-harm: *Talk to me 2: Suicide and Self Harm Prevention Strategy for Wales 2015-2020* defines self-harm as any intentional self-poisoning or self-injury that does not result in death, regardless of motive or the degree of suicidal intent. This definition is intentionally broad, as motives for self-harm are complex and varied (see page 12), and may change in an individual over time.

Suicidal behaviour: Self-harming behaviour which has the intended end effect of death.

Suicide: An intentional, non-accidental act that results in death.

Young people: For the purpose of this guidance, young people are defined as children and adolescents aged 18 and under. It is important to note, however, that local agencies and services for young people may have differing age criteria in some cases.